## Form 8879-EO

OMB No. 1545-1878

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2014, or fiscal year beginning 10/01 \_\_\_\_, 2014, and ending 09/30 \_\_\_\_, 20 15 \_\_\_\_

Do not send to the IRS. Keep for your records.

Department of the Treasury	▶ Information about Form 8879-EQ and	IKS. Keep for your records. Its instructions is at www.irs.cov/fi	om8870ee	ZU 14
Internal Revenue Service Name of exempt organization		ts ilistructions is at www.iis.goviit		tification number
	AND WILDLIFE FOUNDATION		52-138	
Name and title of officer	THIS WILLSELL LOUISITION	-	32 130	1133
TOKUNBO FALAY	I, CFO			
Part I Type of R	eturn and Return Information (Whole D	ollars Only)		
check the box on line leave line 1b, 2b, 3b, on the applicable line l	return for which you are using this Form 88 1a, 2a, 3a, 4a, or 5a, below, and the amou 4b, or 5b, whichever is applicable, blank ( below. Do not complete more than 1 line in	nt on that line for the return be do not enter -0-). But, if you e Part I.	eing filed with this f intered -0- on the r	orm was blank, then eturn, then enter -0-
1a Form 990 check h	nere 🕨 🗓 b Total revenue, if any (For	m 990, Part VIII, column (A), lin	ne 12) <b>1b</b> _	220183031.
2a Form 990-EZ ched	ck here b Total revenue, if any	(Form 990-EZ, line 9)	2b _	
3a Form 1120-POL c	heck here b b Total tax (Form	1120-POL, line 22)		
4a Form 990-PF che		ent income (Form 990-PF, Par		
5a Form 8868 check	nere Due (Form 6806	B, Part I, line 3c or Part II, line 8	lc) 5b _	
Part II Declaration	on and Signature Authorization of Offic	<del></del>		
organization's electror to send the organization the transmission, (b) the authorize the U.S. Tre financial institution accreturn, and the financial Agent at 1-888-353-45 involved in the process resolve issues related	complete. I further declare that the amount nic return. I consent to allow my intermediate on's return to the IRS and to receive from the ne reason for any delay in processing the re- asury and its designated Financial Agent to count indicated in the tax preparation softwa al institution to debit the entry to this account 337 no later than 2 business days prior to the sing of the electronic payment of taxes to re- to the payment. I have selected a personal if applicable, the organization's consent to e	e service provider, transmitter, IRS (a) an acknowledgement of turn or refund, and (c) the date of initiate an electronic funds with re for payment of the organizant. To revoke a payment, I mus e payment (settlement) date. I ceive confidential information ridentification number (PIN) as reserved.	or electronic return of receipt or reason of any refund. If aphdrawal (direct debiation's federal taxes to contact the U.S. Talso authorize the necessary to answere	originator (ERO) In for rejection of plicable, I It) entry to the lowed on this reasury Financial financial institutions or inquiries and
Officer's PIN: check o	one box only			7
X Lauthorize G	RANT THORNTON LLP	to enter my PIN	1 4 2 6 7	as my signature
	ERO firm name		Enter five numbers, b do not enter all zeros	
being filed with	ation's tax year 2014 electronically filed return a state agency(ies) regulating charities as my PiN on the return's disclosure consent sc	part of the IRS Fed/State prog		
If I have indica	of the organization, I will enter my PIN as my ated within this return that a copy of the retu state program, I will enter my PIN on the ret	rn is being filed with a state ag	jency(ies) regulatin	g charities as part of
Officer's signature		Date	6/2/20	ماا(
STREET, STREET	ation and Authentication	U Date		
	r your six-digit electronic filing identification			
	ed by your five-digit self-selected PIN.	5	6 4 6 8 1 4	3 6 6 0 5
		_	do not ente	all zeros
indicated above. I con	e numeric entry is my PIN, which is my signa firm that I am submitting this return in accor ized IRS e-file Providers for Business Returns	dance with the requirements of s.	f <b>Pub. 4163, M</b> ode	organization nized e-File (MeF)
ERO's signature 🕨		Date ▶	6/2/16	
	ERO Must Retain Thi Do Not Submit This Form To t	s Form - See Instructions	'o Do So	
For Paperwork Redu	ction Act Notice, see back of form.	io ii/o omess i/ednastan i		Form <b>8879-EO</b> (2014)
	•			

JSA 4E1676 1 000

## **Return of Organization Exempt From Income Tax**

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

		-
Open to	Pυ	ıblic
Inspec	tio	n

A F	or the	e 201	4 calendar year, or tax year beginning	10/01, <b>2014</b>	, and ending	<u>g</u>		09	9/30 <b>, 20</b> <sub>15</sub>
Р.			C Name of organization				D Employer ide	entific	cation number
<b>D</b> 0	heck if ap	plicable:	NATIONAL FISH AND WILDLIFE FOUN	DATION					
	Addre		Doing Business As				52-1384	139	9
	Name	change	Number and street (or P.O. box if mail is not delivered to street	eet address)	Room/suite		E Telephone n	umbe	r
	Initial	return	1133 FIFTEENTH STREET NW STE 11	.00			(202) 85	7 – 0	166
	Termin	nated	City or town, state or province, country, and ZIP or foreign p	ostal code					
	Ameno		WASHINGTON, DC 20005				<b>G</b> Gross receip	ts \$	281,411,429.
	Applic	ation	F Name and address of principal officer: JEFFREY	TRANDAHL			H(a) Is this a grou	ıp retu	urn for Yes X No
	_ pendir	iig	1133 FIFTEENTH ST NW STE 1100 W	ASHINGTON, D	C 20005		subordinates H(b) Are all subord		included? Yes No
$\overline{\Gamma}$	Tax-exe	empt sta							st. (see instructions)
J			WWW.NFWF.ORG	10.11 (2)(1)			H(c) Group exemp	otion n	number
ĸ			ization: X Corporation Trust Association	Other >	L Year of		` ' ' '		of legal domicile: DC
	art l		mmary		- : : : : :				
			describe the organization's mission or most significant	t activities: TO SII	STAIN RI	ESTOR	PE. AND E	NHA	NCE THE
Φ			ION'S FISH, WILDLIFE, PLANTS, AND						
Š									
ž	2	Charle	this box  if the organization discontinued its or		od of more the		of its pot socots		
Governance								<sub>3</sub>	28.
			er of voting members of the governing body (Part VI, lin					4	28.
Activities &			er of independent voting members of the governing bo					5	164.
Ξ			number of individuals employed in calendar year 2014						104.
둫								6	2
_			unrelated business revenue from Part VIII, column (C), li					7a	2,533
	b	Net ur	related business taxable income from Form 990-T, line	34				7b	1,533.
	_					7.4	Prior Year	-	Current Year
ne ne	8	Contri	butions and grants (Part VIII, line 1h)	COP	Y FOR		27,179,57	_	116,332,691.
Revenue	9	Progra	am service revenue (Part VIII, column (A), lines 3, 4, and 7d)	PUBLICII	NSPECTION		56,983,75	_	98,910,107.
Re	10	IIIVESI	ment income (r art vin, column (A), imes 3, 4, and ru)				2,410,63	_	5,756,977.
			revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c,		ı		-927,49		-816,744.
			evenue - add lines 8 through 11 (must equal Part VIII, o				35,646,46		220,183,031.
			s and similar amounts paid (Part IX, column (A), lines 1-			13	34,115,72		183,666,320.
			ts paid to or for members (Part IX, column (A), line 4) .					0	
es			es, other compensation, employee benefits (Part IX, colu				15,710,39	_	15,470,737.
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)				65,00	0.0	65,000.
Š			undraising expenses (Part IX, column (D), line 25) ▶						
			expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				6,924,16	_	9,317,742.
	18	Total e	expenses. Add lines 13-17 (must equal Part IX, column	(A), line 25)		15	56,815,28	4.	208,519,799.
		Reven	ue less expenses. Subtract line 18 from line 12			:	28,831,18	2.	11,663,232.
Net Assets or Fund Balances						Beginn	ing of Current Y	'ear	End of Year
sets	20	Total a	assets (Part X, line 16)			1,02	29,766,53	0.	1,345,544,846.
AB	21	Total I	iabilities (Part X, line 26)			8!	51,350,42	4.	1,157,012,252.
NE SE	22	Net as	sets or fund balances. Subtract line 21 from line 20			1	78,416,10	6.	188,532,594.
Pa	rt II	Siç	nature Block						
Un	der pen	nalties c	f perjury, I declare that I have examined this return, including	accompanying sched	ules and statem	nents, an	d to the best of	my l	knowledge and belief, it is
true	e, corre	ct, and	complete. Declaration of preparer (other than officer) is based of	on all information of whi	ich preparer has	s any kno	owieage.		
Sig			Signature of officer				Date		
He	re	\ \ '	TOKUNBO FALAYI	CFO					
			Type or print name and title						
		Print/	Type preparer's name Preparer's signat	ure	Date		Check	if F	PTIN
Paid		MAR	Y TORRETTA		06/02	/2016		ed	P00847851
	parer	Firm's	CDINE EHODIEON IID	•			Firm's EIN		6055558
Use	Only		address > 2010 CORPORATE RIDGE, SUITE 400 MCLEA	N VA 22102					3-847-7500
Mav	the IF		cuss this return with the preparer shown above? (see in:						X Yes No
			1 1	/		<del></del>	<del></del>		

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

## Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-1709

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

intoma revent	20 6011100			_			
	e filing for an Automatic 3-Month Extension, o						<b>&gt;</b> X
-	e filing for an <b>Additional (Not Automatic) 3-Mo</b> <b>plete Part II unless</b> you have already been grai						868
•	, , ,						
a corporatio 8868 to red Return for	iling (e-file). You can electronically file Form to required to file Form 990-T), or an addition quest an extension of time to file any of the Transfers Associated With Certain Persona ). For more details on the electronic filing of the	nal (not aut forms liste Il Benefit (	tomatic) 3-month exter ed in Part I or Part II w Contracts, which mus	ision of time. You can exith the exception of Fo t be sent to the IRS	elec orm in	tronic 8870 paper	ally file Form , Information format (see
Part I Au	itomatic 3-Month Extension of Time. On	ly submit	original (no copies no	eeded).			
A corporation	on required to file Form 990-T and requesting	an automa	atic 6-month extension	- check this box and con	nple	ete	
Part I only							▶□
All other co	rporations (including 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must use i	Form 7004 to request an	ext	ensio	n of time
to file incon	ne tax returns.			Enter filer's identifying	ıg nı	ımber,	see instructions
Type or	Name of exempt organization or other filer, see in	structions.		Employer identification nu	ımb	er (EIN	l) or
Type or							
print	NATIONAL FISH AND WILDLIFE FO			52-138413	9		
File by the due date for	Number, street, and room or suite no. If a P.O. bo.	x, see instru	ctions.	Social security number (S	SN)		
filing your	1133 FIFTEENTH STREET, NW						
return. See instructions.	City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions.				
	WASHINGTON, DC 20005						
Enter the Re	eturn code for the return that this application	is for (file a	a separate application fo	or each return)			0 1
		1	•				
Application		Return	Application				Return
ls For		Code	Is For				Code
Form 990 o	r Form 990-EZ	01	Form 990-T (corporat	ion)			07
Form 990-B	L	02	Form 1041-A				08
Form 4720	(individual)	03	Form 4720 (other tha	n individual)			09
Form 990-P	F	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
Telephon If the org If this is f for the whole a list with the until for the	anization does not have an office or place of le group, check this box	business ir ur digit Gro f it is for pa ion is for. poration re exempt org	FAX No.   in the United States, che pup Exemption Number art of the group, check the group, check the grained to file Form 990 ganization return for the	ck this box (GEN) this box  This box  CT) extension of time corganization named al	bov	 If and a	this is attach
3a If this nonref	cax year entered in line 1 is for less than 12 m Change in accounting period application is for Form 990-BL, 990-PF, 99 fundable credits. See instructions.	90-T, 4720	, or 6069, enter the	tentative tax, less any		\$	0
	application is for Form 990-PF, 990-T,	=					
	ated tax payments made. Include any prior yea				3b	\$	0
	ce due. Subtract line 3b from line 3a. Include		ent with this form, if re	quired, by using EFTPS			
	ronic Federal Tax Payment System). See instru				3с	-	0
	ou are going to make an electronic funds withdrawa	I (direct deb	it) with this Form 8868, se	ee Form 8453-EO and Forn	า 88	79-EC	for payment
instructions.							

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

Form 8868 (Rev. 1-2014) Page 2 Х • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box . . . . . . Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868. If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). Part II Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 print Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions. File by the 1133 FIFTEENTH STREET NW STE 1100 due date for filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See WASHINGTON, DC 20005 instructions Enter the Return code for the return that this application is for (file a separate application for each return) . . . . . . 0 1 1 Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) Form 4720 (other than individual) 03 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 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. The books are in the care of ►<sub>ROBERT C. MENZI, CHIEF FINANCIAL OFFICER</sub> Telephone No. ► 202 857-0166 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 and attach a list with the names and EINs of all members the extension is for. I request an additional 3-month extension of time until 08/15,2016. 10/01 5 For calendar year , or other tax year beginning , and ending 09/30 , 20 15 14 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Change in accounting period State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN. 8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 8a \$ 0 b If this application is for Forms 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 and any amount paid previously with Form 8868. 8b | \$ 0 c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 8c |\$ 0 Signature and Verification must be completed for Part II only. Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my

knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.



Title ►TAX SENIOR MANAGER

Date  $\triangleright 04/29/2016$ 

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

4F8055 1.000

Form 990 (2014) Page 2

SEE SCHEI	DULE O.			
prior Form 9 If "Yes," desc Did the org services? If "Yes," desc Describe the expenses. S	90 or 990-EZ? cribe these new services on Soganization cease conducting, cribe these changes on Schede organization's program servection 501(c)(3) and 501(c)(6)	or make significant changes in I	now it conducts, any progran	Yes X No  Yes X No  Yes X No  ices, as measured by
ta (Code:		<sub>25,871.</sub> including grants of \$ 183 AM EXPENDITURES IN LINE W		98,910,107.
	) (Expenses \$	including grants of \$	) (Revenue \$	)
ec (Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
(Expenses \$	am services (Describe in Sched including gra m service expenses ▶	nts of \$ ) (Revenue	:\$)	
SA	· · · · · · · · · · · · · · · · · · ·			Form <b>990</b> (2014)

Form 990 (2014)
Part IV Chacklist of Paguired Schodules

-ar	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
_	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
4.0	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	7.7
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	116	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b	Λ	
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15	- 1	
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		22
.,	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<b>- '</b> '	21	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	13	-22	
	If "Yes," complete Schedule G, Part III	19		Х
202	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		

Page 4 Form 990 (2014)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R</i> ,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	l	Х	

Form **990** (2014)

4E1030 1.000 40930I 649C NFWF PAGE 6 Form 990 (2014) Page **5** 

#### Part V Statements Regarding Other IRS Filings and Tax Compliance 180 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable \_\_\_\_\_\_\_\_1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Χ Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X Χ **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial Χ **b** If "Yes," enter the name of the foreign country: ▶ \_\_\_\_\_ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts Χ 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Χ c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Χ organization solicit any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Χ 7a and services provided to the payor? Χ **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7с Х X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Χ 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . . 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? Χ b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

JSA 4E1040 1.000 40930I 649C

Form **990** (2014)

NFWF

Part VI

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

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year <u>1a</u> 2	3		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent <u>1b</u> 2	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			-
6	Did the organization have members or stockholders?	6		X
7a		_		3.7
		7a		X
b				3.5
		7b		X
8				
	• • •	0.5	y	
_				
	, , , , , , , , , , , , , , , , , , , ,	OD	- 21	
9		۵.		x
Secti			<del>2</del> .)	
			Yes	No
10a	Did the organization have local chapters branches or affiliates?	10a		Х
-		10b		
11a		11a	Х	
b				
12a		of voting members of the governing body at the end of the tax year		
b				
	rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	there are material differences in voing rights among members of the governing body, of if the governing body delegated broad authority to an executive committee or similar committee or sellar in Schedule O.  In the provide of the provided in line 1a, above, who are independent.  In the provided of the provided in line 1a, above, who are independent.  In the provided of the provided in line 1a, above, who are independent.  In the provided of the provided in line 1a, above, who are independent.  In the provided of the provided of the provided in line 1a, above, who are independent.  In the provided of the provided of the provided in line 1a, above, who are independent.  In the provided of the proving body?  In the province of the provided of the provided of the provided of the proving body?  In the province of the provided of the provided of the proving body?  In the province of the province of the proving body?  In the province of the province			
13	The read are material differences in voting rights among members of the governing body, or if the governing body or in the governing body?  It the organization delegate control over management duties customarily performed by or under the direct supervision of officers, director, or trustees, or key employees to a management company or other person?  Joi the organization have any significant changes to its governing documents since the prior Form 990 was filed?  Joi the organization have members, stockholders?  Joi the organization have members or stockholders?  Joi the organization have members or stockholders?  Joi the organization thave members, stockholders, or other persons who had the power to elect or appoint or or more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  Joi the organization contemporaneously document the meetings held or written actions undertaken during he year by the following:  The governing body?  Sach committee with authority to act on behalf of the governing body?  Joi the organization with the properties of the governing body?  The governing body?  Sach committee with authority to act on behalf of the governing body?  The governing body?  Sach committee with authority to act on behalf of the governing body?  Sach committee with authority to act on behalf of the governing body?  The governing body?  Sach committee with authority to act on behalf of the governing body?  Sach committee with authority to act on			
14	there are material differences in voting ights among members of the governing body, or if the governing body, or if the governing body delegated broad sulchority to an executive committee or similar committee, explain in Schedule O.   In the first intermittee or similar committee, explain in Schedule O.   In the first intermittee or similar committee, explain in Schedule O.   In the first intermittee or similar committee, explain in Schedule O.   In the organization delegate control over management duties customarily performed by or under the direct upervision of officers, directors, or trustees, or key employees to a management company or other person?   In the organization make any significant changes to its governing documents since the prior Form 990 was filed?   In the organization have members or stockholders?   In the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?   In the organization on the power ing body?   In the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   In eyear by the		X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	If there are material differences in voting rights among members of the governing body, or if the governing body diegested broad authority to an executive committee or similar committee, explain in Schedule O.  The property officer, director, trustee, or key employee have a family relationship or a business relationship with any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person?  Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  Did the organization make am significant changes to its governing documents since the prior Form 990 was filed?  10th the organization have members or stockholders?  Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  7a. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  Each committee with authority to act on behalf of the governing body?  Each committee with authority to act on behalf of the governing body?  Each committee with authority to act on behalf of the governing body?  By the organization have written policies and proceedures governing the activities of such chapters, the organization smaling address? If Yes, Provide the names and addresses in Schedule O.  10th dre organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization review this Form 990.  11d the organization have a written ocnifict of interest policy? If Yos," go to line 13  12a Were officers, or rustees, and key employees required to dis			
b	Other officers or key employees of the organization	15b	X	
	,			
16a				v
_		16a		Δ
b				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	104		
Sect		160		
17				
1 <i>1</i> 18		501/	:)(3)c	Only)
		. 501(0	,,(0)5	Orny)
19	If there the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar in Schedule O.  b Enter the number of voting members included in line 1a, above, who are independent .  c Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee as the analyse relationship with any other officer, director, trustee, or key employees to a management company or other person?  3 Did the organization become aware during the year of a significant diversion of the organization's assets?  5 Did the organization have members or stockholders?  6 Did the organization have members or stockholders?  7 Did the organization have members or stockholders?  8 Did the organization have members or stockholders?  9 Did the organization the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  9 Did the organization the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  9 Leach committee with authority to act on behalf of the governing body?  10 Did the organization have a written policies or the persons of the relation's mailing address? If Yes, Provide the names and addresses in Schedule Ob.  10 Did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's new pro		policy	/. and
-	If there are material differences in voting rights among members of the governing body. or if the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body. or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  Enter the number of voting members included in line 1a, above, who are independent  28  Did any officer, director, trustee, or key employees have a family relationship or a business relationship with any other officer, director, trustee, or key employees?  Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other persons.  Did the organization have any significant changes to its governing documents since the prior Form 990 was filled?  Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders or persons other than the governing body?  Is the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  The governing body?  Is the organization ontemporaneously document the meetings held or written actions undertaken during the year by the following:  The governing body?  Is the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt proposes?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, last the organization have a written policies and procedures governing the activities of such chapters, last the organization have a written of the following persons include			.,
20		ls:▶		

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Form **990** (2014)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

California   Cal					(0	C)					
Nour Sper   Nour	(A)	(B)			Pos	ition			(D)	(E)	(F)
Company   Comp	Name and Title		1 -						'		
Companies to the organization with the org		1									
Companies   Comp		, ,			_			· ·			
Canal Cana		1	Indi or d	Inst	9	Key	High emp	For			•
(1)JOHN V. FARACI, JR. 1.00 CHAIRMAN, BOARD OF DIRECTORS 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1	vidu	it it	cer	em	nest	ner	-		
(1)JOHN V. FARACI, JR. 1.00 CHAIRMAN, BOARD OF DIRECTORS 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		below dotted	tor al tr	onal		oloy	# 8 9				
(1)JOHN V. FARACI, JR. 1.00 CHAIRMAN, BOARD OF DIRECTORS 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		line)	uste	fig		ee	nper				or gamzadono
(1)JOHN V. FARACI, JR. 1.00 CHAIRMAN, BOARD OF DIRECTORS 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			Õ	stee			nsat				
CHAIRMAN, BOARD OF DIRECTORS 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							ed				
CHAIRMAN, BOARD OF DIRECTORS 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											
(2)PATSY ISHIYAMA	- +	1.00									
VICE CHAIR, BOARD OF DIRECTORS		0	X						C	0	0
Ca)PAUL TUDOR JONES, II	-+	1.00									
VICE CHAIR, BOARD OF DIRECTORS		0	Х						0	0	0
(4)CARL R. KUEHNER, III		1.00									
VICE CHAIR, BOARD OF DIRECTORS		0	Х						0	0	0
(5)CHARLES D. MCCRARY   1.00   VICE CHAIR, BOARD OF DIRECTORS   0   X   0   0   0   0   0   0   0   0	(4)CARL R. KUEHNER, III	1.00									
VICE CHAIR, BOARD OF DIRECTORS		0	Х						0	0	0
Company   Comp	(5)CHARLES D. MCCRARY	1.00									
VICE CHAIR, BOARD OF DIRECTORS         0	VICE CHAIR, BOARD OF DIRECTORS	0	Х						0	0	0
CTDAN ASHE	_+	1.00									
DIRECTOR		0	Х						C	0	0
(8)MICHAEL CAMPBELL	_(7)DAN_ASHE	1.00									
DIRECTOR         0 X         0 0         0           (9)J. MICHAEL CLINE         1.00         0         0           DIRECTOR         0 X         0         0         0           (10)LANCE CONN         1.00         0         0         0         0         0         0           DIRECTOR         0 X         0			Х						C	0	0
(9)J. MICHAEL CLINE	(8)MICHAEL CAMPBELL	1.00									
DIRECTOR			Х						C	0	0
Company   Comp	(9)J. MICHAEL CLINE	1.00									
DIRECTOR         0 X         0 0         0           (11)RAY DALIO         1.00         0         0         0         0           DIRECTOR         0 X         0 0         0         0         0           DIRECTOR         0 X         0 0         0         0         0           (13)J.J. HEALY         1.00         0         0         0         0         0         0           DIRECTOR         0 X         0 0         0	-		Х						C	0	0
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DIRECTOR         0 x         0 0         0           (13)J.J. HEALY         1.00         0         0         0         0           DIRECTOR         0 X         0 0         0			Х						0	0	0
(13)J.J. HEALY	(12)CAROLINE GETTY	1.00									
DIRECTOR         0 X         0         0         0           (14) GEORGE C. HIXON         1.00         0         0         0		0	X						0	0	0
(14) GEORGE C. HIXON 1.00	(13)J.J. HEALY	1.00									
<del>1</del> 2			X						0	0	0
DIRECTOR   0   X       0   0   0	(14)GEORGE C. HIXON	+									
	DIRECTOR	0	X						0	0	0

Form **990** (2014)

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Form 990 (2014)

Part VII Section A. Officers, Directors,	Trustees, Ke	y En	nplo	ye	es,	and H	lig	hest Compensat	ed Employees (d	ontinue	ed)	
(A)	(B)			(	C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any	box,	unles	heck ss pe	erson	e than o	an	Reportable compensation from	Reportable compensation from related	an	stimated nount of other	
	hours for related organizations below dotted line)	office Individual trustee or director	Institutional trustee	a Officer	Key employee	Highest compensated employee	ee) Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org an	pensation the anization direlated anization	n d
15) CHRISTOPHER M. JAMES	1.00											
DIRECTOR	0	Х						C	0			C
16) SYDNEY M. JOHNSON	1.00											
DIRECTOR	0	X						C	0			(
17) JAMES P. KELLEY	1.00											
DIRECTOR	0	Х						C	0			(
18) EADDO H. KIERNAN	1.00											
DIRECTOR	0	Х						C	0			(
19) REUBEN MARK	1.00											
DIRECTOR	0	Х						C	0			(
20) R. KING MILLING	1.00											
DIRECTOR	0	Х						C	0			(
21) JENNIFER MULL	1.00											
DIRECTOR	0	Х						C	0			(
22) RUTH O'DONNELL MUTCH	1.00											
DIRECTOR	0	Х						C	0			(
23) DAVID PERKINS	1.00											
DIRECTOR	0	Х						C	0			(
24) CHAD PIKE	1.00											
DIRECTOR	0	Х						C	o			(
25) AMY ROBBINS TOWERS	1.00											
DIRECTOR	0	Х						C	o			(
1b Sub-total							_	C	0			
c Total from continuation sheets to Part V			• •	• •	• •		•	3,911,408.	0	9	28,9	02.
d Total (add lines 1b and 1c)	-		-				•	3,911,408.	0		28,9	
Total number of individuals (including but reportable compensation from the organiz	not limited to t	hose	liste	d a	bov	e) who	o re	eceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former employee on line 1a? If "Yes," complete So										3		Х
4 For any individual listed on line 1a, is to organization and related organizations	he sum of rep	ortab	ole d	com	per	nsation	n a	nd other compens	sation from the			
individual										4	X	
5 Did any person listed on line 1a receive												
for services rendered to the organization?										5		Х
Section B. Independent Contractors												
1 Complete this table for your five highest	compensated in	ndepe	ende	ent	con	tracto	rs t	that received more	than \$100,000 c	of		

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 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 ▶ 10

Form **990** (2014)

JSA 4E1055 1.000

Part VII Section A. Officers, Directors, (A)	(B)		_	((				(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for related organizations	box,	unles er and	Pos heck ss pe	ition more rson irect	e than or is both a or/truste	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	am com fro	stimated nount of other pensation om the anizatio	fion
	below dotted line)	Individual trustee or director	Institutional trustee	ï	Key employee	Highest compensated employee	er e	(1. 2, 1000 11100)			d related anization	
26) EDWIN R. RODRIGUEZ	1.00											
DIRECTOR	0	Х						0	0			
27) THOMAS L. STRICKLAND	1.00											
DIRECTOR	0	Х						0	0			(
28) KATHRYN D. SULLIVAN	1.00											
DIRECTOR	0	Х						0	0			(
29) JOHN A. TOMKE	1.00											
DIRECTOR	0	Х						0	0			
30) VICTORIA TSCHINKEL	1.00											
DIRECTOR	0	Х						0	0			
31) JOHN E. VON SCHLEGELL	1.00											
DIRECTOR	0	Х						0	0			
32) STEVEN A. WILLIAMS	1.00											
DIRECTOR	0	Х						0	0			
33) JEFFREY J. TRANDAHL	40.00											
EXECUTIVE DIRECTOR, CEO	0			Х				748,933.	0	2	28,9	)17
34) ROBERT MENZI	40.00											
EXEC VP, FINANCE & OPS	0			Х				384,593.	0		51,8	335
35) JENNIFER SIMPSON	40.00											
EXEC VP, FINANCE & OPS	0			Х				0	0			
36) TOKUNBO FALAYI	40.00											
INTERIM EVP, FINANCE&OPS	0			Х				203,400.	0		46,5	568
1b Sub-total							▶					
c Total from continuation sheets to Part V							▶					
d Total (add lines 1b and 1c)							<u> </u>					
2 Total number of individuals (including but				d al	OOV	e) who	re	eceived more than	\$100,000 of			
reportable compensation from the organiz	ation >	4(	)									
											Yes	No
3 Did the organization list any former employee on line 1a? If "Yes," complete Sc										3		Х
4 For any individual listed on line 1a, is to organization and related organizations individual	greater than	\$15	0,0	00?	If	"Yes,	,"	complete Schedu	le J for such	4	X	
5 Did any person listed on line 1a receive												
for services rendered to the organization?										5		Х
Section B. Independent Contractors												
<ol> <li>Complete this table for your five highest compensation from the organization. Represent.</li> </ol>												

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

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

Form **990** (2014)

(A)	(B)			(C)			(D)	(E)	(F)
Name and title	Average hours per week (list any	box, office	ot che unless r and	Position eck mo perso a dire	ore than on is both ctor/trus	n an stee)	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
37) CLAUDE GASCON  EXEC VP, SCIENCE, EVAL, & PROG	40.00			2	ζ		335,716.	0	48,306
SENIOR VP, IDEA	40.00			2	2		326,482.	0	111,042
39) THOMAS E. KELSCH SENIOR VP, GEBF	40.00			2	2		321,865.	0	108,440
40) LILA HARPER HELMS EXEC VP, EXTERNAL AFFAIRS	40.00			Σ	Σ		297,828.	0	80,570
11) GREGORY KNADLE  VP, GOVERNMENT RELATIONS	40.00			Σ	Σ		267,825.	0	36,046
42) GERRY VANS  VP, COMPLIANCE & RISK MGT	40.00				Х		227,351.	0	26,257
VP, CONSERVATION PROGRAMS	30.00				Х		209,731.	0	45,986
VP, HUMAN RESOURCES	40.00				х		198,623.	0	86,235
45) MATTHEW BRAUGHLER DIRECTOR, FDN DEVELOPMENT	40.00				х		197,588.	0	17,209
46) MICHAEL SHARP DIRECTOR, GEBF	40.00				х		191,473.	0	41,491
1b Sub-total c Total from continuation sheets to Part VII, Se d Total (add lines 1b and 1c)	ction A					<b>&gt; &gt;</b>			
2 Total number of individuals (including but not li reportable compensation from the organization		hose I 40		abo	ve) wh	o re	eceived more than	\$100,000 of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu									Yes No
4 For any individual listed on line 1a, is the s organization and related organizations gre individual	um of rep ater than	ortab \$15	le co 0,00	mpe 0?	ensatio	n aı s,"	nd other compens complete Schedu	sation from the le J for such	4 X
5 Did any person listed on line 1a receive or a									7 41

compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Form **990** (2014)

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Part VIII Statement of Revenue

		Check if Schedule O contains a respor	nse or note to an	y line in this Part VII	II		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns 1a	32,688.				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues					
S, C	С	Fundraising events 1c	2,462,333.				
ia Tar	d	Related organizations 1d					
ns, Simi	е	Government grants (contributions). 1e	80,505,567.				
e Si	f	All other contributions, gifts, grants,					
턴		and similar amounts not included above 1f	33,332,103.				
o d c	g	Noncash contributions included in lines 1a-1f: \$	592,375.				
	h	Total. Add lines 1a-1f		116,332,691.			
nue			Business Code				
Program Service Revenue	2a	IMPACT DIRECTED EVIRONMENTAL ACCOUNT	900099	98,910,107.	98,910,107.		
ě	b						
Ş	С						
Sel	d						
аш	е						
ogr	f	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f	<u> ▶</u>	98,910,107.			
	3	Investment income (including divider	nds, interest,				
		and other similar amounts)	🏲	6,680,964.		2,533.	6,678,431.
	4	Income from investment of tax-exempt bond	proceeds .	0			
	5	Royalties		0			
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d		<b>.</b>	0			
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 59,359,417.					
	b	Less: cost or other basis					
		and sales expenses 60,283,404.					
	С	Gain or (loss) 923,987.					
	d	Net gain or (loss)		-923,987.			-923,987.
ne	8a	Gross income from fundraising					
/en		events (not including \$2,462,333.					
è		of contributions reported on line 1c).					
ř		See Part IV, line 18 a					
Other Revenue	1	Less: direct expenses		015 =			00.5 = 11
0	C	Net income or (loss) from fundraising events		-816,744.			-816,744.
	9a	Gross income from gaming activities.  See Part IV, line 19 a					
	١.						
	b	Less: direct expenses b  Net income or (loss) from gaming activities.		0			
	C			0			
	10a	Gross sales of inventory, less returns and allowances					
	L	Less: cost of goods sold b	1				
	b	Net income or (loss) from sales of inventory		0			
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	C						
	d	All other revenue					
	е	Total. Add lines 11a-11d		0			
	12	Total revenue. See instructions		220,183,031.	98,910,107.	2,533.	4,937,700.

52-1384139

## Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX							
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 • • •	178,416,083.	178,416,083.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	723,370.	723,370.				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	4,526,867.	4,526,867.				
	Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees	3,495,106.	1,730,648.	917,650.	846,808.		
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	5 101 066	202 541	1 255 225		
7	Other salaries and wages	7,135,592.	5,181,966.	898,541.	1,055,085.		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	914,250.	648,659.	124,592.	140,999.		
9	Other employee benefits	3,172,561.	2,149,102.	461,049.	562,410.		
10	Payroll taxes	753,228.	506,690.	119,461.	127,077.		
11	Fees for services (non-employees):						
	Management	0	20				
b	Legal	281,139.	92,712.	128,003.	60,424.		
C	: Accounting	298,786.	200,747.	79,365.	18,674.		
d	I Lobbying	0					
е	Professional fundraising services. See Part IV, line 17.	65,000.			65,000.		
1	Investment management fees	532,562.		532,562.			
g	Other. (If line 11g amount exceeds 10% of line 25, column						
	(A) amount, list line 11g expenses on Schedule O.)	1,611,460.	792,496.	497,668.	321,296.		
12	Advertising and promotion	122,932.	87,037.	23,206.	12,689.		
13	Office expenses	1,511,165.	1,092,274.	123,141.	295,750.		
14	Information technology	376,002.	265,194.	72,983.	37,825.		
15	Royalties	0					
16	Occupancy	1,590,747.	1,214,030.	170,785.	205,932.		
17	Travel	1,099,490.	727,428.	137,285.	234,777.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0					
19	Conferences, conventions, and meetings	677,639.	256,215.	252,481.	168,943.		
20	Interest	0					
21	Payments to affiliates	0					
22	Depreciation, depletion, and amortization	701,903.	460,649.	117,271.	123,983.		
23	Insurance	195,494.	78,216.	71,201.	46,077.		
24	Other expenses. Itemize expenses not covered						
-	above (List miscellaneous expenses in line 24e. If						
	line 24e amount exceeds 10% of line 25, column						
	(A) amount, list line 24e expenses on Schedule O.)						
а	RECRUITING	143,081.	96,140.	37,994.	8,947.		
_	DUES AND SUBSCRIPTIONS	79,702.	48,594.	10,927.	20,181.		
	LICENSES	67,096.	38,370.	15,968.	12,758.		
	OTHER EXPENSES	28,544.	-7,616.	18,381.	17,779.		
	All other expenses	,	,	,			
	Total functional expenses. Add lines 1 through 24e	208,519,799.	199,325,871.	4,810,514.	4,383,414.		
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	0		1,110,011	-,,		
JSA	-	9			F 000 (004.4)		

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Form **990** (2014)

Form 990 (2014) Page **11** 

#### Part X Balance Sheet

1 6	ILA	Dalance Sheet					
		Check if Schedule O contains a response or	note	to any line in this Pa	art X		<u> </u>
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			18,311,332.	1	12,905,111.
	2	Savings and temporary cash investments			113,891,006.	2	27,869,888.
	3	Pledges and grants receivable, net	18,612,516.	3	20,572,933.		
	4	Accounts receivable, net	581,315.	4	1,724,415.		
	5	Loans and other receivables from current and					
		trustees, key employees, and highest co	omper	nsated employees.			
		Complete Part II of Schedule L			0	5	0
	6	Loans and other receivables from other disqualified pers	ons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B) and sponsoring organizations of section 501(c)(9) volu					
w		organizations (see instructions). Complete Part II of Sche	dule L		0		0
Assets	7	Notes and loans receivable, net			0		0
Ass	8	Inventories for sale or use			0	<u> </u>	0
,	9	Prepaid expenses and deferred charges			532,866.	9	817,445.
	10 a	Land, buildings, and equipment: cost or					
			10a				
	b	Less: accumulated depreciation	10b	3,620,184.	1,713,900.		
	11				196,324,245.		283,577,770.
	12	Investments - other securities. See Part IV, line 11			37,517,536.	_	40,834,955.
	13	Investments - program-related. See Part IV, line 11				13	0
	14	Intangible assets			0	1.7	0
	15	Other assets. See Part IV, line 11			642,281,814.	<del>                                     </del>	955,153,581.
_	16	Total assets. Add lines 1 through 15 (must equal			1,029,766,530.	16	1,345,544,846.
	17	Accounts payable and accrued expenses			2,389,046.		2,907,993.
	18	Grants payable			9,644,577.		8,880,199.
	19	Deferred revenue			193,781,726.	_	191,306,288.
	20	Tax-exempt bond liabilities			(44, 340, 030		050 711 074
Liabilities	21	Escrow or custodial account liability. Complete Pa			644,348,839.	21	952,711,274.
ij	22	Loans and other payables to current and for					
Lia		trustees, key employees, highest compen			0	22	0
	23	disqualified persons. Complete Part II of Schedule Secured mortgages and notes payable to unrelate			0		0
	24	Unsecured notes and loans payable to unrelated				24	0
	25	Other liabilities (including federal income tax,				27	
	23	parties, and other liabilities not included on lines					
		of Schedule D			1,186,236.	25	1,206,498.
	26	<b>Total liabilities.</b> Add lines 17 through 25			851,350,424.	26	1,157,012,252.
_		Organizations that follow SFAS 117 (ASC 958),					
es		complete lines 27 through 29, and lines 33 and	34.				
anc	27	Unrestricted net assets			92,397,678.	27	98,958,179.
Bal	28	Temporarily restricted net assets			86,018,428.	28	89,574,415.
힏	29	Permanently restricted net assets		<u></u>	0	29	0
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.	, chec	k here  and			
Net Assets or	30	Capital stock or trust principal, or current funds				30	
se	31	Paid-in or capital surplus, or land, building, or equ	ıipmer			31	
Ä	32	Retained earnings, endowment, accumulated inco				32	
Net	33				178,416,106.	33	188,532,594.
	34	Total liabilities and net assets/fund balances	<u> </u>	<u> </u>	1,029,766,530.	34	1,345,544,846.
					•		Form 990 (2014)

Form **990** (2014)

JSA 4E1053 1.000

Form 990 (2014) Page **12** 

Part	X Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	220,1	83,0	31.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	208,5	19,7	799.
3	Revenue less expenses. Subtract line 2 from line 1	3		11,6	63,2	232.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	.78,4	16,1	106.
5	Net unrealized gains (losses) on investments	5		-1,5	46,7	744.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		1	00 E	20 6	0.4
Part	33, column (B))	10		.88,5	34,3	94.
ıaıı	Check if Schedule O contains a response or note to any line in this Part XII					
	one of the contract of the con				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olair	n in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b	Х	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audit					
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	vers	iaht			
	of the audit, review, or compilation of its financial statements and selection of an independent acc		•	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O.	•				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	fortl	h in			
	the Single Audit Act and OMB Circular A-133?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	_	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits.		3b	Х	

Form **990** (2014)

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

### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047
2014
Open to Public

Inspection

**Employer identification number** Name of the organization NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 9 An organization that normally receives: (1) more than 331/3% 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 331/3% 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of support (see (described on lines 1-9 listed in your governing other support (see above or IRC section document? instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2014

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	105,836,638.	95,996,450.	156,160,483.	127,179,571.	116,498,467.	601,671,609.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	105,836,638.	95,996,450.	156,160,483.	127,179,571.	116,498,467.	601,671,609.
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)						51,957,181.
6	Public support. Subtract line 5 from line 4.						549,714,428.
	tion B. Total Support	4 > 0040		( ) 00 (0	( 1) 00 ( 0		
	ndar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	105,836,638.	95,996,450.	156,160,483.	127,179,571.	116,498,467.	601,671,609.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	2,566,362.	2,891,163.	3,196,360.	3,552,127.	1,533.	18,886,976.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	-1,487,653.	-1,712,568.	-958,610.	-927,495.	-816,744.	-5,903,070.
11	Total support. Add lines 7 through 10						614,657,048.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	187,369,169.
13	First five years. If the Form 990 is f organization, check this box and stop here						
Sec	tion C. Computation of Public Sup		•				00.42
14	Public support percentage for 2014 (li		•			14	89.43%
15	Public support percentage from 2013	•				15	97.45%
16a	331/3% support test - 2014. If the o						.
L	this box and <b>stop here.</b> The organization						• • •
D	331/3% support test - 2013. If the contact this have and step here. The area						
170	check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization.						
114	'a 10%-facts-and-circumstances test - 2014. 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						•
	organization						. <b>&gt;</b>
b	10%-facts-and-circumstances test - 2						and line
	15 is 10% or more, and if the orga	anization meets	the "facts-and	l-circumstances	" test, check th	nis box and <b>st</b>	op here.
	Explain in Part VI how the organizati						-
	supported organization				_	•	▶ □
18	Private foundation. If the organization						
	instructions						

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 Page **3** 

#### 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.)

	<u>'</u>	<del>`</del>			<u> </u>		
	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
. a	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
500	line 6.)						
	tion B. Total Support	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(6) 2012	(u) 2013	(e) 2014	(i) rotai
9	Amounts from line 6 Gross income from interest, dividends,						
104	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	as a section 501	(c)(3)
	organization, check this box and stop here.						▶ 🔲
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2014 (line 8,	column (f) divide	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2013 Sche					16	%
Sec	tion D. Computation of Investmen					,	
17	Investment income percentage for 2014 (lin			13, column (f))		17	%
18	Investment income percentage from 2013					18	%
	331/3% support tests - 2014. If the org						
	17 is not more than 331/3%, check thi						
h	331/3% support tests - 2013. If the orga	_	_	•			
D	line 18 is not more than 331/3%, check						
20	<b>Private foundation.</b> If the organization of		•	•			<del></del>
			_ ~~. On mile	,	,		

JSA 4E1221 2.000 Schedule A (Form 990 or 990-EZ) 2014

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Schedule A (Form 990 or 990-EZ) 2014 Page **4** 

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

  2. Did the organization have any supported organization that does not have an IRS determination of status.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2014

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Schedule A (Form 990 or 990-EZ) 2014 Page 5

1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's directors or trustees were allocated, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  2 Did the organization operate for the benefit of any supported organization other than the supported organization organization.  2 Did the organization operated, supervised, or controlled the supporting organization.  2 Section C. Type II Supporting Organizations  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting Organization's supported organization is a tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 hat was most recently filed as of the date of notification, and (3) copies of the organization's organization of the organization is effect on the date of notification, to the extent not previously provided?  2 Were any of the organization's officers, directors, or trustees either (i) appointed organization will be supported organization organizat				Yes	No
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c. A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supenvised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization of organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.  Section C. Type II Supporting Organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization is supported organization is supported organization is at year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's supported organization, to the extent not previously provided?  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's provided or (ii) a supported organization's have a significant voice in the organization's investment policies and in direct		below, the governing body of a supported organization?	11a		
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Section C. Type II Supporting Organizations  Yes  Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).  By reason of the relationship described in (2), did the organization's supported organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization's supported organization's played in this regard.  Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).  The organization satisfied the Activities Test. Complete line 2 below.  The organization as at explain how these activities of ine 2 below.  The organization as a explain how these activities of ine purposes, how the organization sand explain how these activities directly further the exempt purposes how the organization was responsive to those supported organization's involvement.  Did substantially all of the organization's invo					
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the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  2a  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  Parent of Supported Organizations. Answer (a) and (b) below.					
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that these activities constituted substantially all of its activities.  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2a  2b  2a  2b  2a  2a  2b					
of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>			2a		
of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>	h	Did the activities described in (a) constitute activities that thut for the organization's involvement one or more			
reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  2b  Parent of Supported Organizations. Answer (a) and (b) below.					
activities but for the organization's involvement.  2b  Parent of Supported Organizations. Answer (a) and (b) below.					
		activities but for the organization's involvement.	2b		
	3	Parent of Supported Organizations. Answer (a) and (b) below.			
	а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
trustees of each of the supported organizations? Provide details in Part VI.			3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	b				
of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.  School 10 A (Form 900 or 900 ET)					

JSA 4E1230 2.000

Part IV

Supporting Organizations (continued)

Schedule A (Form 990 or 990-EZ) 2014

Page 6 Schedule A (Form 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	S	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must con			structions. All
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		, , , ,
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall	y-integra	ited Type III supporting	g organization (see
instructions).			

Schedule A (Form 990 or 990-EZ) 2014

4E1231 2.000 40930I 649C NFWF Schedule A (Form 990 or 990-EZ) 2014 Page 7

Part '	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in <b>Part VI</b> ). See instructions.	o.gaa	0.10.10	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Ellie o amount divided by Ellie o amount		/ii\	(iii)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
a	2.00.00711 01 1110 11			
b				
C				
	Excess from 2013			
	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

4E1232 3.000 40930I 649C NFWF PAGE 23 Schedule A (Form 990 or 990-EZ) 2014 Page **8** 

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

SCHEDULE A, PART II -	OTHER INCOM	1E		- -	ATTACHMENT 1	
DESCRIPTION	2010	2011	2012	2013	2014	TOTAL
LOSS FROM FUNDRAISING EVENT	-1,487,653.	-1,712,568.	-958,610.	-927,495.	-816,744.	-5,903,070.
TOTALS	-1.487.653				-816.744	-5.903.070

Schedule A (Form 990 or 990-EZ) 2014

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

#### Schedule of Contributors

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. **Employer identification number** 

NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 501(c)(3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year 
▶ \$ \_\_\_\_\_\_

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

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

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

Name of organization NATIONAL FISH AND WILDLIFE FOUNDATION

Employer identification number 52-1384139

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

(a)			
No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _		\$6,900,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$4,000,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3 _	Name, address, and zir + 4	\$2,995,014.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
NO.	Name, address, and ZIP + 4	Total contributions	
No.	Name, address, and ZIP + 4	*48,649,859.	Person Payroll Noncash (Complete Part II for noncash contributions.)
	(b)	\$48,649,859.	Person Payroll Noncash (Complete Part II for noncash contributions.)
<sup>4</sup> -		\$48,649,859.	Person Payroll Noncash (Complete Part II for noncash contributions.)
<sup>4</sup> (a)	(b)	\$48,649,859.  (c) Total contributions	Person   X

Name of organization NATIONAL FISH AND WILDLIFE FOUNDATION

Employer identification number 52-1384139

Dort Contrib	utere (and instructions). Her duplicate conic	a of Dart Lif additional appear is not	52-1384139
	utors (see instructions). Use duplicate copie		T
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$6,406,351.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$3,698,991.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
 		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ivame, address, and 2n + 4	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll

Noncash
(Complete Part II for noncash contributions.)

Name of organization NATIONAL FISH AND WILDLIFE FOUNDATION

Employer identification number 52-1384139

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization NATIONAL FISH AND WILDLIFE FOUNDATION **Employer identification number** 52-1384139 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No.

(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(c) Use of gift

(c) Use of gift (b) Purpose of gift (d) Description of how gift is held

(a) No. from Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

from

Part I

(b) Purpose of gift

(d) Description of how gift is held

## SCHEDULE D (Form 990)

Department of the Treasury

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047

2014

Open to Public Inspection

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization Employer identification number NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Revenue included in Form 990, Part VIII, line 1

Schedule D (Form 990) 2014

PAGE 30

**\$**\_\_\_\_

NFWF

▶ \$

Page 2 Schedule D (Form 990) 2014

Par	t III Organizations Maintaining Col	lections of	Art, His	storical T	reasure	s, or Otl	ner Similar Asse	ts (cont	inue	ed)
3	Using the organization's acquisition, according to the collection items (check all that apply):	ession, and o	other reco	ords, checl	k any of	the follow	ving that are a sign	nificant u	se o	f its
а	Public exhibition		d _	Loan o	or excha	nge progra	ms			
b	Scholarly research		е	Other						
С	Preservation for future generations									
4	Provide a description of the organization	's collections	and exp	lain how t	they furt	her the or	ganization's exemp	t purpos	e in	Part
	XIII.									
5	During the year, did the organization solici						_			
	assets to be sold to raise funds rather than							Yes		No
Par	t IV Escrow and Custodial Arranger				ization a	answered	"Yes" to Form 99	0, Part I	√, Iin	ie 9,
	or reported an amount on Form	990, Part λ	K, line 21	•						
_										
1a	Is the organization an agent, trustee, cust			-			_			1
	included on Form 990, Part X?							Yes	Х	No
b	If "Yes," explain the arrangement in Part	KIII and comp	olete the f	ollowing tab	ble:					
					-		Amount			
	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
	Did the organization include an amount or							X Yes		No
	If "Yes," explain the arrangement in Part								Χ	
Par	t V Endowment Funds. Complete i		1		1		· · · · · · · · · · · · · · · · · · ·	(-)		1.
4.		Current year	( <b>a</b> ) Pi	ior year	(C) I Wo	years back	(d) Three years back	(e) Four	ears r	оаск
	Beginning of year balance									
	Contributions  Net investment earnings, gains,									
C										
ч	and losses Grants or scholarships									
	Other expenditures for facilities									
E										
f	and programs Administrative expenses									
	End of year balance									
g 2	Provide the estimated percentage of the c	urrent veer o	nd halan	o (lino 1a	column	(a)) hold ac				
	Board designated or quasi-endowment			e (iiile 19,	, coluitiii	(a)) Helu as	•			
	Permanent endowment > 9		- '0							
	Temporarily restricted endowment	%								
•	The percentages in lines 2a, 2b, and 2c s		00%							
3 <i>a</i>	Are there endowment funds not in the pos	•		ation that	are held	and admir	nistered for the			
	organization by:		.o organii		a. oo.a			<u> </u>	'es	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizati	ons listed as	required o	n Schedule	e R?			3b		
4	Describe in Part XIII the intended uses of									
	Land, Buildings, and Equipment Complete if the organization ar									
	Complete if the organization ar									
	Description of property	(a) Cost or (inves	other basis tment)		or other bas other)		cumulated (eciation	<b>d)</b> Book valu	ie	
1a	Land	,								
b	Buildings									
С	Leasehold improvements			2,1	L63,05	2. 1,4	33,823.	72	9,2	29.
d	Equipment				168,38	_	41,781.	2	6,6	05.
	Other				377,49		44,580.	1,33	2,9	14.
Tota	I. Add lines 1a through 1e. (Column (d) mu		n 990, Pai	t X, columi	n (B), line	e 10(c).)		2,08	8,7	48.

Schedule D (Form 990) 2014

4E1269 1.000 40930I 649C NFWF

Part VII Investments - Other Securities.			Page •
Complete if the organization answered	"Yes" to Form 990	, Part IV, line 11b. See Form 990, F	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 marke	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.  Complete if the organization answered	l "Yes" to Form 990	), Part IV, line 11c. See Form 990, F	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	
	. ,	Cost or end-of-year marke	
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> <u>(7)</u>			
(1)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.		•	
Complete if the organization answered	Tyes" to Form 990	), Part IV, line 11d. See Form 990, F	
	scription		(b) Book value
(1) SECURITY DEPOSITS			92,599
(2) IMPACT DIRECTED ENVIRO FUNDS (3) ACCRUED INTEREST RECEIVABLE			951,802,615 1,918,267
(4) DONATED LAND			1,340,100
(5)			1,310,100
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) li	ine 15.)	<b>&gt;</b>	955,153,581
Part X Other Liabilities. Complete if the organization answered	I "Yes" to Form 990	), Part IV, line 11e or 11f. See Form	990, Part X,
line 25.			
1. (a) Description of liability	(b) Book val	ue	
(1) Federal income taxes	1 006	400	
(2) DEFERRED RENT	1,206,	498.	
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>▶</b> 1,206,	498.	

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

JSA 4E1270 1.000

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

Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities 2b		
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	1	
	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part		_	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.)  Add lines 3a through 3d		
е	Add lines za through zu	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
		1	
С	Add lines 4a and 4b	4c	
5	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c 5	
5 Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.	5	
5 Part Provid	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1b	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
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<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
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<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
<b>Part</b> Provide 2; Part	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pat XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 art V, I	
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JSA 4E1271 1.000 Schedule D (Form 990) 2014

Page 5

IMPACT DIRECTED ENVIRONMENTAL FUNDS

SCHEDULE D, PART IV, LINE 2B

THE FOUNDATION MANAGES CERTAIN IMPACT DIRECTED ENVIRONMENTAL FUNDS ON BEHALF OF VARIOUS ORGANIZATIONS IN CONNECTION WITH THE FOUNDATION'S CHARTER TO UNDERTAKE AND CONDUCT ACTIVITIES THAT WILL FURTHER THE CONSERVATION AND MANAGEMENT OF FISH, WILDLIFE, AND PLANT RESOURCES. MANAGEMENT FEES ARE EARNED BY THE FOUNDATION IN CONNECTION WITH THESE ACTIVITIES, WHICH INCLUDE MONITORING PROJECT PROCESS, PROCESSING PAYMENTS TO ORGANIZATIONS, PERFORMING SERVICES ON PROJECTS, ASSISTING WITH EVALUATING PROJECT PROPOSALS, IN SEVERAL INSTANCES IMPLEMENTING THE ENTIRE SCOPE OF ACTIVITIES FROM THE REQUEST FOR PROJECT PROPOSALS TO FUNDS DISBURSEMENT AND EVENTUAL PROJECT CLOSE-OUT. THE FOUNDATION ACTS AS CUSTODIAN OF FUNDS RECEIVED AND EACH FUND IS HELD AND MANAGED AS A DISTINCT INVESTMENT BY THE FOUNDATION'S INVESTMENT MANAGEMENT SERVICE PROVIDERS. THE FUNDS MAINTAINED BY THE FOUNDATION AT YEAR-END ARE REFLECTED AS AN ASSET AND LIABILITY IN THE ACCOMPANYING STATEMENT OF FINANCIAL POSITION. AMOUNTS DISBURSED TO PROJECTS ARE REFLECTED AS BOTH REVENUES AND EXPENDITURES IN THE STATEMENT OF ACTIVITIES WHICH RESULTS IN A CHANGE IN NET ASSETS OF ZERO. INVESTMENT INCOME FROM IMPACT DIRECTED ENVIRONMENTAL FUNDS FOR SPECIFIC ORGANIZATIONS IS RECORDED AS AN ASSET AND CORRESPONDING LIABILITY WHEN EARNED.

LIABILITY FOR UNCERTAIN TAX POSITION (ASC 740)

SCHEDULE D, PART X, LINE 2

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE EXCEPT FOR UNRELATED BUSINESS INCOME. THE FOUNDATION HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE

Schedule D (Form 990) 2014

Page 5

MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS.

THE FOUNDATION ADOPTED THE PROVISIONS OF ASC 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, ON OCTOBER 1, 2009. UNDER ASC 740-10, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WILL BE SUSTAINED. THE IMPLEMENTATION OF ASC 740-10 HAD NO IMPACT ON THE FOUNDATION'S FINANCIAL STATEMENTS. THE FOUNDATION'S MANAGEMENT BELIEVES IT HAS NO UNRELATED BUSINESS INCOME AND NO MATERIAL UNCERTAIN TAX POSITIONS AND; ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. FOR THE TAX YEARS ENDED SEPTEMBER 30, 2015 AND 2014, THE FOUNDATION DID NOT RECOGNIZE ANY INTEREST OR PENALTIES.

#### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. 2014

Employer identification number

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

	Form 990, Part IV, line 14	4b.		, , , , , , , , , , , , ,									
1	<b>. .</b>												
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the												
	grants or assistance?					X Yes No							
2	Prograntmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other												
	assistance outside the United States.												
	assistants satisfaction 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 (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total												
	., .	offices in the	employees,	region (by type) (e.g.,	a program service, describe specific type of	expenditures for							
		region	agents, and independent	fundraising, program services, investments,	service(s) in region	and investments in region							
			contractors	grants to recipients	, , ,	Ĭ							
			in region	located in the region)									
(4)													
(1)	CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	PROG. RELATED GRANTS	71,009.							
,													
(2)	EUROPE			GRANTMAKING	PROG. RELATED GRANTS	178,140.							
_													
_(3)	EAST ASIA AND THE PACIFIC			GRANTMAKING	PROG. RELATED GRANTS	2,802,632.							
_(4)	NORTH AMERICA			GRANTMAKING	PROG. RELATED GRANTS	1,499,532.							
_(5)	SOUTH AMERICA			GRANTMAKING	PROG. RELATED GRANTS	13,500.							
(6)	SOUTH ASIA			GRANTMAKING	PROG. RELATED GRANTS	7,171.							
(7)	CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		19,623,508.							
(8)													
(9)													
(10)													
(11)													
(12)													
( /													
(13)													
(10)													
(14)													
(14)													
(15)													
(13)													
(46)													
<u>(16)</u>													
/4 <b>-</b> `													
(17)													
3a						24,195,492.							
b													
	sheets to Part I												
C	Totals (add lines 3a and 3b)					24.195.492.							

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

Schedule F (Form 990) 2014

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA	INLINE CLEAN	99,000.				
(2)			NORTH AMERICA	SEASONAL ASS	76,221.				
(3)			SOUTH AMERICA	BIRD DIVERSI	13,500.				
(4)			CENT. AMERICA/CARIBBEAN	COORDINATION	43,000.				
(5)			NORTH AMERICA	SEABIRD REST	552,184.				
(6)			NORTH AMERICA	SEABIRD CONS	178,140.				
(7)			EAST ASIA/PACIFIC	CONSERVING C	12,500.				
(8)			NORTH AMERICA	ST. LAWRENCE	116,895.				
(9)			CENT. AMERICA/CARIBBEAN	MESOAMERICAN	22,249.				
(10)			NORTH AMERICA	MARINE ENVIR	345,950.				
(11)			NORTH AMERICA	INVESTING IN	63,725.				
(12)			EAST ASIA/PACIFIC	CONNECTIVITY	50,895.				
(13)			NORTH AMERICA	DELTA GETTY	18,000.				
(14)			EAST ASIA/PACIFIC	INDONESIA IN	50,778.				
(16)			NORTH AMERICA NORTH AMERICA	RESULT-BASED RESTORATION	51,000. 16,197.				

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 2

Part	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
(1)			NORTH AMERICA	FACTORS INFL	24,791.					
(2)			NORTH AMERICA	FEASIBILITY	13,167.					
(3)			EAST ASIA/PACIFIC	ACCELERATING	2,688,460.					
(4)			CENT. AMERICA/CARIBBEAN	FINANCIAL SU	5,760.					
(5)			NORTH AMERICA	SWAN LAKE MA	23,402.					
(6)			SOUTH ASIA	MARINE MAMMA	7,171.					
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
2	Enter total number of recipient org by the IRS, or for which the grantee								15.	
_3	Enter total number of other organic							0-1	7.	

Schedule F (Form 990) 2014 Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (h) Method of valuation (e) Manner of (f) Amount of (g) Description (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of non-cash of non-cash cash disbursement recipients cash grant assistance assistance (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) 2014

Page 4 Schedule F (Form 990) 2014

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

4E1277 1.000 40930I 649C NFWF PAGE 40

Schedule F (Form 990) 2014 Page 5

### Part V Suppleme

VISITS.

Supplemental Information
Complete this part to provide the information required by

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

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

SCHEDULE F, PART I, LINE 2

THE ORGANIZATION REQUIRES THAT GRANT RECIPIENTS SUBMIT REPORTS

PERIODICALLY AND AT THE END OF THE PROJECT. GRANT RECIPIENTS AND

SUB-RECIPIENTS ABOVE A MINIMUM THRESHOLD MUST SUBMIT AUDITED FINANCIAL

STATEMENTS AT THE END OF THE FISCAL YEAR. THE REPORTS SUBMITTED ARE

REVIEWED BY PROGRAM DIRECTORS AND CONSERVATION DIRECTORS. NFWF PERFORMS

AN ANNUAL EVALUATION OF ITS PROGRAMS, WHICH MAY INVOLVE CONDUCTING SITE

Schedule F (Form 990) 2014

#### **SCHEDULE G**

(Form 990 or 990-EZ)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants XPhone solicitations Special fundraising events C In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees X Yes or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 EVENTS ASSOCIATES, INC. FUNDRAISING Χ 2,655,583 65,000 2,590,583. 2 3 5 6 7 8 9 10 2,655,583. 65,000. Total  $\triangleright$ 2,590,583. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, ND, OH OK, PA, RI, SC, TN, UT, VA, WA, WV, WI,

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

JSA

4E1281 1.000 40930I 649C Schedule G (Form 990 or 990-EZ) 2014

NFWF

Schedule G (Form 990 or 990-EZ) 2014 Page 2

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

		gross receipts greater than \$5,00	00.			
			(a) Event #1 CTGO DINNER	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through
45			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts	2,590,583.			2,590,583
œ		Less: Contributions Gross income (line 1 minus	2,462,333.			2,462,333
		line 2)	128,250.			128,250
	4	Cash prizes				
	5	Noncash prizes	43,167.			43,167
Direct Expenses	6	Rent/facility costs	507,848.			507,848
	7	Food and beverages	144,698.			144,698
	8	Entertainment	176,208.			176,208
	9	Other direct expenses	73,073.			73,073
	10	Direct expense summary. Add lines 4 Net income summary. Subtract line 1	through 9 in column (d)			944,994
Pa			anization answered "Y			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
irect E	4	Rent/facility costs				
	5	Other direct expenses				
	-	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)		<b>&gt;</b>	
_	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)	<b>&gt;</b>	
	a Is	nter the state(s) in which the organizate the organization licensed to conduct of "No," explain:		of these states?		Yes No
		ere any of the organization's gaming l	licenses revoked, suspe	nded or terminated durir	ng the tax year?	. Yes No

#### NATIONAL FISH AND WILDLIFE FOUNDATION

Sched	lule G (Form 990 or 990-EZ) 2014 Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	
~	amount of gaming revenue retained by the third party > \$
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶\$
	Description of services provided ▶
	Director/officer
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2014

# 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part I General Information on Grants a  1 Does the organization maintain records to the selection criteria used to award the grants.	substantiate th	e amount of the					X Yes No
2 Describe in Part IV the organization's prod	cedures for mor	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to Part IV, line 21, for any recipient	Domestic Ore t that received	ganizations a more than \$5	nd Domestic Gov ,000. Part II can b	rernments. Compe duplicated if a	plete if the organized ditional space is	zation answered "Y needed.	es" to Form 990,
1 (a) Name and address of organization or government	<b>(b)</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) ACES ENGINEERING							
901 CILLESSEN CT FARMINGTON, NM 87401	84-1486732		21,653.				SAN JUAN RIVER FISH
(2) AK SUSTAINABLE FISHERIES							
834 LINCOLN ST SAGE BLDG RM 23	27-0594449		15,950.				LOCAL FISH FUND INT
(3) AK DEPT OF FISH & GAME							
PO BOX 115526 AR UNIT JUNEAU, AK 99811	92-6001185	GOVT	120,325.				ANNUAL MOVEMENTS OF
(4) ALABAMA WILDLIFE FED							
3050 LANARK RD MILLBROOK, AL 36054	63-0496911		21,702.				NATIVE WARM SEASON
(5) ALASKA CONSERVATION							
911 WEST 8TH AVE STE 300	92-0061466		32,718.				POLAR BEARS AND PEO
(6) alaska marine conserv							
725 CHRISTENSEN DR ANCHORAGE, AK 99501	92-0155875	501(C)(3)	18,000.				SECURING COMMUNITY
(7) alaska maritime national							
95 STERLING HWY STE 1 HOMER, AK 99603	53-0201504	GOVT	30,000.				RED-LEGGED KITTIWAK
(8) ALASKA PACIFIC UNIVERSITY							
4101 UNIVERSITY DR ANCHORAGE, AK 99508	92-0023588		40,000.				GROWING ALASKAS FAR
(9) alaska sealife center							
301 RAILWAY AVE PO BOX 1329	92-0132479	501(C)(3)	19,021.				PACIFIC WALRUS TERR
(10) ALEX PUMP & SERVICES							
17728 NW 62ND ST ST. MARYS, KS 66536	48-1216220		60,000.				INSTALLATION OF PUM
(11) ALL AMERICAN TECHNICAL							
3515 B LAPLATA HWY FARMINGTON, NM 87401	20-4938185		35,793.				INSTALLATION OF INL
(12) ALLAMAKEE COUNTY							
635 9TH ST NW WAUKON, IA 52172	42-1132697	GOVT	37,724.				WATERLOO BEE DUCK C

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	TION					52-1384139	9
Part I General Information on Grants an	d Assistanc	е					
1 Does the organization maintain records to s							
the selection criteria used to award the gran	its or assistand	e?					X Yes No
2 Describe in Part IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part    Grants and Other Assistance to I							es" to Form 990,
Part IV, line 21, for any recipient t	that received	more than \$5	,000. Part II can b	oe duplicated if a	additional space is	needed.	
	# N = W .				(f) Method of valuation		T
1 (a) Name and address of organization or government	<b>(b)</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) ALLIANCE FOR CHES BAY							
3310 MARKET ST CAMP HILL, PA 17013	54-1060924	501(C)(3)	153,668.				BUILDING GREEN INFRA
(2) AMERICAN BIRD CONSERVANCY							
1834 JEFFERSON PLACE NW	52-1501259	501(C)(3)	607,613.				CONSTRUCTING A PREDA
(3) AMERICAN CONSERVATION							
1055 EAST 2100 SOUTH STE 206	37-1473291		68,640.				CERBAT FOOTHILLS REC
(4) AMERICAN FARMLAND TRUST							
1200 18TH ST NW WASHINGTON, DC 20036	52-1190211	501(C)(3)	15,778.				SNOQUALMIE VALLEY FO
(5) AMERICAN FOREST							
2000 M ST NW STE 550 WASHINGTON, DC 20036	52-1235124	501(C)(3)	9,201.				SHORTLEAF PINE IN TH
_(6) AMERICAN LITTORAL SOC							
18 HARTSHORNE DR STE 1 HIGHLANDS, NJ 07732	22-1731073	501(C)(3)	303,743.				BARRETTS RUN AFFORES
_(7) AMERICAN RIVER CONSER							
PO BOX 562 8913 HWY 49 COLOMA, CA 95613	68-0195752	501(C)(3)	59,090.				LADIES VALLEY RIPARI
(8) AMERICAN RIVERS							
1101 14TH ST NW STE 1400	23-7305963	501(C)(3)	131,497.				ECONOMIES OF SCALE D
(9) AMERICAN YOUTHWORKS							
216 E 4TH ST AUSTIN, TX 78701	74-2197942		10,538.				TEXAS CONSERVATION C
(10) ANACOSTIA WATERSHED SOC							
THE GW HOUSE 4302 BALTIMORE AVE	52-1666511	501(C)(3)	135,745.				ANACOSTIA WETLANDS A
(11) ANDERSON EQUIPMENT CO							
PO BOX 823564 PHILADELPHIA, PA 19182	25-0323970		6,178.				KENTS CREEK WALLEYE
(12) ANNE ARUNDEL COUNTY							
975 INDIAN LANDING RD	27-3502329		37,644.				NEW NEIGHBORHOOD NOR
2 Enter total number of section 501(c)(3) ar	nd governmen	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations	listed in the li	ne 1 table				<u></u>	

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### **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT						52-1384139	)
Part I General Information on Grants and							
1 Does the organization maintain records to so							
the selection criteria used to award the grant	s or assistand	e?					X Yes No
2 Describe in Part IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	omestic Or nat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Compe duplicated if a	plete if the organizadditional space is	ration answered "Y needed.	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AR GAME & FISH COMMISSION							
201 E 5TH ST MOUNTAIN HOME, AR 72653	86-6004791	GOVT	11,086.				APACHE TROUT INITIAT
(2) ARIZONA ANTELOPE							
PO BOX 12590 GLENDALE, AZ 85318	86-0713493	501(C)(3)	47,492.				SOUTHEASTERN ARIZONA
(3) ARLINGTON COUNTY, VA							
2100 CLARENDON BLVD STE 705	54-6001123	GOVT	8,000.				ARLINGTON COUNTY RES
(4) ASSOC OF STATE							
575 D'ONOFRIO DR STE 200 MADISON, WI 53719	39-1414382		25,000.				IMPROVING COASTAL RE
(5) ASSOC OF FISH & WILDLIFE AGENCIES							
444 N CAPITOL ST NW STE 725	41-6029770		30,000.				NATIONAL FISH HABITA
(6) ASSOCIATION OF NJ							
PO BOX 157 300 MENDHAM RD	23-7123285		11,223.				CREATING A MODEL FOR
(7) ATLANTA BELTLINE							
100 PEACHTREE ST NE STE 2300	20-5433299	GOVT	20,050.				WATER CONSERVATION A
(8) ATLANTA BOTANICAL							
1345 PIEDMONT AVE NE ATTN: JENNIFER CRUSE S	58-1313284	501(C)(3)	42,513.				RESTORATION OF SPECI
(9) ATLANTIC SALMON FED							
14 MAINE ST STE 308 BRUNSWICK, ME 04011	13-2618801	501(C)(3)	114,711.				BLACKSTONE BROOK FIS
(10) AUBURN UNIVERSITY							
3301 SFWS BLDG AUBURN, AL 36849	63-6000724		6,079.				MILL CREEK URBAN STR
(11) AUDUBON CALIFORNIA							
225 VARICK ST NEW YORK, NY 10014	13-1624102	501(C)(3)	182,919.				CONSERVATION OF AECH
(12) AUDUBON NATURE INSTITUTE							
6500 MAGAZINE ST NEW ORLEANS, LA 70118	51-0157624		112,211.				MARINE MAMMAL RESPON
2 Enter total number of section 501(c)(3) an							
3 Enter total number of other organizations I	isted in the li	ne 1 table				<b>.</b>	
For Paperwork Reduction Act Notice, see the Instruct	ions for Form 9	90.				ScI	nedule I (Form 990) (2014)

### **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	NOITA					52-1384139	9
Part I General Information on Grants a	nd Assistanc	е					
1 Does the organization maintain records to	substantiate th	e amount of th	e grants or assista	nce, the grantees	d' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran	nts or assistand	:e?					X Yes No
2 Describe in Part IV the organization's proce							
Part    Grants and Other Assistance to							es" to Form 990,
Part IV, line 21, for any recipient	that received	more than \$5	,000. Part II can b	pe duplicated if	additional space is	needed.	
					(f) Mathad of indication		
1 (a) Name and address of organization or government	<b>(b)</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) AUDUBON NEW MEXICO							
PO BOX 9314 GRANT CODE 531	13-1624102	501(C)(3)	30,941.				RIO GRANDE WATER TRA
(2) AUSAYMAS CATTLE COMPANY							
1180 COMSTOCK RD HOLLISTER, CA 95023	94-2292791		30,400.				KLAMATH WATER PAYMEN
(3) AVIAN RESEARCH							
411 NE 7TH ST GAINESVILLE, FL 32601	59-3455864		47,365.				AERIAL IMAGING SURVE
(4) BAD RIVER WATERSHED							
PO BOX 875 101 W MAIN ST STE 204	04-3740575	501(C)(3)	16,066.				IMPROVING STREAM HAB
(5) BAJADA ECOLOGY, LLC							
619 PINON CT ATTN: TRACY BAILEY	47-2762308		54,357.				RAVEN STUDIES IN THE
(6) BAY AREA AIR QUALITY MGMT							
939 ELLIS ST SAN FRANCISCO, CA 94109	94-1622746	GOVT	423,000.				REDUCTION IN EMISSIO
(7) BEAVER STREET FISHERIES							
PO BOX 41430 JACKSONVILLE, FL 32203	59-0737364		6,270.				NOAA FISH FRY - II
(8) BELL LAND SURVEYING							
100 FILLMORE WAY RENO, NV 89519	53-8501083		6,800.				NEVADA NWR LAND AND
(9) BELOVED STREETS OF AMERIC							
5901 DR MARTIN LUTHER KING DR	26-3484066		22,500.				URBAN AGRICULTURE ON
(10) BILL LUCE CONSULTING, LLC							
2581 MENLO AVE CLOVIS, CA 93611	46-5370777		15,793.				SAN JOAQUIN RIVER RE
(11) BIODIVERSITY RESEARCH							
19 FLAGGY MEADOW RD ATTN: COLEEN PLUMMER	01-0515381	501(C)(3)	8,558.				RESTORING DIADROMOUS
(12) BIOMARK							
705 S 8TH ST BOISE, ID 83702	82-0438042		10,569.				JUVENILE AMERICAN EE
2 Enter total number of section 501(c)(3) a	nd governmen	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations	listed in the li	ne 1 table	<u> </u>		<u> </u>	<u></u>	

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

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## **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	I.TON					52-1384139	)
Part I General Information on Grants an	d Assistanc	e					
<ol> <li>Does the organization maintain records to s the selection criteria used to award the gran</li> <li>Describe in Part IV the organization's proce</li> </ol>	ts or assistand	ce?			eligibility for the gran		X Yes No
Part II Grants and Other Assistance to Depart IV, line 21, for any recipient to							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BIRMINGHAM-SOUTHERN							
900 ARKADELPHIA RD BOX 549043	63-0288811		15,000.				TURKEY CREEK VERMIL:
(2) BI-STATE PROPANE							
20 HWY 95 A NORTH YERINGTON, NV 89447	73-1495293		5,570.				BI STATE PROPANE RAI
(3) BLAIR COUNTY							
1407 BLAIR ST HOLLIDAYSBURG, PA 16648	25-6195834	GOVT	57,132.				JUNIATA RIVER BASIN
(4) BLM							
BLM-SALEM DISTRICT 1717 FABRY RD SE	84-0437540	GOVT	21,200.				CALIFORNIA PUBLIC LA
(5) BLM-SAFFORD FIELD OFFICE							
711 SOUTH 14TH AVE SAFFORD, AZ 85546	14-0001849	501(C)(3)	35,250.				YOUTH RIPARIAN STUD
(6) BLUE WATER BALTIMORE							
3545 BELAIR RD BALTIMORE, MD 21213	52-1420138	501(C)(3)	40,000.				BALTIMORE WATER AUD
(7) BLUFF LAKE NATURE CENTER							
4755 PARIS ST STE 190 DENVER, CO 80239	84-1305302		6,879.				YOUTH WATER QUALITY
(8) BOLSA CHICA LAND TRUST							
5200 WARNER AVE, #108 ATTN: FLOSSIE HORGAN	33-0516059		18,858.				SOUTHERN TARPLANT EN
(9) BORDERLANDS RESTORATION							
21 PASEO DE LOS SUENOS ATTN: DAVID SEIBERT	32-0389949		33,986.				INTEGRATED COLLABORA
(10) BRANDYWINE VALLEY ASSOC							
1760 UNIONVILLE WAWASET RD	51-0058593		106,000.				IMPROVING WATER QUAI
(11) BRONX RIVER ART CENTER							
PO BOX 5002 BRONX, NY 10460	13-3261148		25,435.				AN INNOVATIVE GREEN
(12) BROOKLYN GREENWAY							
153 COLUMBIA ST BROOKLYN, NY 11231	20-3283721		264,575.				WEST STREET WATERSHI
2 Enter total number of section 501(c)(3) ar							
3 Enter total number of other organizations	listed in the li	ne 1 table				<u></u> ▶	

#### **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.

Department of the Treasury ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

OMB No. 1545-0047 2014

> **Open to Public** Inspection

**Employer identification number** 

NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 **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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant or government if applicable grant non-cash assistance cash assistance or assistance (1) BRUCE MACKAY PUMP & WELL 1600 MT ROSE HWY STILLWATER NAT'L WILDLIFE 88-0208794 6,515 NEVADA NWR LAND AND (2) BUFFALO OLMSTEAD PARKS 84 PARKSIDE AVE BUFFALO, NY 14214 22-2720927 7,582 REVITALIZING AN HIST (3) CA STATE UNIVERSITY 6300 EAST STATE UNIVERSITY DR STE 332 95-6106694 28,522 FISHERIES INTERNSHIP (4) CACAPON INSTITUTE, INC 326 BACK CREEK RD PO BOX 68 31-1139553 501(C)(3) 12,483 (5) CALI STATE PARKS 95 KELLY AVE HALF MOON BAY, CA 94019 68-0303606 GOVT 65,000. MCGRATH RESTORATION (6) CALIFORNIA CONSERVATION C 73,408 1500 ALAMAR WAY FORTUNA, CA 95540-5946 68-0298653 CCC-BOR FOLSOM LAKE (7) CALIFORNIA TROUT 360 PINE ST. 4 FLOOR 23-7097680 41,970 HAT CREEK YOUTH INIT (8) CALRECYCLE 1001 I ST, 19TH FLOOR SACRAMENTO, CA 95814 27-2088519 585,000 DAKLAND ESTUARY ENHA (9) CANAAN VALLEY INSTITUTE 494 RIVERSTONE RD DAVIS, WV 26260 55-0747132 9,881 TUSCARORA CREEK FISH (10) CANNON RIVER WATERSHED 400 WASHINGTON ST NORTHFIELD, MN 55057 6,625 41-1674744 CULTIVATING CONSERVA (11) CAPITAL RC&D 401 E LOUTHER ST CARLISLE, PA 17013 04-3691329 501(C)(3) 9,294 MODEL FOR COST-SHARE (12) CARDNO 2107 WILSON BLVD COLONIAL PL III STE 800 45-2663666 GCEF GREENPOINT CHAM Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Enter total number of other organizations listed in the line 1 table

## **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part I General Information on Grants an		е				52-1384139	
Does the organization maintain records to s     the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to	Oomestic Or hat received	ganizations and more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Compe duplicated if a	plete if the organized ditional space is	zation answered "Y needed.	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CEC STUYVESANT COVE							
37 WEST 26TH ST STE 209 NEW YORK, NY 10010	52-2440116	501(C)(3)	8,938.				SOLAR ONE-S GREEN DI
(2) CENTER FOR ECOSYSTEM							
4179 PIEDMONT AVE STE 325 OAKLAND, CA 94611	94-3356594	501(C)(3)	11,214.				SAN FRANCISCO BAY ST
(3) CENTER FOR NATURAL LND MGMT							
27258 VIA INDUSTRIA STE B	68-0233573	501(C)(3)	62,386.				BUENA VISTA LAGOON I
(4) CENTER FOR URBAN							
1000 HILLTOP CIRCLE 413-A ADMIN	52-6002033		84,996.				GREEN INFRASTRUCTURI
(5) CENTER FOR WATERSHED PROT							
8390 MAIN ST, 2ND FLOOR	54-1644387	501(C)(3)	61,718.				2014
(6) CENTRAL CARIBBEAN MARINE							
PO BOX 1461 PRINCETON, NJ 08542	22-3609293		15,220.				ENHANCING CAPACITY I
(7) CENTRAL COAST AQUARIUM							
50 SAN JUAN ST ATTN: TARA MALZONE	77-0479110		50,000.				SAN LUIS MARINE SCI
(8) CHESAPEAKE BAY TRUST							
60 WEST ST STE 405 ANNAPOLIS, MD 21401	52-1454182		47,222.				CHESAPEAKE BAY CAPAG
(9) CHESAPEAKE FOUNDATION							
6 HERNDON AVE ANNAPOLIS, MD 21403	52-6065757	501(C)(3)	20,751.				REDUCING AGRICULTURA
(10) CHESAPEAKE STORMWATER							
117 INGLESIDE AVE BALTIMORE, MD 21228	26-4054856	501(C)(3)	42,000.				CHESAPEAKE BAY STOR
(11) CHESAPEAKE WILDLFE HERT							
PO BOX 1745 EASTON, MD 21601	52-0178636	501(C)(3)	13,670.				CHESTER RIVER WATERS
(12) CHESTERFIELD COUNTY SOIL							
106 SCOTCH RD CHESTERFIELD, SC 29709	57-0480727	GOVT	27,828.				SANDHILLS LONGLEAF I
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able			
3 Enter total number of other organizations	<u>listed in th</u> e lii	ne 1 table	<u> </u>		<u></u> .	<u> ▶</u>	

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUND						52-1384139	)
Part I General Information on Grants a	nd Assistanc	е					
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gra	nts or assistand	e?					X Yes No
2 Describe in Part IV the organization's proce	edures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to Part IV, line 21, for any recipient	Domestic Or that received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can I	vernments. Compe duplicated if a	plete if the organizadditional space is	zation answered "Y needed.	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CHIQUES CREEK WATERSHED A							
971 N COLEBROOK RD MANHEIM, PA 17545	23-3053773		108,567.				LOGAN PARK FLOODPLAI
(2) CITIBANK GOVERNMENTS							
PO BOX 6575 THE LAKES, NV 88901-6575	13-5266470		16,581.				MARINE MAMMAL COMMIS
(3) CITIZENS CONSERVATION							
198 GEORGE ST BECKLEY, WV 25801	55-0725472		15,801.				C&O CANAL TOWPATH CL
(4) CITY OF BERKELEY							
2180 MILVIA ST BERKELEY, CA 94704	94-6000299	GOVT	120,000.				PILING REPLACEMENT A
(5) CITY OF HOBOKEN							
94 WASHINGTON ST HOBOKEN, NJ 07030	22-6001993	GOVT	78,662.				TRANSFORMING HOBOKEN
(6) CITY OF LEXINGTON							
300 E WASHINGTON ST LEXINGTON, VA 24450	54-6001392	GOVT	10,632.				CITY OF LEXINGTON GR
(7) CITY OF LOS ANGELES							
221 N FIGUEROA ST STE 1550	95-6000735	GOVT	29,980.				CABRILLO BEACH PIER
(8) CITY OF MORRO BAY							
595 HARBOR ST MORRO BAY, CA 93442	95-2308629	GOVT	22,500.				FISHING COMMUNITY SU
(9) CITY OF NORWICH HARBOR							
CITY HALL 100 BRDWAY STE 215	06-6001888	GOVT	8,130.				NORWICH HARBOR CANOE
(10) CITY OF PACIFICA							
ATTN: FIN DEPT 170 SANTA MARIA AVE	94-6033414	GOVT	179,005.				PACIFICA PIER RESORA
(11) CITY OF PENSACOLA							
222 WEST MAIN ST ATTN: L. DERRIK OWENS	59-6000406	GOVT	140,368.				GOVERNMENT STREET RE
(12) CITY OF TALLAHASSEE							
300 SOUTH ADAMS ST TALLAHASSEE, FL 32301	59-6000435		5,968.				GREENING ART ALLEY (
2 Enter total number of section 501(c)(3) a							
3 Enter total number of other organizations	listed in the li	ne 1 table				<u></u>	
For Paperwork Reduction Act Notice, see the Instru	ctions for Form 9	90.				ScI	nedule I (Form 990) (2014)

### **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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<ol> <li>Does the organization maintain records to so the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to  1 (a) Name and address of organization	nat received	more than \$5	,000. Part II can b	De duplicated if a	(f) Method of valuation	needed.  (g) Description of	(h) Purpose of grant
or government	(2) 2	if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) CITY PARKS FOUNDATION							
830 FIFTH AVE NEW YORK, NY 10065	13-3561657	501(C)(3)	212,602.				COASTAL HABITAT REST
(2) CIVILWISE SERVICES							
1240 E STATE ST STE 101 PAHRUMP, NV 89048	26-2893214		5,500.				NEVADA NWR LAND AND
(3) CLARK FORK COALITION							
PO BOX 7593 MISSOULA, MT 59807	36-3428665	501(C)(3)	130,841.				COMMUNITY WATER MARK
(4) CLEVELAND MUSEUM OF NH							
1 WADE OVAL UNIV CIRCLE CLEVELAND, OH 44106	34-0714338		25,262.				GENEVA SWAMP FOREST
(5) C'NATURE NET							
808 14TH AVE SE MINNEAPOLIS, MN 55414	14-1959018		22,371.				SUN RAY GREEN LIBRA
(6) COLLEGE OF WILLIAM							
1375 GREATE RD GLOUCESTER POINT, VA 23062	54-6001802		53,917.				TESTING BIODEGRADABI
(7) COLORADO CATTLEMEN'S							
8833 RALSTON RD ARVADA, CO 80002	84-1317592		39,442.				SHORTGRASS PRAIRIE
(8) COLORADO YOUTH CORPS ASSO	_						
225 EAST 16TH AVE STE 1180 DENVER, CO 80203	84-1532028		12,600.				TRAIL MAINTENANCE IN
(9) COMMUNITY ACTION AGENCY	4						
2709 WOODSON RD ST. LOUIS, MO 63114	23-7037248		5,451.				SUMMER FARM INTERNS
(10) COMMUNITY DEVELOPMENT	4						
3 MAIN ST MERCANTILE #7 EASTHAM, MA 02642	22-3191450		12,750.				BEST PRACTICES IN PI
(11) COMMUNITY WATER CENTER	4						
311 W MURRAY AVE VISALIA, CA 93291	80-0267674		7,500.				SAFE DRINKING WATER
(12) CONGRESSIONAL SPORTSMEN	$\dashv$						
110 NORTH CAROLINA AVE SE	52-1686163		12,500.				CONSERVATION COMMUNI

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

### **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Department of the Treasury
Internal Revenue Service

Name of the organization

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2014

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Employer identification number

Part I General Information on Grants and 1 Does the organization maintain records to so			e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant			<del>-</del>	=			X Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to D					plete if the organiz	ration answered "Y	es" to Form 990.
Part IV, line 21, for any recipient the							
				T		T	
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) CONN RIVER COASTAL DIST							
DEKOVEN HOUSE 27 WASHINGTON ST	06-0733567		6,650.				CHAPMAN MILL POND FI
(2) CONSERVANCY							
56 SAINT JOSEPH ST MOBILE, AL 36602	53-0242652	501(C)(3)	21,467.				PELICAN POINT SHOREL
(3) CONSERVANCY FOR CUYAHOGA							
1403 WEST HINES HILL RD PENINSULA, OH 44264	34-1917257	501(C)(3)	23,951.				RESTORING RIPARIAN H
(4) CONSERVATION & NATURAL							
51 CLORINDA AVE SAN RAFAEL, CA 94901	46-4398049	501(C)(3)	60,000.				CALIFORNIA WATER STR
(5) CONSERVATION FOUNDATION							
1383 ARCADIA RD RM 200 LANCASTER, PA 17601	65-1308216	501(C)(3)	29,291.				THE LITTLE CONESTOGA
(6) CONSERVATION INT'L							
2011 CRYSTAL DR STE 500 ARLINGTON, VA 22202	52-1497470	501(C)(3)	49,846.				BUILDING NETWORKS FO
_(7) CONSERVATION LEGACY							
701 CAMINO DEL RIO STE 101	84-1450808		32,000.				ALBUQUERQUE NATIVE A
(8) CONSERVATION METRICS							
508 BUENA VISTA AVE SANTA CRUZ, CA 95062	45-5163605		15,634.				ACOUSTIC MONITORING
(9) CONSERVATION MGMT							
300 TURNER ST NW STE 4200	54-6001805		40,579.				SOIL HEALTH AND WATE
(10) CONSERVATION NORTHWEST							
1208 BAY ST STE 201 BELLINGHAM, WA 98225	94-3091547		213,789.				CASCADES TO ROCKIES
(11) CONSERVATION RESOURCE							
10850 TRAVERSE HWY STE 1111	38-2181915	501(C)(3)	83,939.				BETSIE AND PLATTE RI
(12) CONSERVE WILDLIFE FOUND.							
PO BOX 400 TRENTON, NJ 08625	22-3130406		12,922.				PRESERVING AND RESTO

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

### **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Department of the Treasury
Internal Revenue Service

Name of the organization

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Employer identification number

Does the organization maintain records to the selection criteria used to award the gra	ints or assistanc	e?			eligibility for the gran		X Yes No
<ul><li>2 Describe in Part IV the organization's proc</li><li>Part II Grants and Other Assistance to</li></ul>					anlete if the organi	ration anawarad "\	/oo" to Form 000
Part II Grants and Other Assistance to Part IV, line 21, for any recipient	that received	more than \$5	,000. Part II can b	e duplicated if a	additional space is	needed.	es to Form 990,
(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) CONTECH ENGINEERED							
16445 COLLECTIONS CENTER DR	37-1663656		17,176.				BRANDY BROOK FISH PA
(2) COOK INLET REGIONAL							
8195 KENAI SPUR HWY KENAI, AK 99611	92-0135368		66,272.				COOK INLET RISK ASSE
(3) CORAL BAY COMMUNITY							
9901 ESTATE EMMAUS C/O PATRICIA REED	66-0637620	501(C)(3)	5,742.				CORAL BAY REVISED AN
(4) CORNELL UNIVERSITY							
OFC OF SPONSORED PROJ PO BOX 22	15-0532082	501(C)(3)	18,312.				LIQUID DAIRY MANURE
(5) CORVUS ECOLOGICAL							
7810 HWY 89 STE 270 FLAGSTAFF, AZ 86004	80-0691745		167,627.				RAVEN STUDIES IN THE
(6) COUNTY OF SAN LUIS OBISPO							
DEPT OF GEN SVCS CTY GOV CTR	95-6000939	GOVT	172,000.				AVILA TO HARFORD PIR
(7) COURTYARD BY MARRIOTT							
550 SW OAK ST PORTLAND, OR 97204	45-2185518		31,912.				WEST COAST GOVERNORS
(8) CRAIG INTERACTIVE							
7908 GREENWOOD AVE TAKOMA PARK, MD 20912	52-2073462		28,617.				ACRES FOR AMERICA 10
(9) CSUSB PHILANTHROPIC							
5500 UNIVERSITY PARKWAY	45-2255077		7,000.				COASTAL SAGE SCRUB (
(10) CSX TRANSPORTATION							
500 WATER ST JACKSONVILLE, FL 32202	54-6000720		406,540.				OYSTER SHELL DELIVER
(11) CT RIVER WATERSHED	_						
15 BANK ROW ST GREENFIELD, MA 01501	04-2148397		5,279.				CONNECTICUT RIVER BE
(12) CUENCA DE LOS OJOS AC							
831 N VENICE AVE TUSCON, AZ 85711	20-3036863		25,000.				RESTORING SONORAN SE

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### **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Internal Revenue Service
Name of the organization

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2014

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Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	ATION					52-1384139	)
Part I General Information on Grants a	nd Assistanc	е				<u>.</u>	
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grain	nts or assistand	e?					X Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to Part IV, line 21, for any recipient							es" to Form 990,
(a) Name and address of organization or government	<b>(b)</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) DAKOTA ZOOLOGICAL SOCIETY							
PO BOX 711 ATTN: TERRY LINCOLN, DIRECTOR	23-7394067		9,000.				EAGLE FLIGHT PEN REP
(2) DANTZKER CONSULTING							
2613 N HARRISON ST ARLINGTON, VA 22207	46-2703345		14,991.				PACIFIC SEABIRDS PRO
(3) DC GREENWORKS							
1341 H ST NE STE 203 WASHINGTON, DC 20002	52-1875418	501(C)(3)	20,000.				GREEN SCHOOLS CLEAN
(4) DE DEPT. OF NATURAL							
89 KINGS HWY ATTN: TRACEY W PARKER	51-6000279	GOVT	35,781.				TARGETED WATERSHED R
(5) DEMING RANCH LAND							
5687 RIDGE PARK DR LOOMIS, CA 95650	27-1024747		7,200.				KLAMATH WATER PAYMEN
(6) DESCHUTES RIVER CONSERV							
700 NW HILL ST BEND, OR 97709	91-1748485	501(C)(3)	376,543.				CBWTP UMATILLA ACCOR
(7) DOUBLETREE PITTSBURGH							
1 BIGELOW SQUARE PITTSBURGH, PA 15219	25-1262334		12,111.				MARINE MAMMAL COMMIS
(8) DOWNSTREAM STRATEGIES							
295 HIGH ST STE 3 MORGANTOWN, WV 26505	37-1418095		29,934.				EVITTS RUN GREEN INF
(9) DRAPER ADEN ASSOCIATES							
2206 S MAIN ST BLACKSBURG, VA 24060	54-0939306		37,943.				MATTHEWS COUNTY RURA
(10) DREXEL UNIVERSITY							
3201 ARCH ST STE 100	23-1352630	501(C)(3)	57,764.				RETROFITTING A BIORE
(11) DUCK UNLIMITED, INC.							
1301 PENNSYLVANIA AVE NW STE 402	13-5643799	501(C)(3)	723,911.				CARSON LAKE AND PAST
(12) DUCK'S CONSTRUCTION							
384 POOLER RD DEKALB JUNCTION, NY 13630	77-0659831		13,511.				BRANDY BROOK FISH PA
<ul><li>Enter total number of section 501(c)(3) a</li><li>Enter total number of other organizations</li></ul>	nd governmen listed in the lir	t organizations ne 1 table	listed in the line 1 t	able			

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<ul> <li>Part I General Information on Grants and</li> <li>1 Does the organization maintain records to see the selection criteria used to award the grant</li> <li>2 Describe in Part IV the organization's process</li> </ul>	substantiate the	e amount of the					X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient to	Domestic Org hat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	rernments. Compe duplicated if a	nplete if the organized additional space is a	zation answered "Y needed.	es" to Form 990,
1 (a) Name and address of organization or government	<b>(b)</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) DUCKS UNLIMITED, INC.							
1301 PENNSYLVANIA AVE STE 402	13-5643799		25,000.				CONSERVATION COMMUNI
(2) EAGLE ENVIRONMENTAL							
30 FONDA RD SANTA FE, NM 87508	85-0325151		5,432.				SURVIVAL OF GOLDEN I
(3) EARTH CONSERVATION CORPS							
2000 HALF ST SW WASHINGTON, DC 20024	52-1683270		8,529.				DIAMOND TEAGUE PARK
(4) EARTH DATA							
131 COMET DR CENTREVILLE, MD 21617	46-4244988		8,428.				AGRICULTURAL STORMWA
(5) EARTH DISCOVERY INSTITUTE							
120 N PARK DR EL CAJON, CA 92021	26-2288903		7,628.				SCHOOLYARD HABITAT
(6) EARTHCORPS							
6310 NE 74TH ST STE 201E SEATTLE, WA 98115	91-1592071		8,103.				EAST FORK HYLEBOS CH
(7) EAST BAY REGIONAL PARK							
2950 PERALTA OAKS CT OAKLAND, CA 94605	94-6000591		40,062.				EAST BAY SHORELINE I
(8) EASTERN MENNOITE UNIV							
1200 PARK RD HARRISONBURG, VA 22801	54-0575812		20,859.				CHANGING AGRICULTURA
(9) EASTERN SHORE LAND							
601 LOCUST ST STE 302 CAMBRIDGE, MD 21613	52-1711989		67,000.				TECHNICAL ASSISTANCE
(10) EASTERN SHORE SOIL & WATER							
22545 CENTER PARKWAY ACCOMAC, VA 23418	54-0979072		41,370.				EVALUATING FARM COM
(11) ECOLOGY & ENVIRONMENT							
368 PLEASANT VIEW DR LANCASTER, NY 14094	16-0971022		38,729.				GCEF APPLICANT QA/QO
(12) ECOSYSTEM ECONOMICS							
19319 BLUE LAKE LOOP BEND, OR 97702	26-0155180		55,314.				COLUMBIA BASIN WATER

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Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA						52-1384139	<del>)</del>
Part I General Information on Grants a	nd Assistance	е					
<ol> <li>Does the organization maintain records to the selection criteria used to award the gra</li> <li>Describe in Part IV the organization's process.</li> </ol>	nts or assistand	e?			deligibility for the gran		X Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient	Domestic Ore that received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Compe duplicated if a	nplete if the organiz additional space is i	ration answered "Y needed.	es" to Form 990,
(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) ECOSYSTEM SERVICES, LLC							
270 VALENTINE MILL RD LOUISA, VA 23093	35-2415682		20,793.				REMEDIATION OF SEVER
(2) ECOTONE			,				
2120 HIGH POINT RD FOREST HILL, MD 21050	52-2099637		19,596.				TOWN OF MANCHESTER W
(3) ELEANOR ROOSEVELT							
31191 RD 180 VISALIA, CA 93292	91-2138133	GOVT	10,000.				SCHOOLYARD HABITAT I
(4) ELECTRIC POWER RESEARCH							
13014 COLLECTIONS CENTER DR	23-7175375	501(C)(3)	230,000.				EEL PASSAGE RESEARCH
(5) ELSINORE VALLEY MUNICIPAL							
31315 CHANEY ST LAKE ELSINORE, CA 92530	95-6005663	GOVT	36,805.				CONSERVATION AND EDU
(6) EMERALD COAST WILDLIFE							
105 SANTA ROSA BLVD	59-3286744		62,837.				MARINE MAMMAL STRAND
(7) ENVIROISSUES							
101 STEWART ST STE 1200 SEATTLE, WA 98101	91-1526183		21,759.				FACILITATING THE FED
(8) ENVIRONMENT FOR THE							
5171 ELDORADO SPRINGS DR STE N	20-5844470	501(C)(3)	16,760.				CELEBRATE SHOREBIRDS
(9) ENVIRO-SCIENCES							
40 WYGANT RD CREAM RIDGE, NJ 08514	13-3991638		23,594.				INDEPENDENT COMMUNIT
(10) EVERGLADES FOUNDATION							
18001 OLD CUTLER RD STE 625	59-3228899		25,000.				CONSERVATION COMMUNI
(11) FARALLON INSTITUTE							
101 H ST STE Q PETALUMA, CA 94952-5100	26-0467490		55,377.				ADDRESSING THE FORAG
(12) FARALLONES MARINE							
991 MARINE DR THE PRESIDIO	94-3227237		161,598.				SEABIRD PROTECTION N
2 Enter total number of section 501(c)(3) a							
3 Enter total number of other organizations	listed in the lir	ne 1 table				<u></u> ▶	

### **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA		52-1384139					
Part I General Information on Grants ar	nd Assistanc	е					
1 Does the organization maintain records to s	substantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to I	Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com	nplete if the organiz	ation answered "Y	es" to Form 990.
Part IV, line 21, for any recipient							,
				1	T		
(a) Name and address of organization or government	<b>(b)</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) FARM-STREAM SOLUTIONS LLC							
6318 NE PRESCOTT ST PORTLAND, OR 97218	32-0382815		5,162.				COLUMBIA BASIN WATER
(2) FARR WEST ENGINEERING							
5442 LONGLEY LANE STE A RENO, NV 89511	88-0490135		114,722.				TITLE RESEARCH AND M
(3) FATHOM CONSULTING							
25295 TIERRA GRANDE DR CARMEL, CA 93923	27-0350906		52,806.				INCORPORATING CLOSED
(4) FAUNA & FLORA INT'L							
1720 N ST NW WASHINGTON, DC 20036	04-2730954	501(C)(3)	9,984.				HAWKSBILL CONSERVATI
(5) FIELD MUSEUM OF NATURAL							
1400 S LAKE SHORE DR CHICAGO, IL 60605	36-2167011	501(C)(3)	21,229.				BEAUBIEN WOODS HABIT
(6) FISH & WILDLIFE							
C/O PAMELA BELL 911 NE 11TH AVE	52-1384139		18,372.				MISC. EXPENSES REFUG
(7) FISHERMENS MARKETING							
1370 BODEGA AVE BODEGA BAY, CA 94923	94-1530269		35,482.				REGIONAL COMMUNITY F
(8) FL DEPT OF ENV PROTECT							
RECEIPTS SEC (MS 77) PO BOX 3070	59-6007353	501(C)(3)	12,200.				FOUNDATION SETTLEMEN
(9) FL F&W CONSERVATION COMM							
100 EIGHTH AVE SE	59-3105845	GOVT	4,315,277.				APALACHICOLA BAY OYS
(10) FL HOUSE FOUNDATION							
4454 BENEVA RD SARASOTA, FL 34233	59-1608033		19,950.				FLORIDA HOUSE DEMONS
(11) FLORIDA FISH & WILDLIFE							
620 S MERIDIAN ST TALLAHASSEE, FL 32399	59-3105845	GOVT	65,251.				CONSERVATION PLANNIN
(12) FOREST GUILD							
2019 GALISTEO ST STE N7 SANTA FE, NM 87505	85-0446866		12,557.				EXPANDING YOUTH OUTD
2 Enter total number of section 501(c)(3) ar	nd governmen	t organizations	listed in the line 1 t	able			
3 Enter total number of other organizations	listed in the lir	ne 1 table	<u> </u>			<u> </u>	

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part I General Information on Grants at		е				52-138413	
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	d' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gra	nts or assistanc	e?					X Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to Part IV, line 21, for any recipient							es" to Form 990,
(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) FORT BRAGG GROUNDFISH							
20501 NOTTINGHAM CT FORT BRAGG, CA 95437	30-0747064		19,503.				BRANDING AND MARKETI
(2) FOUR CORNERS SCHOOL							
49 W 600 S MONTICELLO, UT 84535	39-1509336		6,075.				DOLORES RIVER RESTOR
(3) FRANCIS MARION HOTEL							
387 KING ST ATTN: LUIS MEZA	57-1010271		30,786.				MARINE MAMMAL COMMIS
(4) FREDERICK COUNTY, MD							
118 NORTH MARKET ST FREDERICK, MD 21701	52-6000943	GOVT	59,541.				BROOK TROUT RESTORAT
(5) FRESHWATER LAND TRUST							
900 ARKADELPHIA RD BIRMINGHAM, AL 35254	72-1387424		5,486.				STREAM BANK RESTORAT
(6) FRESNO METRO MINISTRY							
8355 N FRESNO ST FRESNO, CA 93720	94-2181848		37,045.				FRESNO FARM SUSTAINA
(7) FRIENDS OF CHICAGO RIVER							
411 S WELLS ST STE 800 CHICAGO, IL 60607	36-3559764		81,584.				CHICAGO RIVER CONSTR
(8) FRIENDS OF MARSH CREEK							
2063 MAIN ST STE 311 OAKLEY, CA 94561	26-3772965		8,972.				ADVANCING ENVIRONMEN
(9) FRIENDS OF TETON RIVER							
18 N MAIN ST STE 310 DRIGGS, ID 83422	82-0527505	501(C)(3)	28,695.				YELLOWSTONE CUTTHROA
(10) FRIENDS OF THE FOREST							
28 E JACKSON BLVD STE 1102	36-4519273	501(C)(3)	40,416.				PLUM CREEK STREAM AN
(11) FRIENDS OF VERDE RIVER							
PO BOX 2535 COTTONWOOD, AZ 86326	45-2927355		45,115.				VERDE RIVER HABITAT
(12) FRIENDS OF YAQUINA							
750 NW LIGHTHOUSE DR #7 NEWPORT, OR 97365	94-3078547		6,300.				HIGH SCHOOL TIDEPOOL
2 Enter total number of section 501(c)(3) a	nd governmen	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations	listed in the lir	ne 1 table					

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

	ATIONAL FISH AND WILDLIFE FOUNDATION							
Part I General Information on Grants and	l Assistanc	е				<u>.</u>		
1 Does the organization maintain records to su	bstantiate th	e amount of the	e grants or assistar	nce, the grantees	' eligibility for the grant	s or assistance, and		
the selection criteria used to award the grants							X Yes No	
2 Describe in Part IV the organization's proced								
Part II Grants and Other Assistance to De Part IV, line 21, for any recipient the							es" to Form 990,	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
1) GA DEPT OF RESOURCES								
2 MARTIN LUTHER KING JR. DR SE STE 1352	58-1130945	GOVT	66,452.				ASSESSING PREDATOR C	
2) garden island								
3083 AKAHI ST STE 204 LIHUE, HI 96766	98-0288553	501(C)(3)	59,000.				INVASIVE WEED CONTRO	
3) garden park paleontology								
330 ROYAL GORGE BLVD UNIT A	84-1132999		18,350.				HOGBACKS OPEN SPACE	
4) GEORGE MASON UNIVERSITY								
4400 UNIVERSITY DR MSN 4C6	54-0836354		34,154.				IMPROVING AND QUANTI	
5) GEORGE MIKSCH SUTTON								
PO BOX 2007 BARTLESVILLE, OK 74005	73-1023595	501(C)(3)	125,086.				ATTWATERS PRAIRIE CH	
6) GIRL SCOUTS, HORNETS								
7007 IDLEWILD RD CHARLOTTE, NC 28212	56-0563842		10,000.				LINKING GIRLS TO THE	
7) GLOUCESTER COUNTY								
6467 MAIN ST GLOUCESTER, VA 23061	54-6001312	GOVT	27,477.				CREATING A LIVING SH	
8) GOOLD'S SPRING RANCH								
19530 SPRAGUE RIVER RD CHILOQUIN, OR 97624	93-0999346		24,120.				KLAMATH WATER PAYMEN	
9) GRAND TRAVERSE BAND								
2605 N WEST BAY SHORE DR	38-2316072		17,245.				INTEGRATED TECHNICAL	
0) GRANT SOIL & WATER								
3082 32ND ST BYPASS STE C	85-0388205	GOVT	18,101.				SKY ISLAND REGION IN	
1) GREAT BASIN DRILLING								
1220 MANSE RD PAHRUMP, NV 89048	88-0409453		17,400.				NEVADA NWR LAND AND	
2) GREAT BASIN INSTITUTE								
16750 MOUNT ROSE HWY RENO, NV 89511  2 Enter total number of section 501(c)(3) and	88-0431016		11,475.				COYOTE SPRINGS RESTO	

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

Name of the organization

### **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.

Department of the Treasury Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

TIONAL FISH AND WILDLIFE FOUNDATION						52-1384139			
Part I General Information on Grants an	d Assistance	9				•			
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assistar	nce, the grantees	eligibility for the grant	s or assistance, and			
the selection criteria used to award the gran		- 0	_	_			X Yes No		
2 Describe in Part IV the organization's proce	dures for mon						<del></del>		
Part II Grants and Other Assistance to Deart IV, line 21, for any recipient to							es" to Form 990,		
(a) Name and address of organization or government	<b>(b)</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) GREATER CARIBBEAN ENERGY									
1359 SW 22ND TERRACE STE 1 MIAMI, FL 33145	59-2042331		44,705.				QUANTITATIVELY ASSES		
(2) GREEN DIVERSITY									
1640 RHODE ISLAND AVE NW STE 600	46-5220283		50,000.				PROMOTING DIVERSITY		
(3) GREEN FORESTS WORK									
203 THOMAS POE COOPER BLDG UK	46-1296612		17,500.				FLIGHT 93 NATIONAL M		
(4) GREENPOINT CHAMBER									
33 NASSAU AVE #51 BROOKLYN, NY 11222	46-1128358		110,069.				CURB YOUR LITTER: GR		
(5) GREENSMITH PR LLC									
1818 LIBRARY ST STE 500 RESTON, VA 20190	46-3497741		20,750.				GREENSMITH PUBLIC RE		
(6) GROUNDWORK USA									
22 MAIN ST 2ND FLOOR YONKERS, NY 10701	81-0554362		37,895.				RESTORATION OF HISTO		
(7) GROWING SOLUTIONS									
PO BOX 30081 SANTA BARBARA, CA 93130	77-0535486	501(C)(3)	8,989.				SEABIRD RESTORATION		
(8) GUADALUPE NIPOMA DUNES									
PO BOX 339 GUADALUPE, CA 93434	77-0502739		117,389.				2015-2016 DUNES CENT		
(9) GULF OF MAINE LOBSTER									
1 HIGH ST STE 5 KENNEBUNK, ME 04043	01-0535494	501(C)(3)	51,574.				FISHING FOR ENERGY -		
(10) GULF WORLD MARINE PARK									
15412 FRONT BEACH RD	27-3137372		48,635.				MARINE MAMMAL STRAND		
(11) GUNNISON CONSERVATION									
216 NORTH COLORADO ST GUNNISON, CO 81230	84-0784109	GOVT	6,059.				GUNNISON CONSERVATIO		
(12) GUNPOWDER VALLEY									
PO BOX 9733 TOWSON, MD 21284  2 Enter total number of section 501(c)(3) an	52-1657508	501(C)(3)	23,345.				MIDDLE RIVER AND TID		

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

Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

Schedule I (Form 990) (2014)

JSA

### **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.

Department of the Treasury
Internal Revenue Service

Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part I General Information on Grants and							
1 Does the organization maintain records to s							V Voc No
the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proceed							
Part II Grants and Other Assistance to D							es" to Form 990,
Part IV, line 21, for any recipient to	nat received	more than \$5	,000. Part II can t	e auplicated if a	additional space is i	neeaea.	
(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) HALF MOON BAY GROUNDFISH							
508 MYRTLE ST C/O LISA DAMROSCH	46-3288390		46,800.				REVITALIZATION OF HI
(2) HANSON ENVIRONMENTAL							
446 GREEN VIEW CT WALNUT CREEK, CA 94596	68-0249668		7,509.				SAN JOAQUIN RIVER RE
(3) HARLOWE RANCH, LLC							
PO BOX 426 FORT KLAMATH, OR 97626	45-5583087		49,280.				KLAMATH WATER PAYMEN
(4) HAWKINS CATTLE COMPANY							
PO BOX 426 FORT KLAMATH, OR 97626	94-1085604		43,440.				KLAMATH WATER PAYMEN
(5) HEADWATERS, LLC							
207 BELLVUE CIRCLE STATE COLLEGE, PA 16803	45-5440520		34,417.				DELAWARE W. PA FIELD
(6) HEART OF OREGON CORPS							
PO BOX 279 BEND BEND, OR 97709	93-1303879		22,926.				TOMORROWS CONSERVATI
(7) HEARTLAND CONSERVATION							
4750 TROOST AVE KANSAS CITY, MO 64110-1728	35-2434953		8,000.				BLUE RIVER STEWARDSH
(8) HERITAGE ENVIRONMENTAL							
8071 E 33RD AVE DENVER, CO 80238	27-0265926		64,292.				CAMPO VERDE SOLAR PR
(9) HIGH COUNTRY RC&D, INC.							
PO BOX 1027 ST. ANTHONY, ID 83445	82-0416948		8,390.				HIGH COUNTRY AGRICUL
(10) HILTON PENSACOLA BEACH							
12 VIA DE LUNA DR ATTN: ROBERT BALLENBERGER	20-0643044		32,256.				MISC. EXPENSES - SOU
(11) HISKETT & SONS, LLC							
PO BOX 5009 FALLON, NV 89407	27-4316778		5,600.				NEVADA NWR LAND AND
(12) HISTOLOGY CONSULTATION	_						
207 N HARKNESS ST PO BOX 770	20-1739657	501(C)(3)	5,720.				UNUSUAL MORTALITY EV

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

2014

**Open to Public** Inspection

Employer identification number

TIONAL FISH AND WILDLIFE FOUNDATION						52-1384139		
Part I General Information on Grants and	d Assistanc	е						
1 Does the organization maintain records to s	ubstantiate th	ne amount of th	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and		
the selection criteria used to award the grant							X Yes No	
2 Describe in Part IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	e United States.				
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,	
	Tat received		,000. Fait ii cairi		•	Tieeded.		
(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) HJR REEFSCAPING								
PO BOX 1126 HORMIGUEROS, PR 00660	66-0704731		14,500.				STUDY OF POLLUTION A	
(2) HO'ILINA RANCH, LLC								
HCR 3 BOX 13002 KEA'AU, HI 96749-9207	27-0134615		30,800.				FENCE MAINTENANCE AN	
(3) HOTEL LA JOLLA								
7955 LA JOLLA SHORES DR ATTN: RUTH MALDONAD	45-3022894		5,864.				MARINE MAMMAL COMMIS	
(4) HOTEL PROVIDENCE								
311 WESTMINSTER ST PROVIDENCE, RI 02903	20-8859936		6,316.				FISHING FOR ENERGY	
(5) HPR II, LLC								
5790 FLEET ST STE 200 CARLSBAD, CA 92008	26-3203029		187,717.				CVSR - LAND MANAGEMI	
(6) HUMBOLDT COUNTY								
5630 SOUTH BRDWAY ST EUREKA, CA 95503	68-0343035	GOVT	21,087.				HUMBOLDT BAY EEL RIV	
(7) HURON PINES								
4241 OLD US 27 SOUTH STE 2	38-2502172	501(C)(3)	76,931.				PRIORITIZED RESTORAT	
(8) ID DEPT OF WTR RESOURCES								
322 E FRONT ST PO BOX 83720	82-6000952	GOVT	139,138.				DIRECT WATER ACQUIS	
(9) ILLINOIS CORN GROWERS								
14129 CAROLE DR BLOOMINGTON, IL 61705	37-0983416		100,860.				COVER CROP TRAINING	
(10) ILLINOIS DEPT OF NATURAL								
ONE NATURAL RESOURCES WAY	37-1349602	GOVT	27,000.				SAND PRAIRIE PHA HAI	
(11) IMPACTASSETS								
7315 WISCONSIN AVE STE 1100 W	26-2048480	501(C)(3)	11,979.				UNCOVERING BUSINESS	
(12) IMPRENTA COMMUNICATIONS	_							
2275 HUNTINGTON DR STE 850	95-4748922		27,000.				PG&ES NATURE RESTOR	
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		▶		
3 Enter total number of other organizations I	isted in the li	ne 1 table	<u> </u>		<u> </u>	<u></u>		

JSA

4E1288 1.000

### **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	ΓΙΟΝ					52-1384139	)
Part I General Information on Grants and	d Assistanc	e				<u>.</u>	
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant	ts or assistand	e?					X Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_(1) IN OUR BACKYARDS							
540 PRESIDENT ST 3RD FLOOR	26-3283639	501(C)(3)	5,427.				IMPROVING SUSTAINABL
(2) INDIANA DEPT OF NATURAL RES							
402 WEST WASHINGTON ST	35-6000158	GOVT	36,637.				LAKE GEORGE WETLANDS
(3) INSTITUTE FOR BIRD POP							
PO BOX 1346 ATTN: DAVID F. DESANTE	68-0175012		10,167.				EFFECTS OF MEADOW RE
(4) INSTITUTE FOR JOURNALISM							
114 WEST PINE ST #8 MISSOULA, MT 59802	52-2073018	501(C)(3)	60,000.				SAGEBRUSH COUNTRY IN
(5) INSTITUTE FOR MARINE							
10801 DOLPHIN LANE GULFPORT, MS 39503	64-0706659	501(C)(3)	149,044.				STRANDING RESPONSE A
(6) INSTITUTE FOR WILDLIFE							
PO BOX 1104 ARCATA, CA 95518	94-2612613	501(C)(3)	165,947.				2014 RAPTOR MONITORI
(7) INTERWORKS CONSULTING							
15621 SNOWMAN RD LOVELAND, CO 80538	84-1338543	501(C)(3)	19,152.				OPERATIONAL POLAR BE
(8) INVASIVE PLANT							
1442-A WALNUT ST STE 462 BERKELEY, CA 94709	68-0289333	501(C)(3)	15,136.				PRIORITY INVASIVE PI
(9) IOWA NATURAL HERITAGE FDN							
505 FIFTH AVE STE 444	42-1127544		56,408.				ENHANCED CRP OUTREAC
(10) IOWA SOYBEAN ASSOCIATION							
4554 NW 114TH ST URBANDALE, IA 50322	42-6127197	501(C)(3)	38,292.				NUTRIENT SOIL AND HA
(11) IPM INSTITUTE							
4510 REGENT ST MADISON, WI 53705	39-1938654		25,811.				INCREASING PARTICIPA
(12) ISLAND							
100 SHAFFER RD COH, LHL	91-1839907		6,000.				DESECHEO ISLAND SEAE
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations I	isted in the li	ne 1 table			<u> </u>	<u></u>	

JSA

4E1288 1.000

### **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	TION					52-1384139	)
Part I General Information on Grants a	nd Assistance	9				<u>.</u>	
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grain	nts or assistanc	e?					X Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to Part IV, line 21, for any recipient							es" to Form 990,
(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) ISLAND INSTITUTE							
386 MAIN ST PO BOX 648 ROCKLAND, ME 04841	13-4337702		68,244.				GULF OF MAINE RISK P
(2) IUP RESEARCH INSTITUTE							
1179 GRANT ST STE 1 INDIANA, PA 15701	57-1175778	501(C)(3)	45,599.				CREATE CHESAPEAKE BA
(3) JAKES PASTURE CLEARING							
4551 COUNTY RD 6200 ATTN: JACOB ANDERSON	514-08-4043		110,250.				PROGRAM RELATED EXPE
(4) JAMES RIVER ASSOCIATION							
9 SOUTH 12TH ST 4TH FLOOR	51-0211913	501(C)(3)	81,139.				PROMOTING GREEN INFR
(5) JIM TITLE LLC DBA FCT							
1450 RIDGEVIEW #100 RENO, NV 89519	88-0490219		580,000.				ACQUISITION OF FLYIN
(6) JUNIATA COLLEGE							
1700 MOORE ST HUNTINGDON, PA 16652	23-1352652		21,624.				ASSESSING STREAMS FO
(7) KANSAS LAND TRUST							
16 EAST 13TH ST LAWRENCE, KS 66044-3502	48-1090912	501(C)(3)	82,527.				NATIVE ENVIRONMENT C
(8) KANSAS STATE UNIVERSITY							
102 ANDERSON HALL MANHATTAN, KS 66506	48-0771751		94,181.				RESTORATION OF TALLS
(9) KARUK TRIBE							
64236 SECOND AVE PO BOX 1016	94-2576572		27,621.				SEIAD CREEK CHANNEL
(10) KCK INV DBA ROBERTS TIRE SALES, INC.							
4747 S POWER RD ATTN: CRAIG HEIMBURG	86-0176419		11,125.				WOLF LIVESTOCK DEMON
(11) KEARNS & WEST							
720 SW WASHINGTON ST STE 710	04-2813873		14,697.				WEST COAST OCEAN SUM
(12) KEEP AUSTIN BEAUTIFUL	_						
55 N INTERSTATE 35 STE 215 AUSTIN, TX 78702			24,111.				COLORADO RIVER RESTO
2 Enter total number of section 501(c)(3) a	nd government	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations	listed in the lin	ne 1 table				<u></u>	

### **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part General Information on Grants an		<u>e</u>				52-1384139	
<ol> <li>Does the organization maintain records to s the selection criteria used to award the gran</li> <li>Describe in Part IV the organization's proce</li> </ol>	ts or assistand dures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to De Part IV, line 21, for any recipient to	Domestic Or hat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Complete duplicated if a	plete if the organized ditional space is a	ation answered "Y needed.	es" to Form 990,
(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) KEEP INDIANAPOLIS							
1029 E FLETCHER AVE STE 100	31-1005792	501(C)(3)	8,191.				FALL CREEK WATERSHED
(2) KEEP PENSACOLA							
3303 N DAVIS HWY PENSACOLA, FL 32503	59-1863230		8,312.				BAYOU GRANDE LIVING
(3) KENAI NWR							
PO BOX 2139 1 SKI HILL RD	53-0201504	GOVT	5,985.				ERADICATION OF ELODE
(4) KIMLEY-HORN & ASSOCIATES							
PO BOX 75557 BALTIMORE, MD 21275	56-0885615		18,470.				STORMWATER PARTNERSH
(5) KLAMATH BASIN RANGELAND							
700 MAIN ST STE 201A	46-0472154	501(C)(3)	8,539.				DEVELOPING WATER TRA
(6) KLAMATH WATERSHED							
700 MAIN ST KLAMATH FALLS, OR 97601	93-1215213	501(C)(3)	11,230.				RESTORING KEY FISHER
<b>(7)</b> KWIAHT							
2108-G FISHERMAN BAY RD LOPEZ, WA 98261	30-0355067	501(C)(3)	9,468.				RESTORATION RESEARCH
(8) LI SMITH & ASSOCIATES							
302 N CALDWELL ST PARIS, TN 38242	62-1624568		12,593.				SAM D. HAMILTON NOXU
(9) LA COASTAL PROTECTION							
450 LAUREL ST STE 1200	30-0636591	GOVT	29,311,304.				CAMINADA HEADLAND BE
(10) LA DEPARTMENT OF WILDLIFE							
5476 GRAND CHENIER HWY	72-6000846	GOVT	82,251.				INTERNATIONAL PAPER
(11) LAGRANGE COUNTY							
109 E CENTRAL AVE STE 3 LAGRANGE, IN 46761	35-1834679		13,500.				RESTORING DUFF LAKE
(12) LAKE CNTY RESOURCES IN	_						
25 NORTH E ST STE 3 LAKEVIEW, OR 97630	93-1330699		20,000.				DREWS CREEK FISH PAS
<ul><li>Enter total number of section 501(c)(3) ar</li><li>Enter total number of other organizations</li></ul>							

JSA 4E1288 1.000

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

40930I 649C NFWF PAGE 67

# 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT		52-1384139					
Part I General Information on Grants and	d Assistanc	е				•	
1 Does the organization maintain records to s	ubstantiate th	ne amount of th	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant	ts or assistand	ce?					X Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to D	omestic Or	ganizations a	nd Domestic Gov	vernments. Com	nplete if the organiz	zation answered "Y	es" to Form 990.
Part IV, line 21, for any recipient the							,
					T	T	
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) LAKE COUNTY FOREST							
2000 N MILWAUKEE AVE LIBERTYVILLE, IL 60030	36-6009339	GOVT	118,959.				COASTAL WETLANDS RE
(2) LAKE COUNTY SOIL & WATER							
616 THIRD AVE TWO HARBORS, MN 55616	41-1346500	GOVT	11,906.				STEWART RIVER STABI
(3) Lancaster farmland trust							
125 LANCASTER AVE STRASBURG, PA 17579	20-4233446	501(C)(3)	20,865.				BUILDING FRAMEWORK
(4) LAND & CULTURAL FUND							
4 E CHURCH ST FREDERICK, MD 21701	26-0549905		9,575.				CITIZENS PROMOTING
(5) LAND CONSERVANCY OF SLO							
PO BOX 12206 STE A	77-0039294	501(C)(3)	19,300.				2014 INVASIVE SPECI
(6) LAND STEWARDSHIP PROJECT							
2200 FOURTH ST WHITE BEAR LAKE, MN 55110	41-1466054		31,957.				ACCELERATING AND IM
(7) LANDSTUDIES							
315 NORTH ST LILITZ, PA 17543	23-2618961		26,681.				HEMLOCK TOWNSHIP FI
(8) LEADERSHIP ARLINGTON							
4420 N FAIRFAX DR STE 102	54-1907862		35,882.				MISC. EXPENSES REFU
(9) LEMHI COUNTY							
200 FULTON ST STE 201 SALMON, ID 83467	82-6000306	GOVT	7,138.				REGIONAL PREVENTION
(10) LEWIS AND CLARK COMM							
5800 GODFREY RD, DISTRICT 536	37-0919339		64,877.				ILLINOIS CONSERVATI
(11) LGL ALASKA RES. ASSOC INC							
1101 E 76TH AVE STE B ANCHORAGE, AK 99518	74-2125715	501(C)(3)	40,623.				EULACHON AND BELUGA
(12) LINCOLN COUNTY							
PO BOX 46 1310 MORGAN ST	91-0935441		7,582.				SCABLANDS WEED MAPP
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able			
3 Enter total number of other organizations I	isted in the li	ne 1 table	<u> </u>			<u> </u>	

NFWF

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

Schedule I (Form 990) (2014)

JSA

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# 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDATION						52-1384139		
Part I General Information on Grants ar	nd Assistance	е				•		
Does the organization maintain records to s	substantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and		
the selection criteria used to award the gran	nts or assistanc	e?					X Yes No	
2 Describe in Part IV the organization's proce							_	
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient							es" to Form 990,	
(a) Name and address of organization or government	<b>(b)</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) LONGLEAF ALLIANCE								
12130 DIXON CENTER RD ATTN: HILA GATEWOOD	75-3263645	501(C)(3)	218,048.				EXPANDING THE ALERT	
(2) LOPEZ ISLAND CONSERVATION								
PO BOX 2 37 WASHBURN PLACE	27-0298012		8,070.				SAN JUAN ISLANDS NAT	
(3) LOS ANGELES AUDUBON								
PO BOX 931057 LOS ANGELES, CA 90093	95-6093704		10,315.				BALLONA CREEK WATERS	
(4) LOS ANGELES CONSERVATION								
445 S FIGUEROA ST STE 710	95-4002138	501(C)(3)	75,143.				COASTAL HABITAT REST	
(5) LOS ANGELES ROD AND REEL								
1100 18TH ST MANHATTAN BEACH, CA 90262	95-6120611		30,000.				EDUCATING YOUTH ABOU	
(6) LOUISIANA STATE UNIVERSITY								
204 THOMAS BOYD HALL BATON ROUGE, LA 70803	72-6000848		68,189.				BTEX AND H2S EMISSION	
(7) LOW IMPACT DEVELOPMENT								
4600 POWDER MILL RD STE 200	52-2138076	501(C)(3)	62,207.				PG COUNTY MUNICIPAL	
(8) LYCOMING COLLEGE								
700 COLLEGE PLACE BIOLOGY DEPARTMENT	24-0795965		11,000.				SAMPLING UNASSESSED	
(9) LYN C. NORBERG, MAI								
1761 EAST COLLEGE PARKWAY STE 111	470-54-9709		22,000.				WATER RIGHTS ACQUIS	
(10) MARIN AUDUBON SOCIETY								
PO BOX 599 MILL VALLEY, CA 94942	94-6076664		175,000.				CORTE MADERA ECOLOG	
(11) MARINE APPLIED RESEARCH								
1230 BRICKYARD COVE RD STE 101	31-1821639	501(C)(3)	22,028.				POST-PROCESSING AND	
(12) MARINE ENVIRONMENTAL								
DAUPHIN ISLAND SEA LAB 101 BEINVILLE BLVD	63-0779657		656,316.				ALABAMA MARINE MAMMA	
2 Enter total number of section 501(c)(3) as								
3 Enter total number of other organizations	listed in the lin	ne 1 table				<b>&gt;</b>		

JSA

4E1288 1.000

### **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	I.TON					52-1384139	1
Part I General Information on Grants an	d Assistanc	е					
<ol> <li>Does the organization maintain records to s the selection criteria used to award the gran</li> <li>Describe in Part IV the organization's proce</li> </ol>	ts or assistand	e?			eligibility for the gran		X Yes No
Part II Grants and Other Assistance to Depart IV, line 21, for any recipient to							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MARINE MAMMAL CENTER							
2000 BUNKER RD FINANCE DEPT	51-0144434		50,000.				HAWAIIAN MONK SEAL I
(2) MARINE SCIENCE INSTITUTE							
500 DISCOVERY PARKWAY	94-1719649		14,211.				RESTORATION & ENHANCE
(3) MARTIN, OTTAWAY							
172 MONMOUTH ST STE 201 RED BANK, NJ 07701	22-3399946		72,905.				MARITIME WASTE STREAM
(4) MARYLAND DEPT OF NAT RES							
TAWES STATE OFFICE BLDG B-4	52-6002003	GOVT	15,028.				REFORESTING ABANDONI
(5) MASON VALLEY CONSERVATION							
215 W BRIDGE ST STE 11A YERINGTON, NV 89447	88-0158729	GOVT	57,951.				RESTORATION OF RETI
(6) MATTOLE RESTORATION COUNC							
29230 MATTOLE RD PO BOX 160	68-0037149		10,288.				PLANTING FOR THE FU
(7) MCBAIN ASSOCIATES							
980 7TH ST ARCATA, CA 95521	68-0465738		45,652.				SAN JOAQUIN RIVER RI
(8) MCHUGH ENVIRONMENTAL							
96 MANITO RD MANASQUAN, NJ 08736	27-4532124		12,917.				SUPPORT HURRICANE SA
(9) MCMANAMEY & MCMANAMEY							
11951 FREEDOM DR STE 1300 RESTON, VA 20190	54-2032271		205,124.				NFWF PROPERTY INSURA
(10) MCNEESE STATE UNIVERSITY							
4205 RYAN ST SMITH HALL RM 136	72-6001688		113,062.				SOUTHWEST LOUISIANA
(11) MD ASSO OF SOIL CONSERVAT							
53 SLAMA RD EDGEWATER, MD 21037	23-7003994	GOVT	71,108.				MARYLAND FARM STEWAR
(12) ME MARINE RESOURCES							
21 STATE HOUSE STATION	01-6000001	GOVT	12,761.				INCREASING MONITORIN
2 Enter total number of section 501(c)(3) ar							
3 Enter total number of other organizations	listed in the li	ne 1 table			<u> </u>	<b>&gt;</b>	

## **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.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part I General Information on Grants a							
1 Does the organization maintain records to							
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to							es" to Form 990,
Part IV, line 21, for any recipient	that received	more than \$5	,000. Part II can b	be duplicated if a	additional space is	needed.	
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government	.,	if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) MEDOCINO COUNTY RESOURCE							
206 MASON ST STE F UKIAH, CA 95482	68-0060208		23,092.				WORKING LANDSCAPES F
(2) MENTOR LAW GROUP, LLC							
315 FIFTH AVE SEATTLE, WA 98104	91-2033442		63,692.				COLUMBIA BASIN WATER
(3) MERKEL & ASSOCIATES							
5434 RUFFIN RD SAN DIEGO, CA 92123	33-0632638		444,255.				EELGRASS RESTORATION
(4) METRO WASHINGTON COUNCIL							
777 NORTH CAPITOL ST NE STE 300	52-6060391		31,500.				INTEGRATED STORMWATE
(5) MI DEPT OF AGRICULTURE							
525 WEST ALLEGAN ST LANSING, MI 48909	38-6000134	GOVT	55,018.				TECHNICAL ASSISTANCE
(6) MID KLAMATH WATERSHED							
PO BOX 409 ORLEANS, CA 95556	20-1501256	501(C)(3)	155,871.				MID KLAMATH COHO REA
(7) MID-ATLANTIC CENTER							
1237 OYSTERDALE RD OLEY, PA 19547	27-2383011		92,194.				PRIVATE LANDS BOG TU
(8) MIDSHORE RIVERKEEPER							
24 N HARRISON ST EASTON, MD 21601	26-3187608		6,991.				CHOPTANK AND WYE WAT
(9) MIDWEST ENVIRONMENTAL							
525 S TYLER RD STE N-1B	36-3696349		97,093.				ADVANCED ENVIRONMENT
(10) MILLIKEN FORESTRY COMPANY							
213 N GRAMPIAN HILLS RD COLUMBIA, SC 29223	57-0439424		39,900.				APALACHICOLA RED-COC
(11) MILLS CONSTRUCTION, LLC							
PO BOX 6320 PAHRUMP, NV 89041	20-0884935		23,100.				NEVADA NWR LAND AND
(12) MISSISSIPPI LAND TRUST							
4858 OLD LELAND RD LELAND, MS 38756	64-0886325		175,000.				BIRD HABITAT CREATIO
<ul><li>2 Enter total number of section 501(c)(3) a</li><li>3 Enter total number of other organizations</li></ul>	nd governmen	t organizations	listed in the line 1 t	able		▶	

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

Schedule I (Form 990) (2014)

JSA

### **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.

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. 2014

OMB No. 1545-0047

**Open to Public** Inspection

**Employer identification number** Name of the organization NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 **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? X Yes 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant or government if applicable grant non-cash assistance cash assistance or assistance (1) MONTANA STATE UNIVERSITY 310 LEWIS HALL BOZEMAN, MT 59717 81-6010045 13,375 DEMOGRAPHY OF MONTAN (2) MS DEPT OF ENIVORNMENTAL 515 EAST AMITE ST JACKSON, MS 39201 64-0629297 GOVT 1,112,065 AUDUBON COASTAL BIRD (3) MUSEUM OF SCIENCE DBA MIAMI SCIENCE MUSEUM 3280 S MIAMI AVE MIAMI, FL 33129 59-0854960 501(C)(3) 62,349 VIRGINIA KEY NORTH P (4) MWH AMERICAS, INC. PO BOX 842728 LOS ANGELES, CA 90084 95-1878805 65,294 TO 1: SELECTION CRIT (5) NATIONAL ASSOCIATION 440 FIRST ST NW WASHINGTON, DC 20001 53-0190321 501(C)(3) 12,622. FIVE STAR PROJECT AD (6) NATIONAL AUDUBON SOCIETY 901 S MAPLE BLDG 2 STE 410 13-1624102 501(C)(3) 69,313 BIRD AND BEACH STEWA (7) NATIONAL WILDLIFE FED 53-0204616 501(C)(3) 103,375 6 NICKERSON ST STE 200 SEATTLE, WA 98109 CHESAPEAKE COMMONS D (8) NATIONAL WILDLIFE REFUGE 1901 PENNSYLVANIA AVE NW STE 407 23-7447365 501(C)(3) 6,350 CONNECTICUT RIVER WA (9) NAT'L ACADEMIES 500 5TH ST NW ATTN: CASH MGMT 53-0196932 501(C)(3) 14.824 PEER REVIEW PANEL FA (10) NAT'L PARKS CONSERVATION 53-0225165 501(C)(3) 12,079 1300 19TH ST NW WASHINGTON, DC 20036 LONE STAR COASTAL NA (11) NATURAL RESOURCES 111 SUTTER ST 20TH FLOOR 13-2654926 13,278 SAN JOAQUIN RIVER RE (12) NATUREBRIDGE 28 GEARY ST STE 650 SAN FRANCISCO, CA 94108 94-2145930 ENVIRONMENTAL EDUCAT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Enter total number of other organizations listed in the line 1 table

# **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran	ts or assistand	e?					X Yes No
2 Describe in Part IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient to							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NC DEPT OF ENVIRONMENT							
1606 MAIL SERVICE CENTER	56-6000372	GOVT	124,341.				NORTH CAROLINA SHRIM
(2) NEVADA DIVISION							
901 S STEWART ST STE 5001	88-6000022	GOVT	43,417.				WALKER RIVER BASIN W
(3) NEW HAMPSHIRE ASSOCIATION							
PO BOX 2311 CONCORD, NH 03302	02-0332297		14,361.				NEW ENGLAND COTTONTA
(4) NEW MEXICO ASSOCIATION							
163 TRAIL CANYON RD CARLSBAD, NM 88220	85-0411367	501(C)(3)	50,645.				LESSER PRAIRIE CHICK
(5) NEW MEXICO STATE UNIV							
PO BOX 30002 MSC 4901	85-0170157	GOVT	7,457.				UNDERSTANDING IMPACT
(6) NEW VENTURE FUND							
1201 CONNECTICUT AVE NW STE 300	20-5806345		20,000.				CHESAPEAKE NETWORKIN
(7) NEW YORK CITY PARKS							
830 FIFTH AVE RM 250 GRANTS OFFICE	13-6400434	GOVT	35,000.				INSTALLATION OF A GR
(8) NEWFIELDS COMPANIES LLC							
1349 W PEACHTREE ST STE 2000	58-2585034		42,398.				SAN JOAQUIN RIVER RE
(9) NEWTOWN CREEK ALLIANCE							
62 GREENPOINT AVE APT 3 BROOKLYN, NY 11222	26-1832918		6,021.				THE LIVING DOCK (NY)
(10) NJ AUDUBON							
SPEIDEN HOUSE 1327 CANAL RD	22-1539642	501(C)(3)	13,557.				SYNERGISTIC CONSERVA
(11) NJ CONSERVATION FDN							
170 LONGVIEW RD FAR HILLS, NJ 07931	22-6065456		14,400.				PREVENTING EROSION A
(12) NORTAC							
11233 W YUCCA LITTLETON, CO 80125	46-4028996		43,768.				PRIBILOF ISLAND SEAB
2 Enter total number of section 501(c)(3) ar							
<b>3</b> Enter total number of other organizations	listed in the lir	ne 1 table					

# **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part I General Information on Grants an		e				52-1384139	
1 Does the organization maintain records to s	substantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran	its or assistand	e?					X Yes No
2 Describe in Part IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to I	Domestic Or	ganizations a	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" to Form 990,
Part IV, line 21, for any recipient t	that received	more than \$5	,000. Part II can b	oe duplicated if a	additional space is	needed.	
		T	<u> </u>	I	(f) Mathed of columbias	I	T
(a) Name and address of organization or government	<b>(b)</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) NORTH BROOKLYN							
148-150 HURON ST BROOKLYN, NY 11222	11-2555446		72,713.				NORTH BROOKLYN DEVEL
(2) NORTH PACIFIC FISHERIES							
PO BOX 796 HOMER, AK 99603	90-0775806		26,920.				TESTING ELECTRONIC N
(3) NORTHCOAST MARINE MAMMAL							
424 HOWE DR CRESCENT CITY, CA 95531	68-0187497		10,018.				NORTHCOAST MARINE MA
(4) NORTHEAST ORGANIC							
PO BOX 164 STEVENSON, CT 06491	06-1477166	501(C)(3)	24,919.				DEMONSTRATING GREEN
(5) NORTHWEST CA RESOURCE							
PO BOX 2571 WEAVERVILLE, CA 96093	68-0396859		11,730.				SHARBER CREEK AND PI
(6) NORTHWEST FL STATE							
100 COLLEGE BLVD NICEVILLE, FL 32578	59-2865698	501(C)(3)	14,347.				RESTORATION OF MULTI
(7) NORTHWEST YOUTH CORPS							
2621 AUGUSTA ST EUGENE, OR 97403	93-0818160		111,158.				KLAMATH BASIN STEWAR
(8) NOVA SOUTHEASTERN							
3301 COLLEGE AVE FORT LAUDERDALE, FL 33314	59-1083502		91,996.				EVALUATING ALTERNAT
(9) NUKA RESEARCH							
PO BOX 175 SELDOVIA, AK 99663	20-0460327		80,730.				ADVISORY PANEL TRAVE
(10) NY CITY AUDUBON SOCIETY							
71 W 23RD ST STE 1523 NEW YORK, NY 10010	13-3057954		7,734.				URBAN OASIS IN MCGOI
(11) NY/NJ BAYKEEPER							
52 WEST FRONT ST KEYPORT, NJ 07735	22-3617000	501(C)(3)	59,626.				NY NJ BAYKEEPER OYST
(12) OCCIDENTAL ART & ECOLOGY							
15290 COLEMAN VALLEY RD	68-0359676		6,652.				SCHOOLYARD HABITAT
2 Enter total number of section 501(c)(3) ar	nd governmen	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations	listed in the lir	ne 1 table					

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

Schedule I (Form 990) (2014)

JSA

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

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<ol> <li>Does the organization maintain records to sthe selection criteria used to award the gran</li> <li>Describe in Part IV the organization's process.</li> </ol>	nts or assistand edures for mor	ee? nitoring the use	of grant funds in the	United States.			X Yes No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient	Domestic Or that received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	ernments. Com be duplicated if a	pplete if the organized ditional space is a	zation answered "Y needed. 	es" to Form 990,
<ol> <li>(a) Name and address of organization or government</li> </ol>	<b>(b)</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) OCCIDENTAL COLLEGE							
1600 CAMPUS RD M-3 LOS ANGELES, CA 90041	95-1667177		20,882.				SUBTIDAL REEF RESTOR
(2) OCEAN TRUST							
1655 N FORT MYER DR STE 700	54-1602479	501(C)(3)	10,898.				BAHIA GRANDE RESTORA
(3) OCEANIC SOCIETY							
PO BOX 437 SIR FRANCIS DRAKE BLVD	94-3105570		9,978.				ANNUAL SEA TURTLE A
(4) OIKONOS - ECOSYSTEM							
PO BOX 1932 BENICIA, CA 94510	03-0385067	501(C)(3)	297,826.				ANO NUEVO ISLAND SEA
(5) ONONDAGA COUNTY SOIL							
6680 ONONDAGA LAKE PARKWAY	15-6000715	GOVT	39,438.				NUTRIENT AND SEDIMEN
(6) OPEN SPACE ALLIANCE							
79 N 11TH ST BROOKLYN, NY 11249	01-0849087		20,258.				61 FRANKLIN ST. GARI
(7) OPEN SPACE COUNCIL							
3221 OAK HILL AVE ST. LOUIS, MO 63116	43-6065329		12,000.				LOWER MERAMEC HANDS-
(8) OR WATER RESOURCES							
725 SUMMER ST NE STE A SALEM, OR 97301	93-6001760	GOVT	209,273.				FLOW GAUGES FOR THE
(9) OREGON ENVIRONMENTAL							
222 N DAVIS ST STE 309 PORTLAND, OR 97209	93-0578714		8,799.				CLACKAMAS BASIN STRA
(10) OREGON STATE UNIVERSITY							
312 KERR ADMIN BLDG CORVALLIS, OR 97331	61-1730890		157,811.				MYXOZOAN FISH DISEAS
(11) OSWEGO COUNTY SOIL							
3105 STATE ROUTE 3 ATTN: KRISTY LAMANCHE	15-6002510	GOVT	80,025.				AQUATIC INVASIVE SPE
(12) OZAUKEE COUNTY							
121 W MAIN ST PO BOX 994	39-6005726	GOVT	23,400.				WEST BRANCH ULAO CRE

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury Internal Revenue Service Name of the organization

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OMB No. 1545-0047

2014

**Open to Public** Inspection

Employer identification number

Part I General Information on Grants and						52-1384139	)
<ol> <li>Does the organization maintain records to so the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's proced</li> </ol>	ubstantiate thes	ne amount of the					X Yes No
Part II Grants and Other Assistance to D	omestic Or	ganizations a	nd Domestic Gov	vernments. Com			es" to Form 990,
Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can t	oe duplicated if a		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) PA RESOURCES COUNCIL							
3606 PROVIDENCE RD NEWTOWN SQUARE, PA 19073	23-6403971	501(C)(3)	17,940.				CREATING RAIN GARDEN
(2) PA STATE UNIVERSITY							
227 W BEAVER AVE STE 401	24-6000376		143,260.				GREENING THE LOWER S
(3) PACIFIC STATES MARINE FISH							
205 SE SPONKANE ST STE 100	93-6002376	501(C)(3)	36,217.				NATIONAL FISH HABITA
(4) PAINTERHOOD CREEK FARM							
1249 RD 30 CALEB STOTTS LONGTON, KS 67352	47-2565222		114,880.				PROGRAM RELATED EXP
(5) PALOS VERDES PENINSULA							
916 SILVER SPUR RD STE 207	33-0309722		8,983.				ABALONE COVE COASTA
(6) PARTY RENTAL LTD							
275 NORTH ST TETERBORO, NJ 07608	22-1961258		5,473.				NOAA FISH FRY - II
(7) PENNYPACK ECOLOGICAL							
2955 EDGEHILL RD	23-1732453		20,396.				PENNYPACK WATERSHED
(8) PHEASANTS FOREVER, INC.							
1783 BUERKLE CIRCLE ATTN: COLAN WITT	41-1429149	501(C)(3)	37,120.				CUMBERLAND PLATEAU I
(9) PIT RESOURCE CONSERVATION							
101 MARKET ST BIEBER, CA 96009	68-0425211	GOVT	51,114.				UPPER ASH CREEK WILI
(10) PITTSBURGH PARKS							
2000 TECHNOLOGY DR STE 200	23-2882145		44,990.				CITIZEN STEWARDSHIP
(11) PLUMAS CORPORATION							
PO BOX 3880 ATTN: GIA MARTYNN	68-0016418		123,164.				180201 HUC RESTORAT:
<b>(12)</b> POINT 97							
721 NW 9TH AVE STE 200 PORTLAND, OR 97209	46-3185098		17,358.				DIGITAL DECK EXPANS:
2 Enter total number of section 501(c)(3) and							
3 Enter total number of other organizations I	isted in the li	ne 1 table	<u> </u>		<u> </u>	<u> </u>	
For Paperwork Reduction Act Notice, see the Instruct							nedule I (Form 990) (2014)

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PAGE 76 40930I 649C NFWF

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

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Part I General Information on Grants and Does the organization maintain records to see the organization maintain records the organization maintain records to see the organization maintain records and records the organization			e grants or assistar	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to Part IV, line 21, for any recipient	Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com			es" to Form 990,
(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) PORT OF SAN LUIS HARBOR							
PO BOX 249 AVILA BEACH, CA 93424	93-1166865	GOVT	8,600.				PORT OF SAN LUIS PIE
(2) PORT ORFORD OCEAN TEAM							
PO BOX 679 PORT ORFORD, OR 97465	56-2373499	501(C)(3)	45,000.				BUSINESS PLANNING WO
(3) POTOMAC CONSERVANCY							
8403 COLESVILLE RD STE 805	52-1842501	501(C)(3)	25,000.				BUILDING A CONSERVAT
(4) PROTECTORES DE CUENCAS							
PO BOX 1563 YAUCO, PR 00698	66-0778121		33,432.				ACCELERATION OF WATE
(5) PROVINCETOWN CENTER							
5 HOLWAY AVE PROVINCETOWN, MA 02657	04-2609788	501(C)(3)	108,656.				EVALUATING THE EFFEC
(6) RABE CONSULTING							
421 COMMERCIAL ST ATTN: ANDREA RABE	93-1242349		14,350.				DEVELOPING RIPARIAN
(7) RADER TECH, LLC							
970 30TH ST ATTN: RON L. RADER	47-1813139		17,234.				CANEY RIVER PRAIRIE
(8) RANCH & RANGE CONSULTING							
6204 HARLAN DR KLAMATH FALLS, OR 97603	27-0716623		42,822.				DEVELOPING RIPARIAN
(9) REAL SCHOOL GARDENS							
1700 UNIVERSITY DR STE 260	20-5946552	501(C)(3)	19,105.				FIVE STAR PROGRAM RE
(10) REGENTS OF THE UNIV							
PO BOX 1450 NW 5957 MINNEAPOLIS, MN 55485	41-6007513		7,905.				BEE SQUAD POLLINATOR
(11) REGENTS OF UOC - DAVIS							
PO BOX 989062 UNIV OF CA, DAVIS	94-6036494		14,884.				FISHERMEN-LED FISHIN
(12) RESOLVE, INC.							
1255 23RD ST NW STE 275	52-1841035		30,000.				DELAWARE RIVER RESTO

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# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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OMB No. 1545-0047

2014

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Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	T.TON					52-1384139	)
Part I General Information on Grants a	nd Assistanc	е				•	
1 Does the organization maintain records to	substantiate th	ne amount of th	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce	edures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to					polete if the organiz	ration answered "Y	es" to Form 990
Part IV, line 21, for any recipient	that received	more than \$5	5,000. Part II can b	be duplicated if a	additional space is	needed.	oo to i oiiii ooo,
, , , , , , , , , , , , , , , , , , , ,		•	,				
1 (a) Name and address of organization or government	<b>(b)</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) RESOURCES FIRST FDN							
74 LUNT RD STE 300-302 FALMOUTH, ME 04105	01-0531683		104,876.				ENGAGING LANDOWNERS
(2) RETAIL INDUSTRY LEADERS							
1700 N MOORE ST STE 2250	04-2395151		578,310.				RETAIL COMPLIANCE AS
(3) RHODE ISLAND RESOURCE							
2283 HARTFORD AVE JOHNSTON, RI 02919	23-7179170		32,000.				CREATING HABITAT FOR
(4) RI COASTAL RESOURCES							
4808 TOWER HILL RD WAKEFIELD, RI 02879	05-6000522	GOVT	50,247.				REUSING DREDGED MATE
(5) RIDGE TO REEFS							
6618 STIRRUP CT ELDERSBURG, MD 21784	45-1476011	501(C)(3)	40,000.				DEVELOPING A WATERSH
(6) RIVANNA CONSERVATION							
108 5TH ST SE STE 206	52-0194008		13,360.				GOING X-STREAM - THE
(7) RIVER ALLIANCE							
306 E WILSON ST STE 2W MADISON, WI 53703	39-1792143	501(C)(3)	52,161.				CLEARING A PATH: REV
(8) RIVER DESIGN GROUP							
PO BOX 1722 236 WISCONSIN AVE	75-3125545		121,101.				LOST TRAIL NATIONAL
(9) RIVER PARTNERS							
1301 L ST STE 4 MODESTO, CA 95354	94-3302335	501(C)(3)	90,587.				HABITAT RESTORATION
(10) RIZZO MATTINGLY BOSWORTH							
1300 SW SIXTH AVE STE 330	93-1310683		7,000.				PROPOSED UPPER KLAMA
(11) ROBERT GLENN ASSOCIATES							
PO BOX 840 WRIGHTSVILLE BEACH, NC 28405	56-1104533		12,500.				2015 RASP APPRAISALS
(12) ROBISON ENGINEERING							
35 HIGH RIDGE CT RENO, NV 89511	47-0955825		16,500.				PHASE 1 ENVIRONMENTA
2 Enter total number of section 501(c)(3) a							
3 Enter total number of other organizations	listed in the li	ne 1 table				<u> ▶</u>	

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### **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Internal Revenue Service

Name of the organization

Department of the Treasury

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NATIONAL FISH AND WILDLIFE FOUNDA		52-1384139					
Part I General Information on Grants an	d Assistanc	е				1	
1 Does the organization maintain records to s	ubstantiate th	ne amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce							
Part II Grants and Other Assistance to Deart IV, line 21, for any recipient to							es" to Form 990,
(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) ROCKY GAP CASINO RESORT							
16701 LAKE VIEW RD NE FLINTSTONE, MD 21530	45-3339375		18,204.				CHESAPEAKE NETWORKI
(2) ROCKY MNTN BIRD OBSERV							
14500 LARK BUNTING LANE BRIGHTON, CO 80603	84-1079882	501(C)(3)	131,820.				BUSINESS PLAN AND M
(3) ROCKY MOUNTAIN YOUTH							
1203 KING DR TAOS, NM 87571	85-0404817		12,000.				PINE TREE LOOP TRAI
(4) ROGER WILLIAMS UNIVERSITY							
ONE OLD FERRY RD BRISTOL, RI 02809	05-0277222		11,027.				ANALYSIS OF MARINE
(5) ROOT RIVER SOIL & WATER							
805 STATE HWY 44/76 STE 1	41-6005804	GOVT	26,401.				TARGETED LANDOWNER
(6) RUTGERS UNIVERSITY							
14 COLLEGE FARM RD NEW BRUNSWICK, NJ 08901	22-6001086		60,391.				IDENTIFYING THE IMP
_(7) SAC COUNTY SOIL & WATER							
404 MORNINGSIDE DR SAC CITY, IA 50583	42-1210199	GOVT	32,726.				COVER CROP IMPLEMEN
(8) SACRAMENTO VALLEY							
PO BOX 163351 SACRAMENTO, CA 95816	68-0256214	501(C)(3)	216,651.				180400 HUC WATERSHE
(9) saginaw basin land							
PO BOX 222 BAY CITY, MI 48707	38-3362048		20,000.				SAGINAW BAY IMPERIL
(10) SAINT REGIS MOHAWK TRIBE							
412 STATE ROUTE 37 AKWESASNE, NY 13655	16-1007650		16,750.				EVALUATION OF THREA
(11) SAN DIEGO ASSOCIATION							
401 B ST STE 800 SAN DIEGO, CA 92101	95-2784997	GOVT	228,157.				WATER QUALITY AND S
(12) SAN DIEGO STATE UNIV							
5250 CAMPANILE DR SAN DIEGO, CA 92182	95-6042721		60,568.				COASTAL USE MAPPING
<ul><li>2 Enter total number of section 501(c)(3) ar</li><li>3 Enter total number of other organizations</li></ul>						<b>&gt;</b> <b>&gt;</b>	

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# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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Department of the Treasury
Internal Revenue Service
Name of the organization

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2014

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Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT						52-1384139	<del>)</del>
Part I General Information on Grants and	d Assistanc	е					
<ol> <li>Does the organization maintain records to so the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's proced</li> </ol>	ts or assistand	e?			eligibility for the grant		X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	omestic Or hat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Compe duplicated if a	nplete if the organiz additional space is i	ration answered "Y needed.	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SAN MATEO COUNTY							
555 COUNTY CENTER 5TH FLOOR	94-6000532	GOVT	152,723.				COYOTE POINT PROMENA
(2) SANTA BARBARA MUSEUM			,				
2559 PUESTA DEL SOL SANTA BARBARA, CA 93105	95-1643378		8,156.				BIRD SPECIMEN PROCES
(3) SANTA BARBARA ZOO							
500 NINOS DR SANTA BARBARA, CA 93103	95-2268554		20,021.				NEST MANAGEMENT OF C
(4) SANTA MONICA BAY							
PO BOX 13336 ATTN: TOM FORD	33-0420271	501(C)(3)	506,076.				PALOS VERDES KELP FO
(5) SCOTT RIVER WATER							
PO BOX 591 311 COLLIER WAY #3	01-0924657	501(C)(3)	52,668.				FRENCH CREEK COHO EN
(6) SE ASSOC OF FISH & WLDLFE							
248 W WASHINGTON ST MADISON, GA 30650	57-0542609		42,636.				DISTRIBUTION AND HAB
(7) SEA RESEARCH							
55 COOGAN BLVD MYSTIC, CT 06355	06-1480300	501(C)(3)	11,228.				ECO SPLASH EVENT! CE
(8) SEA TURTLE CONSERVANCY							
4424 NW 13TH ST GAINESVILLE, FL 32609	59-6151069	501(C)(3)	575,522.				ELIMINATING LIGHT PO
(9) SEACOAST SCIENCE CNT							
570 OCEAN BLVD RYE, NH 03870	02-0526488		15,877.				ESTABLISHING A NEW M
(10) SEAMENS CHURCH INSTITUTE							
241 WATER ST NEW YORK, NY 10038	13-5562356		9,953.				NATIONWIDE SEAFARERS
(11) SEATTLE TILTH ASSOCIATION							
4649 SUNNYSIDE AVE N STE 100	94-3261971		11,285.				SEATTLE YOUTH AGRICU
(12) SEATUCK ENVIRONMENTAL							
550 SOUTH BAY AVE ISLIP, NY 11751	11-2977549		9,040.				MASSAPEQUA CREEK FIS
2 Enter total number of section 501(c)(3) an							
3 Enter total number of other organizations I	isted in the li	ne 1 table				<u></u>	

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Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	TION					52-1384139	9
Part I General Information on Grants and	d Assistanc	е					
Does the organization maintain records to s     the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SHANNON PETERSON CIOTTI							
11210 CAMJEN LANE AUBURN, CA 95603	590-28-4888		7,286.				TRIAL WATER TRANSACT
(2) SHELBY FARMS PARK							
500 N PINE LAKE DR MEMPHIS, TN 38134	26-0350397		17,185.				ADVANCING WATERSHED
(3) SHENANDOAH NATIONAL PARK							
PO BOX 2977 CHARLOTTESVILLE, VA 22902	20-8685310		7,500.				CONSERVATION COMMUNI
(4) SISKIYOU RESOURCE							
450 MAIN ST ETNA, CA 96027	94-2430963	GOVT	10,738.				SUGAR CREEK OFF-CHAI
(5) SIUSLAW WATERSHED COUNCIL							
ATTN: PAULA CROWDER PO BOX 422	93-1234456		8,731.				WAITE RANCH TIDAL W
(6) SIXTEENTH STREET							
1337 S CESAR E CHAVEZ DR	39-1180475		13,842.				PULASKI PARK URBAN S
(7) SKEO SOLUTIONS							
921 2ND ST SE CHARLOTTESVILLE, VA 22902	54-1813497		24,081.				TIOUGHNIOGA RIVER U
(8) SMITH CREEK RANCH, LLC							
HC 61 BOX 6150 AUSTIN, NV 89310	88-0327570		17,640.				SMITH CREEK RANCH HA
(9) SMITH VALLEY CONSERVATION							
215 W BRIDGE ST STE 11A YERINGTON, NV 89447	88-0158728	GOVT	11,585.				WALKER RIVER RESTORA
(10) SMITHSONIAN CONSERVATION							
24411 NETWORK PLACE OSP CLEARING ACCT	53-0206027		196,977.				CAPACITY BUILDING AN
(11) SNOHOMISH CONS DIST							
528 91ST AVE, SE STE A	91-6000423	GOVT	60,328.				TECHNICAL ASSISTANCE
(12) SNOOK FOUNDATION							
1505 WEST TERRACE DR LAKE WORTH, FL 33460	65-0839514		13,000.				IANGLER ANGLER ACTIO
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations I	isted in the lir	ne 1 table	<u> </u>			<u></u>	

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	LION					52-1384139	1
Part I General Information on Grants and	d Assistanc	е					
<ol> <li>Does the organization maintain records to so the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistand	e?					X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SONOMA LAND TRUST							
822 5TH ST SANTA ROSA, CA 95404	51-0197006		245,400.				SEARS POINT RESTORAT
(2) SOUND GIS							
1530 27TH AVE ATTN: ALLISON BAILEY	20-2680756		22,470.				DEVELOPMENT OF GIS I
(3) SOUNDKEEPER, INC.							
PO BOX 4058 7 EDGEWATER PLACE	06-1224565		47,250.				SOUNDKEEEPER PUMPOUT
(4) SOUTH CAROLINA WILDLIFE							
215 PICKENS ST COLUMBIA, SC 29205	57-0602549		25,000.				SEWEE LONGLEAF CONSI
(5) SOUTH CENTRAL REGIONAL							
127 WASHINGTON AVE 4TH FLOOR W	06-0770103	GOVT	18,300.				CREATING A REGIONAL
(6) SOUTH DAKOTA GRASSLAND							
PO BOX 401 221 N MAIN PRESHO, SD 57568	46-0449860		20,000.				ENHANCING RANGELAND
(7) SOUTHEASTERN NATURAL							
1858 LOCK AND DAM RD AUGUSTA, GA 30906	58-2247999		16,360.				POND AND WETLAND IM
(8) SOUTHWEST BADGER RC&D							
1370 N WATER ST STE 3 PLATTEVILLE, WI 53818	39-1759169		31,490.				SOUTHWEST WISCONSIN
(9) SOUTHWEST CONSERVATION							
701 CAMINO DEL RIO STE 101	84-1450808		7,200.				SAN LUIS VALLEY ENGA
(10) ST. CLAIR COUNTY, MI							
200 GRAND RIVER AVE PORT HURON, MI 48060	38-6006420	GOVT	27,040.				ST CLAIR RIVER COAST
(11) STATE OF MAINE							
21 STATE HOUSE STATION	01-6000001	GOVT	303,607.				KENNEBEC RIVER RESTO
(12) STATE OF NEVADA							
901 S STEWART ST STE 4001	88-6000022		8,005.				SUPPLIES AND EQUIPME
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		▶	
3 Enter total number of other organizations I	isted in the lir	ne 1 table				<b>&gt;</b>	

JSA

4E1288 1.000

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

1 Does the organization maintain records to so			e grants or assistar	nce, the grantees	d' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proceed	dures for mor	itoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	omestic Org hat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Compe duplicated if a	nplete if the organiz additional space is i	ration answered "\ needed.	es" to Form 990,
(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) STATE UNIVERSITY OF NY							
350 NEW CAMPUS DR BROCKPORT, NY 14420	14-1368361		39,470.				POPULATION AND HABI
(2) STEWART TITLE OF COASTAL							
202 W GOODWIN VICTORIA, TX 77901	74-1534607		10,577,762.				POWDERHORN RANCH LAI
(3) STOCKBRIDGE-MUNSEE							
N8476 MOH HE CON NUCK RD PO BOX 070	39-1145449		13,771.				MOHICAN NATION WETL
(4) STRATEGIC OCEAN SOLUTIONS							
PO BOX 2794 SAN DIEGO, CA 92038	26-0814352		48,797.				WEST COAST GOVERNORS
(5) STROUD WATER RESEARCH							
970 SPENCER RD AVONDALE, PA 19311	52-2081073	501(C)(3)	109,138.				COMPREHENSIVE AGRIC
(6) SUMMIT LAKE PAIUTE							
1708 H ST SPARKS, NV 89431	94-2638038		87,500.				TROUT ASSESSMENT AND
(7) SUNPOWER CORPORATION							
1414 HARBOUR WAY S RICHMOND, CA 94804	20-8248962		96,458.				CDFW I&C-CVSR
(8) SUNY COLLEGE							
35 STATE ST ATTN: CASH RECEIPT DEPT	14-1368361		193,669.				FACTORS LIMITING RE
(9) SUPERIOR WATERSHED							
2 PETER WHITE DR PRESQUE ISLE PARK	38-3492677	501(C)(3)	31,744.				COOPERATIVE WEED MAI
(10) SUSSEX CONSERVATION							
21315 BERLIN RD UNIT 4 GEORGETOWN, DE 19947	51-0064330	GOVT	5,250.				BUILDING LOCAL GOVER
(11) SUSTAIN CHARLOTTE							
1413 BRIAR CREEK RD CHARLOTTE, NC 20205	01-0975452		8,475.				NEIGHBORHOOD SUSTAIN
(12) SUSTAINABLE CHESAPEAKE							
3607 E MARSHALL ST RICHMOND, VA 23223	45-3763841	501 (C) (3)	129,623.				CHESAPEAKE 2015

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUND		52-1384139					
Part I General Information on Grants a	and Assistanc	е				•	
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gra							X Yes No
2 Describe in Part IV the organization's prod							
Part II Grants and Other Assistance to Part IV, line 21, for any recipient							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SUSTAINABLE OCEAN							
630 1/2 TAYLOR AVE ATTN: TODD HALLENBECK	46-1501478		61,581.				WEST COAST GOVERNORS
(2) SWAN ECOSYSTEM CENTER							
6887 HWY 83 CONDON, MT 59826	81-0512368		48,000.				KERR MITIGATION WORK
(3) SWCA ENVIRONMENTAL							
257 EAST 200 SOUTH STE 200	86-0483317		16,669.				UPPER COLORADO FISH
(4) TALKING TALONYOUTH LDRSHP							
PO BOX 2020 11804-A HWY 337	85-0384305		40,506.				GIVING YOUTH VOICE
(5) TAMPA BAY WATCH							
3000 PINELLAS BAYWAY SOUTH	59-3191962	501(C)(3)	21,457.				MCKAY BAY AND NORTH
(6) TAYLOR ENGINEERING							
PO BOX 550510 JACKSONVILLE, FL 32255	59-2850478		7,689.				REVIEW OF ALABAMA BA
(7) TEXAS A&M FOREST SERVICE							
200 TECHNOLOGY WAY STE 1120	74-6014065		44,981.				FACILITATING LONGLE
(8) TEXAS A&M UNIVERSITY							
6300 OCEAN DR UNIT 5737	74-1760663		8,786.				OYSTER RESTORATION
(9) TEXAS GENERAL LAND OFFICE							
1700 N CONGRESS AVE AUSTIN, TX 78701	74-6000108	GOVT	58,353.				GALVESTON ISLAND STA
10) texas parks & wildlife							
4200 SMITH SCHOOL RD AUSTIN, TX 78744	74-1680372	501(C)(3)	470,461.				GUADALUPE BASS RESTO
11) texas rice							
PO BOX 644 PIERCE, TX 77467	76-0447336	501(C)(3)	54,176.				MIDDLETON MARSH WET
12) TEXAS TECH UNIVERSITY							
2500 BRDWAY LUBBOCK, TX 79409	75-6002622		7,113.				INTEGRATED ASSESSMEN

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

<ol> <li>Does the organization maintain records to so the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistand dures for mor	ee? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can b	be duplicated if a	plete if the organizadditional space is	needed.	
<ol> <li>(a) Name and address of organization or government</li> </ol>	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE CONSERVATION FUND					,		
1800 N KENT ST STE 1120 ARLINGTON, VA 22209	52-1388917	501(C)(3)	4,639,291.				ANAHUAC NATIONAL WII
(2) THE ARTIST BOAT			, ,				
2415 AVE K GALVESTON, TX 77550	56-2394277	501(C)(3)	2,321,118.				COASTAL HERITAGE PRI
(3) THE BLACKFOOT CHALLENGE							
302 N LAST CHANCE GULCH HELENA, MT 59601	81-0488863	501(C)(3)	59,526.				COMMUNITY-BASED CONS
(4) THE CT FUND							
205 WHITNEY AVE 1ST FLOOR	06-0990195	501(C)(3)	49,000.				CFE SAVE THE SOUND (
(5) THE EYEBEAM ATELIER							
540 W 21ST ST NEW YORK, NY 10011	13-3952075		7,955.				SOIL CYCLE: A MOBILI
(6) THE FERRARO GROUP							
165 W LIBERTY ST STE 210 RENO, NV 89501	76-0765402		40,500.				WALKER BASIN RESTORA
(7) THE FRESHWATER TRUST							
65 SW YAMHILL ST STE 200 PORTLAND, OR 97204	93-0843521	501(C)(3)	317,025.				CBWTP PROGRAMMATIC I
(8) THE INTERTWINE ALLIANCE							
111 SW OAK ST STE 300A PORTLAND, OR 97204	45-2629474		30,685.				INTERTWINE ALLIANCE
(9) THE LIVING DESERT							
47900 PORTOLA AVE PALM DESERT, CA 92260	95-3385354	501(C)(3)	8,701.				2014 DESERT TORTOIS
(10) THE NATURE CONSERVANCY							
4245 N FAIRFAX DR ARLINGTON, VA 22203	53-0242652		77,223.				PINEYWOODS LONGLEAF
(11) THE OCEAN FOUNDATION							
PO BOX 3952 SAN DIEGO, CA 92163	71-0863908	501(C)(3)	54,000.				EASTERN PACIFIC HAW
(12) THE PIEDMONT	_						
45 HORNER ST ATTN: TOM BOLAN	54-0935569	501(C)(3)	11,957.				ENHANCING STORMWATER

For Paperwork Reduction Act Notice, see the Instructions for 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.

Internal Revenue Service

2014

OMB No. 1545-0047

**Open to Public** ► Attach to Form 990. Department of the Treasury Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. **Employer identification number** Name of the organization NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 **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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant or government if applicable grant non-cash assistance cash assistance or assistance (1) THE REGENTS OF MICHIGAN 1800 N DIXBORO RD ANN ARBOR, MI 48105 38-6006309 17.927 RESTORATION AND CONS (2) THE REGENTS OF THE UOCA 1111 FRANKLIN ST OAKLAND, CA 94607-5200 95-6006144 8,762 SEA GRANT FELLOWSHIP (3) THE TRUST FOR PUBLIC LAND 3 SHIPMAN PLACE MONTPELIER, VT 05640 23-7222333 501(C)(3) 401,564 MANAGEMENT AND RESTO (4) THE WATERSHED PROJECT 1327 S 46TH ST BLDG 155 RICHMOND, CA 94804 91-1767292 501(C)(3) 8,000. (5) THE WILDERNESS SOCIETY 53-0167933 1615 M ST, NW WASHINGTON, DC 20036 35,000. WATERSHED HEALTH AND (6) TILLAMOOK BAY WATERSHED PO BOX 509 605 GARIBALDI AVE 93-1321388 14,508 ENGAGING YOUNG ADULT

(9) TITLE SERVICE & ESCROW CO 215 WEST BRIDGE ST STE A 88-0145535 20,000 WALKER RIVER RANCH W (10) TNC - AR 601 N UNIVERSITY AVE LITTLE ROCK, AR 72205 53-0242652 323,168 ARCHEY FORK RESTORAT (11) TOOKANY/TACONY-FRANKFORD 4500 WORTH ST PHILADELPHIA, PA 19124 75-3203091 21,189 JENKINTOWN CREEK RES (12) TOWN OF ASHLAND

12,902

248,304

101 THOMPSON ST ASHLAND, VA 23005 54-6001129 GOVT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

27-2377152

15-6001237

Enter total number of other organizations listed in the line 1 table

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

316 CALIFORNIA AVE STE 737 RENO, NV 89509

183 CORPORATE DR OWEGO, NY 13827

Schedule I (Form 990) (2014)

ASHLAND POLICE DEPAR

CORE CONSULTANT - TI

AN APPROACH FOR NATU

(7) TINDERBOX LLC

(8) TIOGA COUNTY SOIL

# **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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	TION					52-1384139	)
Part I General Information on Grants an	d Assistanc	е					
1 Does the organization maintain records to s	ubstantiate th	ne amount of the	e grants or assista	nce, the grantees	eligibility for the gran	s or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proced	dures for moi	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TOWN OF BATH, WV							
271 WILKES ST STE A	55-6000861	GOVT	15,220.				GREEN SOLUTIONS IN (
(2) TOWN OF GREENWOOD, DE							
PO BOX 216 100 WEST MARKET ST	51-0107189	GOVT	34,208.				TOWN OF GREENWOOD G
(3) TOWN OF HUNTINGTON, NY							
100 MAIN ST HUNTINGTON, NY 11743	11-6001930	GOVT	22,956.				CRAB MEADOW WATERSHI
(4) TOWN OF MIDDLETOWN							
216 N BRD ST MIDDLETOWN, DE 19709	05-6000235	GOVT	79,947.				STRENGTHENING SACHU
(5) TOWN OF NORTH BEACH							
8916 CHESAPEAKE AVE PO BOX 99	520544956	GOVT	92,335.				PROTECTING NORTH BEA
(6) TOWN OF OYSTER BAY							
54 AUDREY AVE OYSTER BAY, NY 11771	11-6001934	GOVT	43,299.				ONSITE SEPTIC TRAIN
(7) TOWN OF WEST SENECA							
1250 UNION RD WEST SENECA, NY 14224	16-6002404	GOVT	5,389.				BUILDING CAPACITY TO
(8) TRAILBRAZER RC&D AREA							
302 E REYNOLDS DR RUSTON, LA 71270	72-1125217		6,705.				GIANT SALVINIA CONT
(9) TRANSITION HABITAT							
PO BOX 720026 PINON HILLS, CA 92392	74-3146328		45,000.				BLACK MOUNTAIN SIGN
(10) TRI-ISLE RC&DC, INC.							
PO BOX 431 MAKKKAWAO, HI 96768	99-0278397		13,378.				PROMOTING WATERSHED
(11) TRI-ODYSSEY PEO, INC.							
1817 N STEWART ST STE 20	26-4539988		13,026.				WBRP PEO CONTRACTOR
(12) TRIPLE HS, INC							
CAL POLY TECHNOLOGY PARK BLDG 83, MT BISHOP			31,415.				SURVEY PROTOCOL FOR
<ul><li>Enter total number of section 501(c)(3) an</li><li>Enter total number of other organizations</li></ul>			listed in the line 1 t				

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	ΓΙΟΝ					52-1384139		
Part I General Information on Grants and	d Assistanc	е						
1 Does the organization maintain records to si	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and		
the selection criteria used to award the grant							X Yes No	
2 Describe in Part IV the organization's proced								
Part II Grants and Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	vernments. Com	nplete if the organiz	ation answered "Y	es" to Form 990,	
Part IV, line 21, for any recipient the							,	
	Г			T	T	T		
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) TROUT UNLIMITED								
1500 WILSON BLVD STE 310	38-1612715	501(C)(3)	614,227.				ASSESSMENT AND RESTO	
(2) TRUCKEE RIVER COUNCIL								
10418 DONNER PASS RD #B TRUCKEE, CA 96161	91-1818748	501(C)(3)	54,712.				DRY CREEK TRIBUTARY	
(3) TRUST FOR CONSERVATION								
150 POST ST STE 342 SAN FRANCISCO, CA 94108	91-2166435		9,583.				ASSESSMENT OF REGULA	
(4) TU DBA SCHREMS WEST MI TU								
PO BOX 230094 GRAND RAPIDS, MI 49523-0094	52-1766265		5,092.				IMPROVING COLD WATER	
(5) TURKEY CREEK LIVESTOCK								
PO BOX 8 WHITERIVER, AZ 85941	86-0092030		9,288.				WOLF LIVESTOCK DEMON	
_(6) TURKEY CREEK RANGE UNIT								
PO BOX 1085 GC1783 FT. APACHE, AZ 85926	86-0092030		5,144.				WOLF LIVESTOCK DEMON	
_(7) U.S. F&WS - REGION 5								
300 WESTGATE CENTER DR ATTN: CHRISTINE GUIM	53-0201504	GOVT	134,500.				ST. LAWRENCE FEMRF M	
(8) UNCOMPAHGRE/COM, INC.								
PO BOX 2014 MONTROSE, CO 81402-2014	84-1545251	501(C)(3)	10,200.				DOMINQUEZ-ESCALANTE	
(9) UNIV OF NEW HAMPSHIRE								
51 COLLEGE RD DURHAM, NH 03824	02-6000937		24,640.				DESIGNING A RIVER HE	
(10) UNIV OF SOUTH FL								
4202 E FOWLER TAMPA, FL 33620	59-3102112		7,211.				RESTORING FISH AND S	
(11) UNIV OF WISCONSIN								
SS1300 2420 NICOLET DR BURSAR OFFICE	39-1805963		9,773.				COASTAL WETLAND REST	
(12) UNIV OF CA - DAVIS								
1200 DUTTON HALL ONE SHIELDS AVE	94-6036494		5,215.				DETECTING REGULATED	
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		▶		
3 Enter total number of other organizations I	isted in the lir	ne 1 table	<u> </u>		<u> </u>	<u></u>		

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

► Attach to Form 990.

OMB No. 1545-0047

2014

**Open to Public** Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	AL FISH AND WILDLIFE FOUNDATION							
Part I General Information on Grants and	d Assistance	<del>)</del>						
1 Does the organization maintain records to se	ubstantiate the	amount of th	e grants or assistar	nce, the grantees	eligibility for the grant	s or assistance, and		
the selection criteria used to award the grant	s or assistance	e?					X Yes No	
2 Describe in Part IV the organization's proced	dures for moni	itoring the use	of grant funds in the	United States.				
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,	
(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) UNIV OF ALASKA	╛							
3211 PROVIDENCE DR ANCHORAGE, AK 99508	92-6000147		50,000.				ALASKA NATIVE SCIENC	
(2) UNIV OF CALI								
1156 HIGH ST UCSC CASHIER OFFICE	94-1539563		40,142.				DETERMINING THE ORIG	
(3) UNIV OF CALIFORNIA	╛							
9500 GILLMAN DR LA JOLLA, CA 92093	95-6006144		13,045.				WEST COAST OCEAN DAT	
(4) UNIV OF CONNECTICUT	╛							
438 WHITNEY RD EXT UNIT 1133	06-0772160		49,331.				GREAT GULL ISLAND MA	
(5) UNIV OF DELAWARE	╛							
700 PILOTTOWN RD LEWES, DE 19958	51-6000297		31,899.				IMPROVING MANURE API	
(6) UNIV OF GA RESEARCH								
623 BOYD GSRC UNIV OF GA ATHENS, GA 30602	58-1353149		23,515.				RESTORING QUALITY B	
(7) UNIV OF GEORGIA								
240A RIVERBEND RD BOX 5333 ATHENS, GA 30602	58-1353149		32,265.				LIVING SHORELINE - 1	
(8) UNIV OF GUAM								
UOG STATION MANGILAO, 96923	98-0032933		20,756.				TALAKHAYA WATERSHED	
(9) UNIV OF HAWAII	_							
2440 CAMPUS RD BOX 368 HONOLULU, HI 96822	99-6000354		68,352.				EFFECTIVENESS OF WAT	
(10) UNIV OF KENTUCKY RE	_							
C/O NATIONAL CITY BANK SECTION 506	61-6033693		86,435.				RESTORING FOREST WII	
(11) UNIV OF MARYLAND	_							
2020 HORNS POINT RD PO BOX 775	52-6002033		223,714.				BUILDING THE LONG IS	
(12) UNIV OF MONTANA	_							
UNIVERSITY HALL 202 MISSOULA, MT 59812-4104			34,500.				TRANSBOUNDARY GRIZZI	

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

Schedule I (Form 990) (2014)

JSA

### **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.

Internal Revenue Service

Name of the organization

Department of the Treasury

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

OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	TON					52-1384139	<u> </u>
Part I General Information on Grants and	d Assistance	•					
1 Does the organization maintain records to so	ubstantiate the	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the grant	s or assistance	e?					X Yes No
2 Describe in Part IV the organization's proced	dures for mon						
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
(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) UNIV OF NEVADA							
1664 N VIRGINIA ST CONTROLLERS OFFICE/124	88-6000024		275,457.				WALKER BASIN RESEARC
(2) UNIV OF PUERTO RICO							
CALL BOX 9000 MAYAGUEZ, PR 00681	66-0433761		90,640.				INITIAL ASSESSMENT O
(3) UNIV OF RI							
DIV OF RES & ECON 70 LOWER COLLEGE RD	22-3011455		54,089.				BUILDING GREEN INFRA
(4) UNIV OF TENNESSEE							
2621 MORGAN CIRCLE 103 MICHIGAN HALL	62-6001636		52,609.				REFORESTING RECLAIME
(5) UNIV OF VIRGINIA							
1 BOARS HEAD POINTE	54-6001796		66,198.				BIODIVERSITY CONSERV
(6) UNIV OF WISCONSIN							
3203 N DOWNER AVE STE 273	39-1805963		16,087.				REESTABLISHING HEXAG
(7) UNIV OF ARIZONA							
104 BIOLOGICAL SCIENCES EAST	74-2652689		7,226.				MAKING SPACE FOR MON
(8) UPPER KLAMATH LANDOWNERS							
421 COMMERCIAL ST ATTN: ANDREA RABE	47-1066337		18,513.				SUPPORT OF LANDOWNER
(9) UPPER PENINSULA RC&D CNCL							
780 COMMERENCE DR STE C MARQUETTE, MI 49855	38-2581056	501(C)(3)	133,680.				INVASIVE PHRAGMITES
(10) URBAN MATRIX ARCHITECTURE							
136 FORT GREENE PLACE ATTN: SHACHI PANDEY	47-1515862		8,825.				GCEF WEBSITE UPDATES
(11) US ARMY CORPS	_						
109 SAINT JOSEPH ST MOBILE, AL 36602	63-0288896	GOVT	23,000.				ALABAMA BARRIER ISLA
(12) US FISH & WILDLFE SERVICE	_						
1011 E TUDOR RD MS-361 ANCHORAGE, AK 99503		GOVT	66,000.	<u> </u>			MISC. EXPENSES REFUG
2 Enter total number of section 501(c)(3) an							
3 Enter total number of other organizations I	isted in the lin	e 1 table				<u></u>	

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDAT	TION					52-1384139	)
Part I General Information on Grants and	d Assistanc	е				•	
Does the organization maintain records to si	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	ts or assistance, and	
the selection criteria used to award the grant	s or assistand	e?					X Yes No
2 Describe in Part IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part IV, line 21, for any recipient the							es" to Form 990,
(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) US FISH AND WILDLIFE							
300 WESTGATE CENTER DR ATTN: CHRISTINE GUIM	53-0201504	GOVT	48,480.				2015 TRIBUTARY ASSES
(2) USDA FOREST SERVICE							
C/O CITIBANK PO BOX 894183	72-0564834	GOVT	33,580.				IMPACTS OF CLIMATE A
(3) USDA-APHIS-WILDLIFE							
PO BOX 979043 USDA, APHIS, GENERAL	41-0696271	GOVT	30,180.				RAVEN MANAGEMENT FOR
(4) USFWS YREKA FIELD OFFICE							
1829 S OREGON ST YREKA, CA 96097	53-0201504	GOVT	150,000.				FORT GOFF CREEK FISH
<b>(5)</b> USGS							
MS 271 NATIONAL CENTER RESTON, VA 20192	53-0196958	GOVT	293,552.				EVALUATION OF THREAT
(6) USIBWC							
4171 N MESA ST, BLDG C STE 100	74-1109987	GOVT	135,942.				LAGUNA GRANDE RESTOR
(7) UTAH DIVISION OF WILDLIFE							
1594 W N TEMPLE STE 2110	87-6000545	GOVT	81,208.				PRICE-SAN RAFAEL (UT
(8) UTAH STATE UNIVERSITY							
2400 OLD MAIN HILL LOGAN, UT 84322-1400	87-6000528		43,855.				UINTA BASIN HOOKLESS
(9) VA POLYTCHNIC INSTITUTE							
1880 PRATT DR STE 2006 BLACKSBURG, VA 24060	54-6001805		280,314.				CHESAPEAKE METRICS I
(10) VENTANA WILDLIFE SOCIETY							
19045 PORTOLA DR STE F1 SALINAS, CA 93908	94-2795935		5,746.				CONTAMINANTS ANALYSI
(11) VILLAGE OF BRONXVILLE NY							
200 PONDFIELD RD BRONXVILLE, NY 10708	13-6007286	GOVT	45,935.				GREEN GREY INFRASTRU
(12) VILLAGE OF SCARDALE							
1001 POST RD SCARSDALE, NY 10583		GOVT	7,149.				STORMWATER RUNOFF RE
2 Enter total number of section 501(c)(3) an							
3 Enter total number of other organizations I	isted in the lii	ne 1 table				<u></u>	

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Schedule I (Form 990) (2014)

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	T.TON					52-1384139	)
Part I General Information on Grants ar	nd Assistanc	е					
1 Does the organization maintain records to s	substantiate th	ne amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce	dures for mo	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to I					nlote if the organiz	ration answered "V	os" to Form 000
Part IV, line 21, for any recipient	that received	more than \$5	000 Part II can b	ne duplicated if a	additional space is i	.auon answereu - i needed	es to i oiiii 990,
r are rv, into 21, for any rootplene	inat roccivou	more than φe	,ooo. r are ii oarr k	oo aapiioatoa ii t	additional opaco io i	locaca.	
1 (a) Name and address of organization or government	<b>(b)</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) VILLAGE OF TUCKAHOE NY							
65 MAIN ST TUCKAHOE, NY 10707	13-6007336	GOVT	33,128.				VILLAGE OF TUCKAHOE
(2) VIRGINIA DEPT OF HEALTH			33,223				
109 GOVERNOR ST 5TH FLOOR	54-6001775	GOVT	109,968.				ONSITE SEWAGE WAIVER
(3) VISTA UNIFIED SCHOOL			, , , , , , , , , , , , , , , , , , , ,				
1234 ARCADIA VISTA, CA 92084	95-6003492	GOVT	7,300.				SCHOOLYARD HABITAT 1
(4) VT YOUTH CONSERVATION			·				
1949 E MAIN ST RICHMOND, VT 05477	03-0328834		24,296.				GREEN MOUNTAIN NATIO
(5) WALKER RIVER IRRIGATION							
PO BOX 820 YERINGTON, NV 89447	88-6001610	GOVT	38,029.				WATER LEASING DEMONS
(6) WALKER RIVER PAIUTE							
1022 HOSPITAL RD PO BOX 220	88-0139307		360,270.				SIPHON GRADIENT CONT
(7) WALLA WALLA WATERSHED							
WWCC WATER & ENVIR CTR 500 TAUSICK WAY	27-0720412	GOVT	37,854.				WALLA WALLA WATERSHI
(8) WARREN & SCHIFFMACHER							
85 KEYSTONE AVE STE C RENO, NV 89503	86-0847601		20,000.				2015 WATER RIGHTS AN
(9) WASH DEPT OF ECOLOGY							
PO BOX 47600 OLYMPIA, WA 98504	91-6001063	GOVT	8,091.				TRANSACTION PROCESSI
(10) WASHINGTON WATER TRUST							
810 THIRD AVE STE 180 SEATTLE, WA 98104	91-1937417	501(C)(3)	194,601.				CBWTP PROGRAMMATIC E
(11) WATER RESOURCE							
74 LUNT RD STE 300-302 FALMOUTH, ME 04105	01-0531683		89,355,112.				UPPER MANISTEE RIPAR
(12) WATER WORDS THAT WORK							
PO BOX 2182 FALLS CHURCH, VA 22042-2182	80-0738524		25,844.				PROMOTING STORMWATER
2 Enter total number of section 501(c)(3) as							
3 Enter total number of other organizations	listed in the li	ne 1 table				<u></u>	

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Part I General Information on Grants and	Assistance	е				52-1384139	
1 Does the organization maintain records to sub							
the selection criteria used to award the grants	or assistanc	e?					X Yes No
2 Describe in Part IV the organization's procedu	ires for mor	itoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to Do	mestic Or	ganizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered "Y	es" to Form 990,
Part IV, line 21, for any recipient that	at received	more than \$5	,000. Part II can b	e duplicated if a	additional space is i	needed.	
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government	(b) LIIV	if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) WATERLAND MANUFACTURING							
9200 NW 58TH ST DORAL, FL 33178	59-2342539		6,731.				BOAT REHABILITATION
(2) WEST SONOMA COUNTY							
462 JOHNSON ST SEBASTAPOL, CA 95472	38-3912079	GOVT	7,431.				SCHOOLYARD HABITAT
(3) WEST VA UNIVERSITY							
PO BOX 6002 MORGANTOWN, WV 26506	55-0665758		16,078.				CALIFORNIA CONDOR FI
(4) WESTERN ASSOC OF FISH							
C/O LARRY KRUCKENBERG 5400 BISHOP BLVD RM 2	82-0329350	501(C)(3)	75,692.				CONIFER REMOVAL MAPI
(5) WESTERN FOUNDATION							
439 CALLE SAN PABLO CAMARILLO, CA 93012	95-6096078		19,266.				BIRD SPECIMEN PROCES
(6) WESTERN MD RESOURCE							
1260 MARYLAND AVE STE 103	52-1859219		29,292.				METZ-BRAWNER STREAM
(7) WESTERN NEVADA COLLEGE							
2201 W COLLEGE PARKWAY ATTN: ANN LOUHELA	88-6000024		64,351.				WALKER RIVER AGRICUI
(8) WESTERN NEVADA TITLE CO							
2258 RENO HWY STE A FALLON, NV 89406	88-0186671		227,048.				NEVADA NWR LAND AND
(9) WESTERN PA CONSERVANCY							
1478 MILL RUN RD PO BOX R	25-1053485	501(C)(3)	12,234.				NATIVE BROOK TROUT A
(10) WESTERN RIVERS CONSERV							
71 SW OAK ST STE 100 PORTLAND, OR 97204	93-1326405	501(C)(3)	79,121.				BLUE CREEK SALMON SA
(11) WESTWATER RESEARCH							
1104 MAIN ST STE 610 VANCOUVER, WA 98660	81-0544045		52,774.				CBWTP ACCOUNTING FRA
(12) WETLANDS CONSERVANCY							
PO BOX 1195 TUALATIN, OR 97062	93-0797197		32,825.				NYBERG CREEK WETLANI

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUNDA	IONAL FISH AND WILDLIFE FOUNDATION							
Part I General Information on Grants a	nd Assistanc	е				'		
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assistar	nce, the grantees	eligibility for the grant	s or assistance, and		
the selection criteria used to award the grai							X Yes No	
2 Describe in Part IV the organization's proce	edures for mor	nitoring the use	of grant funds in the	United States.			_	
Part II Grants and Other Assistance to Part IV, line 21, for any recipient							es" to Form 990,	
(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) WHATCOM CONSERVATION								
6975 HANNEGAN RD LYNDEN, WA 98264	91-6001220	GOVT	35,935.				WHATCOM CONSERVATION	
(2) WI DNR								
1210 N PALMATORY ST HORICON, WI 53032	39-6006436	GOVT	135,274.				INVASIVE SPECIES CON	
(3) WILD SALMON CENTER								
721 NW 9TH AVE STE 300 PORTLAND, OR 97209	94-3166095	501(C)(3)	8,963.				TILLAMOOK BAY TIDAL	
(4) WILDLANDS RESTORATION								
3012 STERLING CIRCLE STE 201	46-0505155		27,532.				MYRTLE SPURGE ERADIC	
(5) WILDLIFE CONS SOCIETY								
4109 MARYLAND AVE BETHESDAY, MD 20816	13-1740011	501(C)(3)	121,522.				PROTECTING WILD PATH	
(6) WILDLIFE HABITAT COUNCIL								
8737 COLESVILLE RD STE 800	52-1558579	501(C)(3)	14,623.				FIVE STAR PROGRAM SU	
(7) WILDLIFE, FOUNDATION OF								
620 S MERIDIAN ST TALLAHASSEE, FL 32399	59-3277808	501(C)(3)	47,744.				OYSTER REEF HABITAT	
(8) WILDLIFE MANAGEMENT INS								
1146 19TH ST NW STE 700	53-0196629	501(C)(3)	411,609.				ENHANCING HABITAT FO	
(9) WINDMILL DESIGN								
1227 TYLER ST NE STE 180	27-0630081		9,712.				WEBSITE DEVELOPMENT	
(10) WISHTOYO FOUNDATION								
3875-A TELEGRAPH RD STE 423	95-4124859	501(C)(3)	75,000.				MCGRATH LAKE FEASIBI	
(11) WOAPE, INC.								
39140 PROCTOR BLVD SANDY, OR 97055	93-1326167		7,000.				WILDWOOD RECREATION:	
(12) WOLF, RIFKIN, SHAPIRO								
3556 E RUSSELL RD 2ND FLOOR	95-3750453	<u> </u>	listed in the line 1 to				TRANSACTION SUPPORT	

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

Schedule I (Form 990) (2014)

JSA

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Department of the Treasury

Internal Revenue Service

Name of the organization

# **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.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL FISH AND WILDLIFE FOUND	WAL FISH AND WILDLIFE FOUNDATION								
Part I General Information on Grants	and Assistance	)							
1 Does the organization maintain records to	o substantiate the	e amount of the	e grants or assista	nce, the grantees	deligibility for the grant	s or assistance, and			
the selection criteria used to award the g	rants or assistance	e?					X Yes No		
2 Describe in Part IV the organization's pro	cedures for mon	itoring the use	of grant funds in the	e United States.					
Part II Grants and Other Assistance to Part IV, line 21, for any recipier							es" to Form 990,		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
(1) WOOD-PAWCATUCK									
203 ARCADIA RD HOPE VALLEY, RI 02832	22-2504648		100,777.				DEVELOPING A RESILIE		
(2) WORLD WILDLIFE ?FUND									
1250 24TH ST NW WASHINGTON, DC 20037	52-1693387		99,962.				CHAMPIONING CASPIAN		
(3) WRIGHT SCHOOL DISTRICT									
4385 PRICE AVE SANTA ROSA, CA 95407	46-2575140	GOVT	5,595.				SCHOOLYARD HABITAT I		
(4) WYOMING WILDLIFE									
201 WEST PINE ST PINEDALE, WY 82941	83-0336227		54,088.				STUDYING THE IMPACTS		
(5) YERINGTON PAIUTE TRIBAL									
171 CAMPBELL LANE YERINGTON, NV 89447	88-6005135		34,251.				WETLAND RESTORATION		
_(6)									
(8)									
(9)									
(10)									
(11)									
(12)									
\ <u></u> /									
<ul> <li>Enter total number of section 501(c)(3)</li> <li>Enter total number of other organization</li> </ul>	•	•	listed in the line 1 t	able			514.		

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

Schedule I (Form 990) (2014)

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 WOLF LIVESTOCK DEMONSTRATION	7.	80,590.			
2 ACRES FOR AMERICA EVALUAT	1.	83,740.			
3 ADAPTATION TOOLS FOR A CH	1.	9,680.			
4 ADVANCING THE EASTERN BRO	1.	11,732.			
5 AVANSINO CONTRACT	1.	60,000.			
6 COLUMBIA BASIN WATER TRAN	1.	12,020.			
7 CONSERVATION STRATEGIC PL	1.	60,000.			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Schedule I (Form 990) (2014)

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 FISHING OUTREACH AND KIOS	1	F0 C01			
FISHING OUTREACH AND KIUS	1.	58,691.			
2 KLAMATH WATER PAYMENTS 20	1.	14,566.			
3 LAGUNA MOUNTAINS SKIPPER	1.	16,336.			
4 MARINE DEBRIS ACTION COOR	1.	12,784.			
5 NATIONAL ELECTRONIC MONIT	1.	9,000.			
6 PORTLAND HARBOR STEWARDSH	1.	6,300.			
7 prescott marine mammal re	1.	36,684.			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

52-1384139

Schedule I (Form 990) (2014)

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 SAN JOAQUIN RIVER RESTORA	1.	101,950.			
2 SW US HABITAT CONSERVATIO	1.	52,167.			
3 UNUSUAL MORTALITY EVENTS-	1.	5,600.			
4 WATERSHED ACTION PLANNING	1.	11,031.			
5					
6					
7					

**Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

SCHEDULE I, PART I, LINE 2

THE ORGANIZATION REQUIRES THAT GRANT RECIPIENTS SUBMIT REPORTS

PERIODICALLY AND AT THE END OF THE PROJECT. GRANT RECIPIENTS AND

SUB-RECIPIENTS ABOVE A MINIMUM THRESHOLD MUST SUBMIT AUDITED FINANCIAL

STATEMENTS AT THE END OF THE FISCAL YEAR. THE REPORTS SUBMITTED ARE

REVIEWED BY PROGRAM DIRECTORS AND CONSERVATION DIRECTORS. NFWF PERFORMS

AN ANNUAL EVALUATION OF ITS PROGRAMS, WHICH MAY INVOLVE CONDUCTING SITE

VISITS.

Department of the Treasury

Internal Revenue Service Name of the organization

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

NATIONAL FISH AND WILDLIFE FOUNDATION

Employer identification number 52-1384139

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X       Compensation committee       X       Written employment contract         X       Independent compensation consultant       X       Compensation survey or study			
	X       Independent compensation consultant       X       Compensation survey or study         X       Form 990 of other organizations       X       Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
а	organization or a related organization:  Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	and the any of miles has, not the persons and provide the approache amounts to easily non-mile and miles			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			1
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			1
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			1
	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990	
JEFFREY J. TRANDAHL	(i)	441,995.	300,138.	6,800.	211,864.	17,053.	977,850.	95,000.	
1 EXECUTIVE DIRECTOR, CEO	(ii)	0	C	0	0	0	O	0	
ROBERT MENZI	(i)	309,433.	62,370.	12,790.	26,000.	25,835.	436,428.	0	
2 EXEC VP, FINANCE & OPS	(ii)	0	C	0	0	0	0	0	
CLAUDE GASCON	(i)	272,633.	54,846.	8,237.	26,000.	22,306.	384,022.	0	
3 EXEC VP, SCIENCE, EVAL, & PROG	(ii)	0	C	0	0	0	0	0	
TIMOTHY DICINTIO	(i)	272,897.	46,200.	7,385.	86,000.	25,042.	437,524.	0	
4 SENIOR VP, IDEA	(ii)	0	C	0	0	0	0	0	
THOMAS E. KELSCH	(i)	269,625.	45,375.	6,865.	85,000.	23,440.	430,305.	0	
5 SENIOR VP, GEBF	(ii)	0	C	0	0	0	0	0	
LILA HARPER HELMS	(i)	247,500.	49,500.	828.	76,617.	3,953.	378,398.	0	
6 EXEC VP, EXTERNAL AFFAIRS	(ii)	0	C	0	0	0	О	0	
GREGORY KNADLE	(i)	228,495.	37,950.	1,380.	26,000.	10,046.	303,871.	0	
7 VP, GOVERNMENT RELATIONS	(ii)	0	C	0	0	0	О	0	
TOKUNBO FALAYI	(i)	179,833.	23,018.	549.	20,902.	25,666.	249,968.	0	
8 INTERIM EVP, FINANCE&OPS	(ii)	0	С	0	0	0	0	0	
GERRY VANS	(i)	200,000.	24,750.	2,601.	22,475.	3,782.	253,608.	0	
9 VP, COMPLIANCE & RISK MGT	(ii)	0	С	0	0	0	0	0	
DAVID O'NEILL	(i)	185,633.	23,513.	585.	21,351.	24,635.	255,717.	0	
10 <sup>VP,</sup> CONSERVATION PROGRAMS	(ii)	0	С	0	0	0	0	0	
BETH CHRIST SMITH	(i)	175,274.	22,584.	765.	59,509.	26,726.	284,858.	0	
11 <sup>VP,</sup> HUMAN RESOURCES	(ii)	0	C	0	0	0	0	0	
MATTHEW BRAUGHLER	(i)	72,359.	C	125,229.	8,857.	8,352.	214,797.	0	
12DIRECTOR, FDN DEVELOPMENT	(ii)	0	C	0	0	0	0	0	
MICHAEL SHARP	(i)	187,933.	3,000.	540.	16,425.	25,066.	232,964.	0	
13 <sup>DIRECTOR</sup> , GEBF	(ii)	0	C	0	0	0	C	0	
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

Schedule J (Form 990) 2014

#### Part | Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

ADDITIONAL DETAILS SURROUNDING COMPENSATION PRESENTATION

SCHEDULE J, PART II, LINE 1, COLUMN B(II)

THE BREAKDOWN FOR THE EXECUTIVE DIRECTOR/CEO BONUS AND INCENTIVE

COMPENSATION, AS REFLECTED IN SCHEDULE J, PART II, COLUMN B(II) IS AS

FOLLOWS:

\$110,138 REFLECTS THE VARIABLE COMPENSATION BONUS (SEE LATER DISCUSSION

SURROUNDING NFWF'S BONUS COMPENSATION PHILOSOPHY)

\$190,000 REFLECTS THE TWO YEAR RETENTION AND PERFORMANCE BONUSES PAID IN

2014. OF THAT AMOUNT, \$95,000 WAS DISCLOSED IN SCHEDULE J, PART II,

COLUMN C OF THE PRIOR YEAR'S 990, BUT NOT PAID. THIS SAME AMOUNT

(\$95,000) IS ALSO REFLECTED IN THIS 990'S SCHEDULE J, PART II, COLUMN F.

SCHEDULE J, PART II, LINE 1, COLUMN C

THE CONTRIBUTIONS TO THE SERP ARE INCLUDED IN SCHEDULE J, PART II, LINE

- 1, COLUMN C AS PART OF DEFERRED COMPENSATION. THE COMPOSITION OF SCHEDULE
- J, PART II, LINE 1, COLUMN C ARE AS FOLLOWS:
- 1) \$74,514 OF THE TOTAL REPRESENTS THE EMPLOYER CONTRIBUTION TO THE

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

#### Part | Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

403(B) AND 457(F) PLANS, WHICH IS BASED ON THE SAME EMPLOYER CONTRIBUTION FORMULA APPLICABLE TO ALL ELIGIBLE EMPLOYEES.

2) \$137,350 OF THE TOTAL REPRESENTS THE SERP CONTRIBUTION AS EXPLAINED ABOVE IN SCHEDULE J, PART 1, LINE 4B.

RETENTION BONUS

SCHEDULE J, PART II, COLUMN C

IN EFFORT TO ATTRACT AND RETAIN HIGHLY-TALENTED INDIVIDUALS, CERTAIN EMPLOYEES ARE ELIGIBLE FOR A RETENTION BONUS THAT ACCRUES ANNUALLY UNTIL 12/31/2017. THE AMOUNTS ARE INCLUDED IN WHAT THE ORGANIZATION HAS DETERMINED TO BE REASONABLE COMPENSATION FOR THE ORGANIZATION AND REPORTED ON SCHEDULE J, PART II, COLUMN C.

SEVERANCE PAYMENT

SCHEDULE J, PART I, LINE 4A

DURING CALENDER YEAR 2014, MATTHEW BRAUGHLER RECEIVED A SEVERANCE PAYMENT

Schedule J (Form 990) 2014 Page 3

#### Part | Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

IN THE AMOUNT OF \$113,104.23.

DEFERRED COMPENSATION

BONUSES AND SUPPLEMENTAL NONQUALIFIED PLAN

SCHEDULE J, PART I, LINE 4B

THE ORGANIZATION HAS A NON-QUALIFIED SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN (SERP) FOR ITS CEO, JEFF TRANDAHL. THIS CONTRIBUTION IS AN UNVESTED EMPLOYER CONTRIBUTION. SERP INTERESTS ARE FORFEITED BY THE PARTICIPANT IF THE PARTICIPANT VOLUNTARILY TERMINATES EMPLOYMENT PRIOR TO THE VESTING DATES SPECIFIED UNDER THE SERP. SERP INTERESTS ARE HELD IN A TRUST SUBJECT TO THE CLAIMS OF THE FOUNDATION'S BANKRUPTCY CREDITORS. IN THE EVENT OF A FOUNDATION BANKRUPTCY, PARTICIPANTS WOULD BECOME GENERAL UNSECURED CREDITORS OF THE FOUNDATION. THE SERP IS A NONQUALIFIED DEFERRED COMPENSATION PLAN, WHICH MEANS THAT PARTICIPANTS DO NOT RECEIVE THE TAX BENEFITS AVAILABLE TO PARTICIPANTS IN TAX QUALIFIED RETIREMENT PLANS. FOR EXAMPLE, UNDER CURRENT LAW, INTERESTS UNDER THOSE ARRANGEMENTS ARE REPORTABLE AS TAXABLE COMPENSATION WHEN THEY BECOME VESTED, EVEN IF THOSE AMOUNTS ARE NOT YET PAYABLE TO THE PARTICIPANT (AND EVEN IF THOSE

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

#### Part | Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

AMOUNTS ARE NEVER PAID TO THE PARTICIPANT).

THE SERP'S DESIGN WAS REVIEWED AND OPINED UPON AS REASONABLE BY AN INDEPENDENT COMPENSATION CONSULTANT. SERP CONTRIBUTION AMOUNTS WERE DETERMINED BY AN INDEPENDENT ACTUARY. THE SERP WAS APPROVED BY THE COMPENSATION COMMITTEE OF THE FOUNDATION'S BOARD OF DIRECTORS.

#### BONUSES

SCHEDULE J, PART I, LINE 7

BONUSES ARE CONSIDERED IN THE INDEPENDENT COMPENSATION STUDIES AND ARE
USUALLY PAID WITHIN A FIXED RANGE. BONUSES PAID ARE REPORTED IN SCHEDULE
J, PART II, COLUMN B (II). THIS PLAN IS DESIGNED TO RECOGNIZE
PERFORMANCE THAT ATTAINS PREVIOUS YEAR GOALS AND REWARDS PERFORMANCE THAT
SIGNIFICANTLY EXCEEDS STATED GOALS.

40930I 649C NFWF PAGE 104

### **Noncash Contributions**

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

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

NATIONAL FISH AND WILDLIFE FOUNDATION

Employer identification number

52-1384139

Par	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash conti			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	5.	592,375.	FAIR MARK	ET V	ALUE	<u> </u>
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
4.4	Structures							
14	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received							
	which the organization completed F	Form 8283,	Part IV, Donee Acknowledg	ement	29	- 1.		
					1		/es	No
30a	During the year, did the organizat							
	28, that it must hold for at least th					20-		X
	to be used for exempt purposes for		olaing perioa?			30a		
	If "Yes," describe the arrangement in		and policy that receive	a the review of arm	on otomalous			
31	Does the organization have a					31		X
220	contributions?  Does the organization hire or use					31		
<b>32</b> d	contributions?	-		•		32a		Х
h	If "Yes," describe in Part II.					JZa		
33	If the organization did not report ar	amount in	column (c) for a type of pro	perty for which column (a)	) is checked			
	describe in Part II.	. amount in		porty for willow column (a)	, io orioonou,			

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

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

Part II Supplem

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

Schedule M (Form 990) (2014)

NFWF

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Employer identification number

52-1384139

Name of the organization

NATIONAL FISH AND WILDLIFE FOUNDATION

ORGANIZATION'S MISSION

FORM 990, PART III, LINE 1

THE NATIONAL FISH AND WILDLIFE FOUNDATION IS DEDICATED TO SUSTAINING,
RESTORING AND ENHANCING THE NATION'S FISH, WILDLIFE, PLANTS AND HABITATS
FOR CURRENT AND FUTURE GENERATIONS.

NFWF WILL ADVANCE ITS MISSION THROUGH INNOVATIVE PUBLIC AND PRIVATE PARTNERSHIPS, AND BY INVESTING FINANCIAL RESOURCES AND INTELLECTUAL CAPITAL INTO SCIENCE-BASED PROGRAMS DESIGNED TO ADDRESS CONSERVATION PRIORITIES AND ACHIEVE MEASURABLE OUTCOMES.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

OFFICERS AND MANAGEMENT WILL CONDUCT THE REVIEW OF THE FINAL DRAFT 990
BEFORE GIVING APPROVAL TO FILE IT WITH THE IRS. AN ELECTRONIC COPY WILL
BE MADE AVAILABLE TO ALL BOARD OF DIRECTOR MEMBERS BEFORE OFFICERS AND
MANAGEMENT WILL APPROVE FILING. THE REVIEW WILL BE CONDUCTED SOMETIME
AFTER THE ARRIVAL OF THE FINAL DRAFT 990 AND BEFORE FILING WITH THE IRS.
OFFICERS AND MANAGEMENT WILL COMPARE AUDITED FINANCIAL INFORMATION AND
GOVERNANCE DOCUMENTATION WITH NUMBERS AND STATEMENTS USED IN THE 990.

CONFLICT OF INTEREST

FORM 990, PART VI, LINE 12C

PROCESS FOR DETERMINING COMPENSATION

ALL MEMBERS OF THE BOARD OF DIRECTORS AND OFFICERS MUST SIGN AN ANNUAL STATEMENT RELATED TO THE ORGANIZATIONS WRITTEN CONFLICT OF INTEREST POLICY. IF A PERSON DISCUSSES A POTENTIAL CONFLICT OF INTEREST, THE REMAINING DISINTERESTED MEMBERS OF THE GOVERNING BODY WILL DETERMINE IF AN ACTUAL CONFLICT EXISTS. IN THE EVENT OF AN ACTUAL OR PERCEIVED CONFLICT, THE CONFLICTED INDIVIDUAL IS PRECLUDED FROM PARTICIPATING IN ANY DISCUSSIONS OR DECISIONS RELATED TO THE TRANSACTION.

FORM 990, PART VI, LINES 15A & 15B THE FOUNDATION HIRED AN INDEPENDENT COMPENSATION CONSULTANT TO CONDUCT A THOROUGH COMPENSATION STUDY OF THE ORGANIZATION'S OFFICERS AND KEY EMPLOYEES IN 2013. THE REPORT OF THE INDEPENDENT COMPENSATION WAS REVIEWED BY THE FOUNDATION'S HUMAN RESOURCES (HR)/COMPENSATION COMMITTEE.

THE HR/COMPENSATION COMMITTEE IS COMPOSED ENTIRELY OF NON-EMPLOYEE VOLUNTEER DIRECTORS WHO HAVE NO FAMILIAL, BUSINESS, OR SIGNIFICANT PERSONAL RELATIONSHIPS WITH THE FOUNDATION OR ITS EXECUTIVES. THE HR/COMPENSATION COMMITTEE REVIEWS ALL ELEMENTS OF EACH EXECUTIVE'S TOTAL COMPENSATION, INCLUDING BUT NOT LIMITED TO BASE SALARY, BONUSES, PERQUISITES, FRINGE BENEFITS, AND INCENTIVE AND DEFERRED COMPENSATION ARRANGEMENTS. UPON THE EXECUTIVE'S HIRE, AND AT EACH POINT IN TIME THEREAFTER AT WHICH A NEW OR REVISED COMPENSATION ARRANGEMENT IS UNDER CONSIDERATION WITH RESPECT TO THE EXECUTIVE, THE COMMITTEE MEETS WITH ITS INDEPENDENT COMPENSATION CONSULTING FIRM BEFORE THE ARRANGEMENT IS

40930I 649C NFWF **PAGE 108**  IMPLEMENTED TO EVALUATE THE REASONABLENESS OF THE ARRANGEMENT BY

COMPARING BOTH THE ARRANGEMENT ITSELF AND THE EXECUTIVE'S ENTIRE

COMPENSATION PACKAGE TO COMPENSATION PACKAGES PAID BY SIMILARLY SITUATED

ORGANIZATIONS FOR FUNCTIONALLY COMPARABLE POSITIONS.

THE PROCESS DESCRIBED ABOVE WAS USED TO ESTABLISH COMPENSATION FOR OFFICERS AND KEY EMPLOYEES.

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

FORM 990, PART VI, LINE 19

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

#### NOTE REGARDING RELATED ORGANIZATION

WALKER BASIN CONSERVANCY (WBC) WAS INCORPORATED BY THE FOUNDATION IN SEPTEMBER 2014 AS PART OF THE OBJECTIVES OF ITS WALKER BASIN RESTORATION PROGRAM (WBRP) FUNDED BY A FEDERAL COOPERATIVE AGREEMENT BETWEEN THE FOUNDATION AND THE US BUREAU OF RECLAMATION. WBC FULFILLS A REQUIREMENT OF THE ORIGINAL LEGISLATION, PUBLIC LAW 111-85, TO ESTABLISH A LOCAL NONPROFIT TO ACT AS A STEWARD OF THE LAND AND WATER RESOURCES ASSOCIATED WITH THE WBRP. THE PURPOSE OF WBC IS TO PROMOTE THE RESTORATION AND MAINTENANCE OF WALKER LAKE, A NATURAL DESERT TERMINAL LAKE IN THE STATE OF NEVADA, IN A MANNER CONSISTENT WITH PROTECTION OF AGRICULTURAL, ENVIRONMENTAL, AND HABITAT INTERESTS IN THE WALKER RIVER BASIN, THE

NFWF

Name of the organization	Employer identification number
NATIONAL FISH AND WILDLIFE FOUNDATION	52-1384139

RESOURCES OF THE WEST, EAST, AND MAIN WALKER RIVERS.

THERE WAS MINIMAL ACTIVITY FOR WBC IN 2015 AND NO ACTIVITY IN 2014.

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,

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

 ${\tt MN}, {\tt MS}, {\tt NV}, {\tt NH}, {\tt NJ}, {\tt NM}, {\tt NY}, {\tt ND}, {\tt OH}, {\tt OK}, {\tt PA},$ 

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

ATTACHMENT 2

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
1133 15TH STREET LLC P.O. BOX 6142 HICKSVILLE, NY 11802	OFFICE RENT	1,115,744.
PROTIVITI, INC. 12269 COLLECTION CENTER DRIVE CHICAGO, IL 60693	INFO SYSTEM	407,351.
GRANT THORNTON, LLP 33960 TREASURY CENTER CHICAGO, IL 60694	AUDIT	239,159.
CDW 200 N. MILWAUKEE AVE VERNON HILLS, IL 60061	INFO SYSTEM	231,412.
ALTUM 1801 ROBERT FULTON RESTON, VA 20191	INFO SYSTEM	172,167.

Department of the Treasury

Internal Revenue Service

Part I

### **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990.

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

OMB No. 1545-0047
2014
Open to Public Inspection

NATIONAL FIGUAND WILDITER POINDATION 52-139413	Name of the organization	Employer identification number
NATIONAL FISH AND WILDLIFE FOUNDATION	NATIONAL FISH AND WILDLIFE FOUNDATION	52-1384139

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

(a) Name, address, and EIN (if applicable) of disregarded entity		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct co enti	ntrolling
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during t	Complete if the o	organization answ	ered "Yes" on Fo	orm 990, Part IV,	line 34 because	it had	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	g) 512(b)(13) rolled ity?
						Yes	No
(1) WALKER BASIN CONSERVANCY 47-1989228 615 RIVERSIDE DR STE C RENO, NV 89503	CONSERVATION	NV	501(C)(3)	07	NFWF	X	
(2)							
(3)							
(4)							

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

Schedule R (Form 990) 2014

JSA 4E1307 1.000

(5)

(6)

(7)

Schedule R (Form 990) 2014

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

(a)  Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity  entity  Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) (g) Share of total income Share of end-of-year assets		(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		country)		000000000000000000000000000000000000000			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)	_											
(5)	_											
(6)	-											
							-					
<u>(7)</u>	-											

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
								Yes No
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

JSA 4E1308 1.000 Schedule R (Form 990) 2014

3

Schedule R (Fo	rm 990) 2014	Page
Part V	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more re-	elated organizations lis	sted in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х
b	Gift, grant, or capital contribution to related organization(s)				1b	Х	
С	Gift, grant, or capital contribution from related organization(s)				1c		Х
d	Loans or loan guarantees to or for related organization(s)				1d		Х
e	Loans or loan guarantees by related organization(s)				1e		Х
·	Ebanb of loan guarantood by rolated organization(b)						
	Dividends from related erganization(s)				1f		Х
'	Dividends from related organization(s).						X
9	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		
i	Exchange of assets with related organization(s)				1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11		Χ
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		Х
	Sharing of paid employees with related organization(s)				10	х	
•	S. Maring of Paris Compression (Marine States of Garmanan (Marine)						
n	Reimbursement paid to related organization(s) for expenses				1р		Х
P	Reimbursement paid by related organization(s) for expenses					х	21
ч	Relinbursement paid by related organization(s) for expenses				1q		
	Others to section of each common set at a related consected to the				4.		3.7
r	Other transfer of cash or property to related organization(s)				1r		X
	Other transfer of cash or property from related organization(s).		<del> </del>	<u> </u>	1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete the	<del>-</del>		action thre		S.	
	(a) Name of related organization	<b>(b)</b> Transaction	(c) Amount involved	Method	(d)	rminir	a
	Name of related organization	type (a-s)	Amount involved		nt inv		Э

_		,		
	(a)  Name of related organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)	WALKER BASIN CONSERVANCY	В	864,000.	CASH
(2)				
(3)				
(4)				
(5)				
(6)				

JSA 4E1309 1.000

Schedule R (Form 990) 2014

Schedule R (Form 990) 2014

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		e (i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes				Yes	No	(I-01111 1003)	Yes	No	
1)													
2)													
3)													
4)													
5)													
6)													
7)													
8)													
9)													
10)													
11)													
(2)													
(3)													
14)													
15)													
16)													

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Schedule R (Form 990) 2014

Schedule R (Form 990) 2014 Page 5

#### Supplemental Information Part VII

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

4E1510 1.000 40930I 649C NFWF PAGE 115