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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2008

Open to Public
Inspection

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

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AFRICAN WILDLIFE FOUNDATION, INC.		D Employer identification number 52-0781390		
	Doing Business As		E Telephone number 202-939-3333		
	Number and street (or P O. box if mail is not delivered to street address) 1400 16TH STREET, NW		Room/suite 120	F Gross receipts \$ 33,939,268.	
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036-2249		G H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	F Name and address of principal officer: PATRICK BERGIN SAME AS C ABOVE		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list (see instructions)		
J Website: ► WWW.AWF.ORG		K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1961 M State of legal domicile: DC	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WORKS TO ENSURE THE WILDLIFE AND WILD LANDS OF AFRICA WILL ENDURE FOREVER.		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	37
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of employees (Part V, line 2a)	5	45
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total gross unrelated business revenue from Part VII, line 12, column (C) b Net unrelated business taxable income from Form 990-T, line 34	7a	<46,496. >
8 Contributions and grants (Part VIII, line 1h)	395	7b	<46,496. >
9 Program service revenue (Part VIII, line 2g)	APR 30 2010	Prior Year	Current Year
10 Investment income (Part VIII, column (A), lines 3-4, and 7-8)	IRS-OSC	28,016,527.	20,983,749.
11 Other revenue (Part VIII, column (A), lines 5-6d, 8d, 9d, 10c, and 11e)	OGDEN UT	1,025,603.	<743,368. >
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		80,734.	92,645.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		29,122,864.	20,333,026.
14 Benefits paid to or for members (Part IX, column (A), line 4)		1,046,776.	1,406,956.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		7,334,210.	6,780,547.
16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25)	► 1,524,764.		5,311.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		10,040,135.	11,354,433.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		18,421,121.	19,547,247.
19 Revenue less expenses. Subtract line 18 from line 12		10,701,743.	785,779.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	29,625,804.	32,576,070.
	22 Net assets or fund balances. Subtract line 21 from line 20	2,723,394.	6,521,938.
		26,902,410.	26,054,132.

Part II Signature Block

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

Sign
Here

► Signature of officer

 ► Type or print name and title
Jeffrey Christoff, CEO

4/26/2010

Paid Preparer's Use Only	Preparer's signature ►	Date 4/23/10	Check if self- employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► RAFFA, P.C. 1899 L STREET, NW, SUITE 900 WASHINGTON, DC 20036	EIN ►	Phone no. ► (202) 822-5000	

May the IRS discuss this return with the preparer shown above? (see instructions)

832001 12-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Part III Statement of Program Service Accomplishments (see instructions)1 Briefly describe the organization's mission:

**THE AFRICAN WILDLIFE FOUNDATION, TOGETHER WITH THE PEOPLE OF AFRICA,
WORKS TO ENSURE THE WILDLIFE AND WILD LANDS OF AFRICA WILL ENDURE
FOREVER.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 14,174,224. including grants of \$ 1,406,956.) (Revenue \$)
**CONSERVATION PROGRAMS: TO PROTECT THE WILDLIFE AND WILD LANDS OF AFRICA
BY INVOLVING LOCAL PEOPLE IN NATURAL RESOURCE CONSERVATION AND SHARE IN
THE REWARDS. CONSERVATION PROGRAMS ARE SCIENCE BASED AND FOCUS ON
AREAS RICH IN BIODIVERSITY CALLED HEARTLANDS. SUCCESS REQUIRES
BRINGING TOGETHER THE PRIVATE SECTOR, GOVERNMENTS AND LOCAL
COMMUNITIES, AND PROVIDING INCENTIVES FOR LOCAL COMMUNITIES TO TAKE AN
ACTIVE ROLE IN CONSERVATION EFFORTS.**

4b (Code:) (Expenses \$ 1,729,689. including grants of \$ 0.) (Revenue \$)
**PUBLIC EDUCATION: TO EDUCATE THE PUBLIC ABOUT THE IMPORTANCE OF
PROTECTING AFRICA'S WILDLIFE AND WILD LANDS FOR FUTURE GENERATIONS, AND
ENGAGE THE PUBLIC TO TAKE ACTION IN PROTECTING THEM.**

4c (Code:) (Expenses \$ 828,243. including grants of \$ 0.) (Revenue \$)
**MEMBERSHIP PROGRAMS: TO EDUCATE AND DEVELOP A GROUP OF CORE SUPPORTERS
TO HELP AWF ACHIEVE ITS MISSION.**

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 16,732,156. (Must equal Part IX, Line 25, column (B))

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

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

4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?
If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII

13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the U.S.?
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III

17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I

18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J

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 questions 24b-24d and complete Schedule K.
If "No", go to question 25
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part II

26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV

	Yes	No
1	X	
2	X	
3		X
4		X
5	N/A	
6	X	
7		X
8		X
9		X
10	X	
11	X	
12	X	
13		X
14a	X	
14b	X	
15	X	
16	X	
17		X
18		X
19		X
20		X
21	X	
22		X
23	X	
24a		X
24b		
24c		
24d		
25a		X
25b		X
26		X
27		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
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	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	18
1b		1b	0
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
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	45
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X
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 account)?	4a	X
4b	If "Yes," enter the name of the foreign country: ► SEE SCHEDULE O See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	4b	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
5b	If any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Did the organization solicit any contributions that were not tax deductible?	6a	X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).	7d	
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
7d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	N/A
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	9a	X
9b	a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person?	9b	X
10	Section 501(c)(7) organizations. Enter: N/A	10a	
10b	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	
11	Section 501(c)(12) organizations. Enter: N/A	11a	
11b	a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
12b	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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Part VI **Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

	Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions		
1a	37	
1b	36	
2	X	
3	X	
4	X	
5	X	
6	X	
7a	X	
7b	X	
8a	X	
8b	X	
9a	X	
9b	X	
10	X	
11	X	

Section B. Policies

	Yes	No
12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	
13	Does the organization have a written whistleblower policy?	
14	Does the organization have a written document retention and destruction policy?	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	
a	The organization's CEO, Executive Director, or top management official?	
b	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	
16b	X	

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► AK, AL, AR, AZ, CA, CO, CT, DE, FL, GA, HI, IA	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.	
	<input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► THE ORGANIZATION - 202-939-3333	
	1400 16TH ST. NW, SUITE 120, WASHINGTON, DC 20036-2249	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List the organization's **five current highest compensated employees** (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
DENNIS J. KELLER CHAIR	6.00	X	X				0.	0.	0.
SIR KETUMILE MASIRE VICE CHAIR	3.00	X	X				0.	0.	0.
ROBIN BERKELEY TREASURER	3.00	X	X				0.	0.	0.
EDWARD M. ARMFIELD BOARD MEMBER	2.00	X					0.	0.	0.
GREG BEHRMAN BOARD MEMBER	1.00	X					0.	0.	0.
MYMA BELO-OSAGIE BOARD MEMBER	2.00	X					0.	0.	0.
JACQUES J. BUSQUET BOARD MEMBER	1.00	X					0.	0.	0.
PAUL CAMPBELL BOARD MEMBER	1.00	X					0.	0.	0.
STEPHEN D. CASHIN BOARD MEMBER	3.00	X					0.	0.	0.
PAYSON COLEMAN BOARD MEMBER	1.00	X					0.	0.	0.
DONALD DIXON BOARD MEMBER	1.00	X					0.	0.	0.
LYNN DOLNICK BOARD MEMBER	4.00	X					0.	0.	0.
LISA FIRESTONE BOARD MEMBER	2.00	X					0.	0.	0.
PAUL FLETCHER BOARD MEMBER	1.00	X					0.	0.	0.
JAMES L. FOUGHT BOARD MEMBER	2.00	X					0.	0.	0.
CHRISTINE F. HEMRICK BOARD MEMBER	4.00	X					0.	0.	0.
DONALD C. GRAHAM BOARD MEMBER	1.00	X					0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
WILLIAM E. JAMES BOARD MEMBER	2.00	X					0.	0.	0.
ADRIAN M. JAY BOARD MEMBER	1.00	X					0.	0.	0.
WILLIAM S. KALEMA BOARD MEMBER	1.00	X					0.	0.	0.
WALTER KANSTEINER BOARD MEMBER	1.00	X					0.	0.	0.
DOROTHY J. KIM BOARD MEMBER	1.00	X					0.	0.	0.
ROBERT E. KING BOARD MEMBER	4.00	X					0.	0.	0.
SHANA LAURSEN BOARD MEMBER	3.00	X					0.	0.	0.
VICTORIA LESLIE BOARD MEMBER	2.00	X					0.	0.	0.
ANN K. LUSKEY BOARD MEMBER	2.00	X					0.	0.	0.
JAMES F. MAKAWA BOARD MEMBER	1.00	X					0.	0.	0.
1b Total							957,735.	0.	183,929.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 6

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

Yes	No
3	X
4	X
5	X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
COLUMBIA DIRECT MARKETING CORP 111 ANNAPOLIS STREET, ANNAPOLIS, MD 21401	DIRECT MAIL SERVICE	525,879.
PRODUCTION SOLUTIONS, INC., 1953 GALLONS ROAD, SUITE 600, VIENNA, VA 22182	DIRECT MAIL PRODUCTION MGMT.	502,719.
CONSERVATION CAPITAL P.O. BOX 294, NAIROBI, KENYA	BUSINESS CONSULTING	110,187.
SIAMBU ENTERPRISES P.O. BOX 55, MARALAL, KENYA	OFFICE RENOVATION	105,253.
AUTOMATED MAILING, INC. 4407 WHEELER AVENUE, ALEXANDRIA, VA 22304	MAILING AND PRINTING	103,983.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ► 5

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	8582555.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	12401194.			
	g Noncash contributions included in lines 1a-1f \$		385,154.			
	h Total. Add lines 1a-1f			20983749.		
Program Service Revenue		Business Code				
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		142,790.		<46,496.>189,286.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		33,032.		33,032.	
	6 a Gross Rents	(i) Real	(ii) Personal			
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less: cost or other basis and sales expenses	12662851	57,233.			
	c Gain or (loss)	13549009	57,233.			
d Net gain or (loss)	<886158.>		<886,158.>		<886,158.>	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
b Less: direct expenses	b					
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a MAILING LIST RENTAL	900099	48,581.			48,581.	
b OTHER INCOME	900099	11,032.			11,032.	
c						
d All other revenue						
e Total. Add lines 11a-11d		59,613.				
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		20333026.	0.	<46,496.>604,227.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	137,025.	137,025.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	1,269,931.	1,269,931.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	960,110.	598,636.	177,243.	184,231.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,929,448.	3,158,171.	450,115.	321,162.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	329,276.	268,277.	35,484.	25,515.
9 Other employee benefits	1,384,074.	1,109,444.	146,362.	128,268.
10 Payroll taxes	177,639.	138,135.	21,770.	17,734.
11 Fees for services (non-employees):				
a Management	3,531,933.	3,273,418.	50,231.	208,284.
b Legal	77,252.	49,926.	20,667.	6,659.
c Accounting	93,219.		93,219.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	5,311.			5,311.
f Investment management fees	28,271.		28,271.	
g Other				
12 Advertising and promotion	132,368.	47,788.	13,563.	71,017.
13 Office expenses	1,578,481.	1,407,283.	79,220.	91,978.
14 Information technology	332,731.	295,718.	36,556.	457.
15 Royalties				
16 Occupancy	657,285.	362,442.	294,843.	
17 Travel	2,158,779.	2,105,784.	16,712.	36,283.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	154,955.	145,042.	4,351.	5,562.
20 Interest	261,521.	219,337.	39,278.	2,906.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	165,152.	111,309.	51,575.	2,268.
23 Insurance	28,386.	3,422.	24,964.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a UBI TAXES	3,997.		3,997.	
b DIRECT MAILING	859,465.	492,233.		367,232.
c VEHICLE OPERATIONS	547,114.	546,541.	370.	203.
d WORKSHOPS	347,970.	347,088.		882.
e TRAINING	169,677.	165,502.	3,912.	263.
f All other expenses	225,877.	479,704.	<302,376.>	48,549.
25 Total functional expenses. Add lines 1 through 24f	19,547,247.	16,732,156.	1,290,327.	1,524,764.
26 Joint Costs. Check here ► <input checked="" type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1,553,848.	889,920.		663,928.

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,367,614.	1	193,018.
	2 Savings and temporary cash investments	5,261,542.	2	11,668,930.
	3 Pledges and grants receivable, net	9,358,850.	3	9,829,899.
	4 Accounts receivable, net	238,387.	4	157,847.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	148,334.	7	1,124,837.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	501,465.	9	683,118.
	10a Land, buildings, and equipment: cost basis	10a 6,298,905.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 661,671.	10c	5,637,234.
	11 Investments - publicly traded securities	8,204,789.	11	2,121,716.
	12 Investments - other securities. See Part IV, line 11	1,485,008.	12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
Liabilities	15 Other assets. See Part IV, line 11	760,411.	15	1,159,471.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	29,625,804.	16	32,576,070.
	17 Accounts payable and accrued expenses	1,240,901.	17	2,563,966.
	18 Grants payable		18	
	19 Deferred revenue	1,351,446.	19	1,739,237.
Net Assets or Fund Balances	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	1,815,637.
	24 Unsecured notes and loans payable		24	288,798.
	25 Other liabilities. Complete Part X of Schedule D	131,047.	25	114,300.
	26 Total liabilities. Add lines 17 through 25	2,723,394.	26	6,521,938.
	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	12,842,143.	27	13,694,203.
	28 Temporarily restricted net assets	11,787,952.	28	10,087,614.
	29 Permanently restricted net assets	2,272,315.	29	2,272,315.
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	26,902,410.	33	26,054,132.
	34 Total liabilities and net assets/fund balances	29,625,804.	34	32,576,070.

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a <input type="checkbox"/>	X
b Were the organization's financial statements audited by an independent accountant?	2b <input checked="" type="checkbox"/>	
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c <input checked="" type="checkbox"/>	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a <input type="checkbox"/>	X
b If "Yes," did the organization undergo the required audit or audits?	3b <input checked="" type="checkbox"/>	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

Name of the organization

Employer identification number

AFRICAN WILDLIFE FOUNDATION, INC.

52-0781390

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

The organization is not a private foundation because it is: (Please check only one organization)

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). (Attach Schedule H.)

4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____

5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.)

10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)

11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a Type I b Type II c Type III - Functionally integrated d Type III - Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the organizations the organization supports.

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

LHA

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 550.

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	14927671	17255917	18329396	28016527	20983749	99513260.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	14927671	17255917	18329396	28016527	20983749	99513260.
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)						2111010.
6 Public Support. Subtract line 5 from line 4						97402250.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	14927671	17255917	18329396	28016527	20983749	99513260.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	254,876.	386,334.	488,277.	533,807.	270,899.	1934193.
9 Net income from unrelated business activities, whether or not the business is regularly carried on				14,777.		14,777.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	64,766.		365.		11,032.	76,163.
11 Total support. Add lines 7 through 10						101538393
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	95.93	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	97.36	%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2008

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

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number
52-0781390

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		1
2 Aggregate contributions to (during year)		0.
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		78,415.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of certified historic structure
 Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
2a	
2b	
2c	
2d	

a Total number of conservation easements
b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$

8 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)? Yes No

9 In Part XIV, 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____
(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____
b Assets included in Form 990, Part X ► \$ _____

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Schedule D (Form 990) 2008

832051
12-23-08

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

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

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other _____

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

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12778709.				
b Contributions	1,360,424.				
c Investment earnings or losses	<2241114.>				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	522,241.				
g End of year balance	11375778.				

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

a Board designated or quasi-endowment ► 80.02 %
 b Permanent endowment ► 19.98 %
 c Term endowment ► %

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

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		5,045,545.		5,045,545.
b Buildings				
c Leasehold improvements		63,488.	56,261.	7,227.
d Equipment		1,072,041.	605,410.	466,631.
e Other		117,831.		117,831.

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ► 5,637,234.

Schedule D (Form 990) 2008

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		

Part VIII Investments - Program Related See Form 990, Part X, line 12.

Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ►

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

Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)

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

(a) Description of liability	(b) Amount
Federal income taxes	
ANNUITIES PAYABLE	80,279.
CAPITAL LEASE OBLIGATION	34,021.

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

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

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,333,026.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	19,547,247.
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	785,779.
4 Net unrealized gains (losses) on investments	4	<1,634,057. >
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net). Add lines 4-8	9	<1,634,057. >
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<848,278. >

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

1 Total revenue, gains, and other support per audited financial statements	1	19,333,998.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	<1,634,057. >
b Donated services and use of facilities	2b	663,300.
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	<970,757. >
3 Subtract line 2e from line 1	3	20,304,755.
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	28,271.
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	28,271.
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	20,333,026.

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

1 Total expenses and losses per audited financial statements	1	20,182,276.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	663,300.
b Prior year adjustments	2b	
c Losses reported on Form 990, Part IX, line 25	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	663,300.
3 Subtract line 2e from line 1	3	19,518,976.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	28,271.
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	28,271.
5 Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	19,547,247.

Part XIV Supplemental Information

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

PART V, LINE 4: IN THE ABSENCE OF SPECIFIC SPENDING GUIDELINES

ESTABLISHED BY A DONOR, AWF HAS A POLICY TO SPEND FIVE PERCENT OF THESE ENDOWMENT FUNDS' AVERAGE BEGINNING INVESTED MARKET VALUES FOR THE PRIOR THREE FISCAL YEARS. HOWEVER, A FUND'S SPENDING RATE IS REDUCED OR ELIMINATED IF THE RESULTING INVESTED BALANCE OF THAT FUND WOULD FALL BELOW THE FAIR VALUE OF THE ORIGINAL GIFT(S). IN ESTABLISHING THIS POLICY, AWF CONSIDERED ITS STATED RETURN OBJECTIVE WITH THE INTENT TO, OVER THE LONG TERM, ALLOW ITS ENDOWMENT FUNDS TO GROW AT OR ABOVE THAT OF INFLATION.

Part XIV Supplemental Information (continued)

THIS IS CONSISTENT WITH THE ORGANIZATION'S OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT FUNDS' ASSETS HELD IN PERPETUITY OR FOR A SPECIFIED TERM, AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN.

THE BOARD OF TRUSTEES HAS ADOPTED A SPENDING POLICY TO USE OF UP TO SEVEN PERCENT OF THE BEGINNING INVESTED MARKET VALUE OF THE BOARD-DESIGNATED ENDOWMENT IN CURRENT YEAR OPERATIONS, OR A LOWER AMOUNT AS AGREED THROUGH AWF'S ANNUAL BUDGETING PROCESS. THIS SPENDING POLICY TAKES INTO ACCOUNT THE BOARD OF TRUSTEE'S POLICY TO ADD UNRESTRICTED LEGACY GIFTS TO THE BOARD-DESIGNATED ENDOWMENT. THE FUNDS ARE USED TO FURTHER THE IMPACT OF AWF'S CONSERVATION PROGRAMS.

PART X: AWF HAVE ELECTED TO DEFER THE APPLICATION OF INTERPRETATION 48 FOR THE YEAR ENDED JUNE 30, 2009.

Schedule F
(Form 990)**Statement of Activities Outside the United States**

OMB No 1545-0047

2008Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service► Attach to Form 990. Complete if the organization answered "Yes" to
Form 990, Part IV, line 14b, line 15, or line 16.

Name of the organization

Employer identification number

AFRICAN WILDLIFE FOUNDATION, INC.**52-0781390****Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
SUB-SAHARAN AFRICA	10	165	GRANTMAKING		1,269,931.
SUB-SAHARAN AFRICA	10	165	PROGRAM SERVICES	CONSERVATION PROGRAMS, AND PUBLIC EDUCATION AND MEMBERSHIP PROGRAMS	8,346,249.
SUB-SAHARAN AFRICA	10	165	MAINTAINING OFFICES		126,831.
SUB-SAHARAN AFRICA	10	165	EMPLOYEES		4,203,424.
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	1	PROGRAM SERVICES	CONSERVATION PROGRAMS, AND PUBLIC EDUCATION AND MEMBERSHIP PROGRAMS	12,878.
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	1	EMPLOYEES		123,022.
Totals	► 42	662			14,082,335.

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

Schedule F (Form 990) 2008

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Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Use Schedule F-1 (Form 990) if additional space is needed.

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)
		SUB-SAHARAN AFRICA	GIRAFFE CONSERVATION TO ENABLE THE KIJABE LEADERSHIP, MEMBERS AND DEPENDENTS TO CREATE AND MAINTAIN A	18,743	PAYMENT CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	PUBLIC HEALTH EDUCATION AND PREVENTION ACTIVITIES	69,338	PAYMENT CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	CAPACITY BUILDING FOR THE DRC	26,821	PAYMENT CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	LAND PURCHASE	19,873	PAYMENT CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	ENTERPRISE ACTIVITIES AND GENDER	40,000	PAYMENT CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	ENVIRONMENT LANDSCAPE	13,055	PAYMENT CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	AGRICULTURE WORK IN THE MARTINGA-LOPORI-WAMBA LANDSCAPE	107,686	PAYMENT CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA		50,613	PAYMENT CHECK/WIRE	0.		

2 Enter total number of organizations that are recognized as charities by the foreign country 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

SEE PART IV FOR COLUMN (D) DESCRIPTIONS
25

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TUITION ASSISTANCE	SUB-SAHARAN AFRICA	9	91,275	. CHECK OR WIRE	0.		

Part IV Supplemental Information

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

SCHEDULE F, PART I, LINE 2: AWF OCCASIONALLY WORKS WITH SUB-RECIPIENTS.

IN SUCH CASES, ONLY KNOWN, VETTED ORGANIZATIONS ARE CHOSEN THAT CAN

DEMONSTRATE AN ABILITY TO ACCOMPLISH THE PROGRAM OBJECTIVES. GENERALLY,

SUB-RECIPIENTS ARE INCLUDED BY NAME IN GRANT PROPOSALS.

SUB-RECIPIENTS ARE GENERALLY PROVIDED WITH ADVANCES, AND REQUIRED TO
REPORT QUARTERLY. BOTH FINANCIAL AND PROGRAMMATIC REPORTS ARE REQUIRED
TO BE SUBMITTED TO THE RELATED HL IMPLEMENTATION TEAMS (GENERALLY HL
DIRECTOR). THE HEARTLAND FINANCE AND ADMINISTRATION OFFICER REVIEWS
SUB-RECIPIENT FINANCIAL REPORTS AND FORWARD TO THE GRANT FINANCIAL
MANAGER FOR A FURTHER QUALITY CONTROL. ONLY UPON HER REVIEW ARE FURTHER
PAYMENTS OR ADVANCES PROVIDED. GENERALLY, LARGE SUB-RECIPIENTS ARE PAID
THROUGH DC, AND THUS RECEIVE THE ADDED SCRUTINY OF THE CONTROLLER AND/OR
CFO.

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO ENABLE THE KIJABE LEADERSHIP, MEMBERS AND
DEPENDENTS TO CREATE AND MAINTAIN A THRIVING, SUSTAINABLE PROPERTY IN
WHICH PEOPLE, LIVESTOCK, TOURISM AND OTHER COMMERCIAL ENTERPRISES, AND
WILDLIFE HARMONIOUSLY COEXIST, IN AN AREA OF INCREASINGLY OUTSTANDING
NATURAL BEAUTY.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: SUPPORT MIKE/GREVY ZEBRA NATIONAL SENSUS AND
NGULIA RHINO SANTUARY-SUPPORT FOR RANGER HOUSING IN EXTENSION AREA.

REGION: SUB-SAHARAN AFRICA

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Schedule F (Form 990) 2008

Part IV Supplemental Information

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

(D) PURPOSE OF GRANT: INFRASTRUCTURE IMPROVEMENT ON ADC MUTARA RANCH TO
ENABLE WILDLIFE CONSERVATION AND DEVELOPMENT OF ECOTOURISM.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: PARTNERSHIP IN IMPLEMENTATION OF COMMUNITY
ENGAGEMENT IN THE PROPOSED ZIMOZA REGIONAL TRANS-FRONTIER CONSERVATION
AREA (TFCA) FOR IMPROVED LIVELIHOODS.

Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)

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)
	SUB-SAHARAN AFRICA	SUPPORT ENVIRONMENTAL ACTIVITIES		11,300.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	SUPPORT MANYARA RANCH ACTIVITIES		152,740.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	MANAGEMENT OF LOMAKO RESERVE		20,134.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	IMPLEMENTATION OF COMPONENT 3, FPFM GRANT		72,861.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	BIO ENTERPRISE		24,026.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	IMPLEMENTATION OF KITENGELA CONSERVATION PROGRAM		83,867.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	GREVY ZEBRA PROGRAM		10,873.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	SUPPORT FOR AN EDUCATIONAL TOUR OF GRAZING COMMITTEE		7,049.	PAYMENT	0.		
	SUB-SAHARAN AFRICA	REFORESTATION PROGRAMME THIRIKU, KIHUYO AND KIAMARIGA		6,525.	PAYMENT	0.		

Schedule F-1 (Form 990) 2008

Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)

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)
		SUB-SAHARAN AFRICA	SUPPORT MIKE/GREVY ZEBRA NATIONAL SENSSUS AND NGULIA RHINO SANCTUARY-SUPPORT FOR MOVEMENT AND POPULATION DYNAMICS OF GREVY ZEBRA IN LAIKILIA	36,237. PAYMENT	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	CHYULLU WEST CONSERVATION AREA + LIVESTOCK LOSS PROJECT ON CARNIVORE COMMUNITIES IN HUMAN-DOMINATED LANDSCAPES	11,923. PAYMENT	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	INVENTORY OF TOURIST FACILITIES IN THE GREATOR MARA ECOSYSTEM	15,151. PAYMENT	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	KIMANA CBO	9,865. PAYMENT	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	NTR EXP TO CLOSE INFRASTRUCTURE IMPROVEMENT ON ADC MUTARA RANCH TO ENABLE WILDLIFE	21,925. PAYMENT	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	PARTNERSHIP IN IMPLEMENTATION OF COMMUNITY ENGAGEMENT IN THE PROPOSED	45,432. PAYMENT	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA		5,497. PAYMENT	CHECK/WIRE	0.		

Schedule F-1 (Form 990) 2008

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

SCHEDULE I, PART I, LINE 2: AWF OCCASIONALLY WORKS WITH SUB-RECIPIENTS. IN SUCH CASES, ONLY KNOWN, VETTED ORGANIZATIONS ARE CHOSEN THAT CAN DEMONSTRATE AN ABILITY TO ACCOMPLISH THE PROGRAM OBJECTIVES.

BOTH FINANCIAL AND PROGRAMMATIC REPORTS ARE REQUIRED TO BE SUBMITTED TO THE RELATED HL IMPLEMENTATION TEAMS (GENERALLY HL DIRECTOR). THE HEARTLAND FINANCE AND ADMINISTRATION OFFICER REVIEWS SUB-RECIPIENT FINANCIAL REPORTS AND FORWARD TO THE GRANT FINANCIAL MANAGER FOR A FURTHER QUALITY CONTROL.

Part IV **Supplemental Information**

LARGE SUB-RECIPIENTS ARE PAID THROUGH DC, AND THUS RECEIVE THE ADDED SCRUTINY OF THE CONTROLLER AND/OR CFO.

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

OMB No 1545-0047

2008Open to Public
Inspection

Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number
52-0781390**Part I Questions Regarding Compensation**

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

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

Yes

No

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

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

1b

2

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

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

4a

X

4b

X

4c

X

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

a Receive a severance payment or change of control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

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

a The organization?

b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III.

5a

X

5b

X

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

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

6a

X

6b

X

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

7

X

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

8

X

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

Schedule J (Form 990) 2008

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Form 2000 Part VII Page 10

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

Employer Identification number
52-0781390

Part I | Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
BENJAMIN WILLIAM MKAPA BOARD MEMBER	2.00	X					0.	0.	0.
RAZAN K. AL MUBARAK BOARD MEMBER	1.00	X					0.	0.	0.
KRISTINA PERSSON BOARD MEMBER	3.00	X					0.	0.	0.
MAMPHELA A. RAMPHELE BOARD MEMBER	1.00	X					0.	0.	0.
TIA N. RODDY BOARD MEMBER	1.00	X					0.	0.	0.
DAVID THOMSON BOARD MEMBER	4.00	X					0.	0.	0.
C. BOWDOIN TRAIN BOARD MEMBER	1.00	X					0.	0.	0.
JOHN R. WALTER BOARD MEMBER	3.00	X					0.	0.	0.
RICHARD W. WEENING BOARD MEMBER	2.00	X					0.	0.	0.
PATRICK BERGIN CHIEF EXECUTIVE OFFICER	40.00	X	X				226,063.	0.	44,022.
HELEN GICHOHI PRESIDENT	40.00		X				186,782.	0.	29,634.
GREGG MITCHELL V.P. OF MARKETING	40.00		X				153,179.	0.	29,478.
JEFFERY CHRISFIELD CHIEF FINANCIAL OFFICER	40.00		X				142,595.	0.	25,990.
JOANNA ELLIOT VICE PRESIDENT	40.00		X				142,233.	0.	38,201.
CRAIG SHOLLEY SENIOR DIRECTOR	40.00			X			106,883.	0.	16,604.

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

Schedule J-2 (Form 990) 2008

SCHEDULE M
(Form 990)Department of the Treasury
Internal Revenue Service**NonCash Contributions**

OMB No. 1545-0047

2008Open to Public
Inspection

Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number

52-0781390

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	1	385,154	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation 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 by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment			29	

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?
b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a	X	
31	X	
32a	X	

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

Schedule M (Form 990) 2008

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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number
52-0781390

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

CONGO, DEM REP, GHANA, KENYA, MOZAMBIQUE,

SOUTH AFRICA, TANZANIA, UNITED KINGDOM, ZAMBIA,

ZIMBABWE

FORM 990, PART VI, SECTION A, LINE 10: DATA AND INFORMATION FOR THE 990
ARE COMPILED BY THE CONTROLLER AND REVIEWED BY THE CHIEF FINANCIAL OFFICER.
UPON RECEIPT OF THE 990 FORM FROM AWF TAX ACCOUNTANTS, THE COMPLETED RETURN
UNDERGOES A SECOND LEVEL OF REVIEW BY THE CONTROLLER AND THE CFO. CHANGES
ARE COMMUNICATED TO THE TAX ACCOUNTANTS AS NECESSARY AND APPROPRIATE. THE
FINAL DRAFT IS REVIEWED BY THE CFO AND THE CHIEF EXECUTIVE OFFICER BEFORE
BEING PRESENTED TO THE FINANCE COMMITTEE. THEREAFTER, A COPY OF THE RETURN
IS PROVIDED TO THE FULL BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: WHEN A TRUSTEE, OFFICER, AND KEY
EMPLOYEE DETERMINES THAT HE OR SHE MAY HAVE A POTENTIAL CONFLICT OF
INTEREST WITH AWF, SAID INDIVIDUAL IS TO REPORT THE SITUATION CAUSING THE
CONFLICT OF INTEREST TO THE AUDIT COMMITTEE OF AWF, PROVIDING THE MEMBERS
OF THE AUDIT COMMITTEE WITH ANY AND ALL RELEVANT INFORMATION IN WRITING.
THE AUDIT COMMITTEE WILL REVIEW THE FACTS BROUGHT TO ITS ATTENTION,
DETERMINE WHETHER OR NOT A CONFLICT OF INTERESTS EXISTS. THE TRUSTEE,
OFFICER OR KEY EMPLOYEE WILL RECUSE HIM/HERSELF FROM TAKING PART IN THE
BUSINESS DECISION/DELIBERATION AT HAND OR AN ALTERNATIVE BUSINESS
RECOMMENDATION WILL BE RESEARCHED.

DELIBERATIONS OF THE AUDIT COMMITTEE AND OF THE BOARD OF TRUSTEE WILL BE

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

Schedule O (Form 990) 2008

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12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008
Open to Public
Inspection

Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number
52-0781390

DOCUMENTED IN MINUTES WHETHER OR NOT A CONFLICT OF INTEREST IS DETERMINED TO EXIST. THE TRUSTEES, OFFICER, AND KEY EMPLOYEES RECEIVE A COPY OF THE CONFLICT OF INTEREST POLICY ANNUALLY. THEY ARE REQUIRED TO RENEW THEIR PLEDGES TO THE POLICY AND DISCLOSURE STATEMENT. THE ASSISTANT SECRETARY KEEPS SIGNED COPIES OF THE TRUSTEES PLEDGES WHILE THE CONTROLLER KEEPS THOSE OF THE OFFICERS AND KEY EMPLOYEES.

FORM 990, PART VI, SECTION B, LINE 15: THE PROCESS INCLUDES ALL OF THESE ELEMENTS: (1) REVIEW AND APPROVAL BY THE FULL BOARD OF DIRECTORS AND COMPENSATION COMMITTEE; (2) USE OF COMPARABILITY DATA FROM COMPARABLY SIZED ORGANIZATIONS AND OR ORGANIZATIONS WITH SIMILAR TAX EXEMPT PURPOSE; REVIEW OF INDEPENDENTLY PUBLISHED COMPENSATION SURVEYS; AND (3) CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING.

1. REVIEW AND APPROVAL. THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED BY BOTH AWF'S BOARD OF DIRECTORS AND COMPENSATION COMMITTEE. THE INDIVIDUALS WHOSE COMPENSATION ARRANGEMENT IS DISCUSSED ARE NOT ARE NOT INVOLVED IN THE REVIEW AND FULL BOARD DELIBERATIONS.

2. USE OF DATA AS TO COMPARABLE COMPENSATION. THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED USING DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS.

3. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING. THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
832211
12-18-08

Schedule O (Form 990) 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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AK, AL, AR, AZ, CA, CO, CT, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS
MT, NC, ND, NE, NH, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY

FORM 990, PART VI, SECTION C, LINE 19: AWF'S GOVERNING DOCUMENTS,

POLICIES, FINANCIAL STATEMENTS AND FEDERAL FORM 990 ARE AVAILABLE TO THE
PUBLIC UPON REQUEST. ADDITIONALLY, COPIES OF THE 990 AND ANNUAL REPORTS
ARE MAINTAINED ON THE WEBSITE.

FORM 990, PART XI, LINE 2C

THE FOUNDATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN
INDEPENDENT AUDITOR. THERE WERE NO CHANGES IN THESE PROCESSES FROM THE
PRIOR YEAR.

