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DLN: 93493262007011

Form **990**

Department of the Treasury

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

Open to

	Revenue Serv	.0 calendar year, or tax year beginning 01-01-2010 and ending 12-31-201		requirement	Inspection
	ck if applic	C Name of organization		D Employe	er identification number
_	ress chang	FOR AGRICULTURAL DEVELOPMENT		71-060	3560
┌ Nar	ne change	Doing Business As		E Telephor	ne number
_	al return minated	Number and street (or P O box if mail is not delivered to street address) 2101 RIVERFRONT DRIVE	Room/suite	(501)2	80-3000
_ Am	ended retu	LITTLE ROCK, AR 72202		G Gross rec	eipts \$ 100,825,168
J App	lication pe		,		
		F Name and address of principal officer MIKE MYERS	H(a) Is this a	group return for a	affiliates? Yes No
		2101 RIVERFRONT DRIVE LITTLE ROCK, AR 72202	1	affiliates includ	ed?
	k-exempt s	status		p exemption	
			-		
		- WWW WINROCK ORG	<u> </u>		_
		zation 🔽 Corporation 🥅 Trust 🦳 Association 🦳 Other 🕨	L Year of for	mation 1984	M State of legal domicile A
Pa		Summary efly describe the organization's mission or most significant activities			
Activities & Governance	LIN IS I THE DE\	ONOMIC OPPORTUNITY, SUSTAIN NATURAL RESOURCES AND PROTE KING LOCAL INDIVIDUALS AND COMMUNITIES WITH NEW IDEAS AN INCREASING LONG-TERM PRODUCTIVITY, EQUITY AND RESPONSIBL E POOR AND DISADVANTAGED OF THE WORLD AREAS OF FOCUS INC VELOPMENT, EDUCATION AND EMPOWERMENT, NATURAL RESOURCE MOCRACY AND GOVERNANCE, CONFLICT MITIGATION, CAPACITY B	D TECHNOLO E RESOURCE LUDE AGRIC E MANAGEME	GY, AND IN MANAGEMI CULTURAL A NT, ENTERF	I DOING SO, WINROCK ENT THAT BENEFITS AND RURAL PRISE DEVELOPMENT,
25			-6 th 2	T.O./ - F.H	hh-
Œ		eck this box fthe organization discontinued its operations or disposed mber of voting members of the governing body (Part VI, line 1a)	or more than 2	1	t assets
톭		mber of independent voting members of the governing body (Part VI, line 1b)	<u> </u>	1
ă		al number of individuals employed in calendar year 2010 (Part V, line 2a)	•	_	5 22
		al number of volunteers (estimate if necessary)		-	5 83
	7a Tot	al unrelated business revenue from Part VIII, column (C), line 12		7	a
	b Net	unrelated business taxable income from Form 990-T, line 34		7	b -1,69
			Prio	r Year	Current Year
a)		ontributions and grants (Part VIII, line 1h)		66,316,291	
Revenue		rogram service revenue (Part VIII, line 2g)			0 (
Ψ		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		915,696	· · · ·
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), lin	e	3,00	
	1	2)		67,241,056	· · ·
		irants and similar amounts paid (Part IX, column (A), lines 1-3)			17,53:
		enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines!	5_	(
8		0)) - 	27,150,300	33,054,020
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		(
ਡੌ	b To	otal fundraising expenses (Part IX, column (D), line 25) 🕨			
		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		45,948,45	<u> </u>
		otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		73,098,755	, ,
- en	19 R	evenue less expenses Subtract line 18 from line 12	Reginning	-5,857,699 of Current	1
a B B B B B B B B B B B B B B B B B B B				ear	End of Year
Net Assets or Fund Balances	20 T	otal assets (Part X, line 16)		71,731,400	74,142,514
16 PE		otal liabilities (Part X, line 26)		15,930,522	· · ·
		et assets or fund balances Subtract line 21 from line 20		55,800,878	55,882,36
Under	penalties edge and edge.	s of perjury, I declare that I have examined this return, including accompanying s belief, it is true, correct, and complete. Declaration of preparer (other than office ****** Signature of officer	er) is based on a	all informatio	
Here	·	MIKE MYERS CFO Type or print name and title			
		nt/Type parer's name MARY ELLEN Preparer's signature MARY ELLEN		Check if self-	_ PTIN
Paid		parer's name VANGILDER VANGILDER VANGILDER		employed 🕨	
Prepa	arer				Firm's EIN
Use (Only Firm	n's address 11300 CANTRELL ROAD SUITE 301			Phone no ► (501) 227- 5800
		LITTLE ROCK, AR 72212			1

Part	ш	Statement of Program S Check if Schedule O contains a				F
Check if Sch 1 Briefly describe the WINRO CK INTERNATIO THE WORLD TO EMPOW RESOURCES WINRO CK ENERGY, AND LEADERS COMMUNITIES WITH N RESPONSIBLE RESOUR 2 Did the organization the prior Form 990 If "Yes," describe the 3 Did the organization services? If "Yes," describe the 4 Describe the exemy Section 501(c)(3) and allocations to other 4a (Code SEE ABOVE STATEMEN 4b (Code Code C	y describe the organization's mi	ssion				
THE W RESO ENERG COMM	/ORLI URCE GY, A IUNI	INTERNATIONAL IS A NONPR D TO EMPOWER THE DISADVA S WINROCK MATCHES INNOV ND LEADERSHIP DEVELOPME FIES WITH NEW IDEAS AND T BLE RESOURCE MANAGEMEN	ANTAGED, INCREA /ATIVE APPROACI NT WITH THE UNI ECHNOLOGY, WIN	SE ECONOMIC OPPO HES IN AGRICULTUR QUE NEEDS OF ITS P ROCK IS INCREASIN	RTUNITY, AND SUSTAIN E, NATURAL RESOURCES ARTNERS BY LINKING LO G LONG-TERM PRODUCT	I NATURAL MANAGEMENT, CLEAN DCAL INDIVIDUALS AND IVITY, EQUITY, AND
		e organization undertake any si ior Form 990 or 990-EZ?				┌ Yes ┌ No
Ī	If "Ye	s," describe these new services	on Schedule O			
		e organization cease conducting			nducts, any program	┌ Yes ┌ No
1	If "Ye	s," describe these changes on S	chedule O			
:	Section	tibe the exempt purpose achieve on 501(c)(3) and 501(c)(4) orga tions to others, the total expens	anızatıons and secti	on 4947(a)(1) trusts a	re required to report the an	
4a	(Code	e) (Expenses \$	76,737,825	ıncludıng grants of \$	1,726,636) (Revenue \$	80,621,487)
	SEE A	BOVE STATEMENT OF EXEMPT PURPOS	E			
4b	(Code	e) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4c	(Code	e) (Expenses \$		including grants of \$) (Revenue \$)
4d	Othe	er program services (Describe i	n Schedule O)			
			including grants o	f \$) (Revenue \$)
4e	Tota	I program service expenses►\$	76.737.82	5		

Part IV 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
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		No
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? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or 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 1	6		No
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
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, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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	Yes	
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	Yes	
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		Νο
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	•
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 U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
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 U S ? If "Yes," complete Schedule F, Parts III and IV.	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
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	25a		No
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		No
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 II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section $512(b)(13)$?	35		Νο
а	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 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
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		No
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		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2010)

Form 990 (2010)						
Part V	Statements	Regarding	Other IR	S Filings	and	Tax	Compliance

	Check if Schedule O contains a response to any question in this Part V		. 🔽	
			Yes	No
E	nter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 157			
b E	nter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
r D	ıd the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	aming (gambling) winnings to prize winners?	1c	Yes	
Е	nter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	tatements filed for the calendar year ending with or within the year covered by this eturn			
	fat least one is reported on line 2a, did the organization file all required federal employment tax returns?			
וו ע	at least one is reported on line 2a, and the organization me an required lederal employment tax returns?	2b	Yes	
N	ote. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
D	ıd the organization have unrelated business gross income of \$1,000 or more during the			
,	ear [?]	3a		Νo
o If	f "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	t any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	ver, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a	Yes	
,	BG , BR , CB , CM , CH , IV , ES , GG , GH , ID , KZ , KE , KG ,			
	LI , ML , MD , NP , NG , NI , PK , RP , RS , SG , SF , SU , TI , TZ ,			
	F"Yes," enter the name of the foreign country 🕒 TX , VM , UG , AF , CD , CG , IN , HA , PM , RW			
	ee instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	_		
	/as the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
D	ıd any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
: If	f "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_]		
_		5c		R I
	oes the organization have annual gross receipts that are normally greater than \$100,000, and did the rganization solicit any contributions that were not tax deductible?	6a		Νo
	f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	ere not tax deductible?	6b		
0	rganizations that may receive deductible contributions under section 170(c).			
	id the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
	ervices provided to the payor?			
	f "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	ıd the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to le Form 8282?	7c		Νo
	f "Yes," indicate the number of Forms 8282 filed during the year			
	id the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
	ontract?	7e		N o
	id the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
	the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		Νo
	f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	orm 1098-C?	7h		Νo
	ponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	ne supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess usiness holdings at any time during the year?			
		8		
	ponsoring organizations maintaining donor advised funds.			
	id the organization make any taxable distributions under section 4966?	9a		
	id the organization make a distribution to a donor, donor advisor, or related person?	9b		
	ection 501(c)(7) organizations. Enter			
	nitiation fees and capital contributions included on Part VIII, line 12 10a			
	ross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	ection 501(c)(12) organizations. Enter			
	ross income from members or shareholders			
	ross income from other sources (Do not net amounts due or paid to other sources			
	gainst amounts due or received from them)			
		.		
	ection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	f "Yes," enter the amount of tax-exempt interest received or accrued during the ear			
•	ection 501(c)(29) qualified nonprofit health insurance issuers.			
	s the organization licensed to issue qualified health plans in more than one state?			
	ote. See the instructions for additional information the organization must report on Schedule O	13a		
b F	nter the amount of reserves the organization is required to maintain by the states			
	n which the organization is licensed to issue qualified health plans			
: E	nter the amount of reserves on hand			
	13c	.		
	id the organization receive any payments for indoor tanning services during the tax year?	14a		Νο
. т4	F"Vac " has it filed a Form 720 to report these nauments? If "No " provide an explanation in Cahadula O	1/16		

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

1a Enter the number of voting members of the governing body at the end of the tax year 1	Se	ction A. Governing Body and Management			
b Enter the number of voting members included in line 1s, above, who are independent in the property of the pr				Yes	No
b Enter the number of voting members included in line 1s, above, who are independent in the property of the pr					
b Enter the number of voting members included in line 1s, above, who are independent in the property of the pr	1-	Enter the number of voting members of the governing body at the and of the tax			
undependent of the profession	Ia				
2 Ves other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customanily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization deed any significant changes to its governing documents since the prior form 90 was filed? 5 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 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 5 Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7 Did by the following 7 The governing body? 8 Did the organization chemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 Did the organization the with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, 'provide the manes and addresses in Schedule 0 9 Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Desember organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10 Desember or organization have a written policies and procedures governing body before filing the form? 11 Has the organization have a written conflict of interest policy? If "No," go to line 13 12 Dese the organization have a written conflict of interest policy? If "No," go to line 13 13 Desember organization have a written w	b				
3 Un 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? 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? 5 Does the organization have members or stockholders? 6 Does the organization have members of stockholders, or other persons who may elect one or more members of the governing body? 7 Does the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 Each committee with authority to act on behalf of the governing body? 8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Does the organization have local chapters, branches, or affiliates? 10 If Yes, "does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Has the organization have a written written policies and procedures governing body before filing the form? 12 Pes 13 Does the organization have a written written conflict of interest policy? If "No," go to line 13 14 Des the organization have a written with the policy? If "Yes," describe in Schedule O the process, if any, used by the organization to review this Form 990 15 Does the organization have a written whistlehower policy? 16 Does	2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
Supervision of officers, directors or trustees, or key employees to a management company or other person? . 3 4 5 5 5 5 5 5 5 5 5			2	Yes	
field? Does the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? Does the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? The governing body? Between the authority to act on behalf of the governing body? Section B. Politicies (This Section B. Politicies) (This Section B. Politicies) Does the organization have elocal chapters, branches, or affiliates? Does the organization have elocal chapters, branches, or affiliates? Does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? Does the organization have written policies and procedures governing body before filing the form? The Does the organization have a written conflict of interest policy? If "No," goto line 13 Does the organization have a written conflict of interest policy? If "No," goto line 13 Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," does the organization have a written document retention and destruction policy? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," does 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? The organization invest in, contribute assets to, or participate in a joint	3		3		No
6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule 0 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Does the organization have local chapters, branches, or affiliates? 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 11a Has the organization have acopy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," goto line I3 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization have a written whistleblower policy? 13 Yes 14 Does the organization have a written whistleblower 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? 15 Did the organization have a written docu	4		4		No
Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? A rea my decisions of the governing body subject to approval by members, stockholders, or other persons? 7b A rea my decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? Back committee with authority to act on behalf of the governing body? Set act committee with authority to act on behalf of the governing body? Set ach committee with authority to act on behalf of the governing body? Set there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, "provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Personal activation of the process of the organization have include a provided a copy of this Form of provided a copy of this Form 990 to all members of its governing body before filing the form? In a stable organization provided a copy of this Form 990 to all members of its governing body before filing the form? In a possible in Schedule O the process, if any, used by the organization to review this Form 990. In a Does the organization have a written conflict of interest policy? If "No," go to line 13 Does the organization have a written conflict of interest policy? If "No," go to line 13 Does the organization have a written whistleblower policy? Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction of the deliberation and decision? The organization have a w	5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
governing body?	6	Does the organization have members or stockholders?	6		Νo
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b 10 10 10 10 10 10 10 1	7a		7a		No
a The governing body? b Each committee with authority to act on behalf of the governing body? 5 Eaction B. Policies For its there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 5 Section B. Policies For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information about policies not required by the Internal Revenue Code.) For its Section B requests information and procedures governing body before filing the form? For its Section B requests information and procedures governing the activities of such chapters, affinitive and provided a copy of this Form 990 to all members of its governing body before filing the form? For its Section B requests information and procedures governing the activities of such chapters, affinitive in Section B requests for all process, if any, used by the organization of requests that could give rise to conflictes? For its Section B requests in Section B requests in Section B requests for section B requests for a request for section B request for section B request for section B request	b		7b		No
a The governing body?	8				
section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	а		8a	Yes	
section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves	b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Poes the organization have a written conflict of interest policy? If "No," go to line 13 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12b Yes 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 15a Yes b Other officers or key employees of the organization 15a Yes b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 15a Yes 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? 15b Yes	9				No
10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a Yes b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Poes the organization have a written conflict of interest policy? If "No," go to line 13 12b Yes b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Yes c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Yes 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 15a Yes b Other officers or key employees of the organization 15a Yes b Other officers or key employees of the organization 15a Yes 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 Yes	Se				
10a Does the organization have local chapters, branches, or affiliates?	Re	venue Code.)			
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a Yes b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12b Yes c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12b Yes 13 Does the organization have a written whistleblower policy? 14 Yes 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Yes 15b Other officers or key employees of the organization 15a Yes 15b Other officers or key employees of the organization 15a Yes 15b If "Yes," to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Yes 17b Yes 18b Yes 18c Yes				Yes	No
affiliates, and branches to ensure their operations are consistent with those of the organization? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filling the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes 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 12b Yes 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written whistleblower 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 15a Yes 15b Yes 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 Yes	10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b Describe in Schedule O the process, if any, used by the organization to review this Form 990	b		10b		
Does the organization have a written conflict of interest policy? If "No," go to line 13	11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
to conflicts?	12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
describe in Schedule O how this is done	b		12b	Yes	
Does the organization have a written whistleblower policy?	c		12c	Yes	
Does the organization have a written document retention and destruction policy?	13				
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			14	Yes	
a The organization's CEO, Executive Director, or top management official		Did the process for determining compensation of the following persons include a review and approval by			
b Other officers or key employees of the organization	а		15a	Yes	
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?					
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?					
taxable entity during the year?		,			
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?	16a		16a	Yes	
organization's exempt status with respect to such arrangements?	b				
			16b	Yes	
17 List the States with which a copy of this Form 990 is required to be filed ► AR	Se	ction C. Disclosure			
	17	List the States with which a copy of this Form 990 is required to be filed▶AR			

Section 6104 requires an organization to make its Form 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

Own website 🔽 Another's website 🔽 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 See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization MIKE MYERS

2101 RIVERFRONT DRIVE LITTLE ROCK, AR 72202 (501) 280-3000

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees 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 no<u>r any related organization compensated any current officer, director, or trustee</u>

(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) FRANK TUGWELL PRESIDENT AND CEO	40 00	Х		Х				416,518	0	28,573
(2) SANDRA S BATIE BOARD MEMBER	1 00	Х						0	0	0
(3) WILLIAM KETCHAM BOARD MEMBER	1 00	Х						0	0	0
(4) ELIZABETH CAMPBELL VICE CHAIR	1 00	Х		х				0	0	0
(5) BROOKS BROWNE CHAIRMAN	1 00	Х		Х				0	0	0
(6) WILLIAM P FULLER BOARD MEMBER	1 00	Х						0	0	0
(7) NEVA GOODWIN BOARD MEMBER	1 00	Х						0	0	0
(8) DAVID KAISER BOARD MEMBER	1 00	х						0	0	0
(9) PETER O'NEILL BOARD MEMBER	1 00	х						0	0	0
(10) PAUL SAVAGE BOARD MEMBER	1 00	х						0	0	0
(11) TADE AKIN AINA BOARD MEMBER	1 00	Х						0	0	0
(12) JOYCE CACHO BOARD MEMBER	1 00	Х						0	0	0
(13) BRAD WILLIAMS BOARD MEMBER	1 00	Х						0	0	0
(14) PATTY ALLISON CORPORATE SECRETARY	40 00			х				85,473	0	7,174
(15) MIKE MYERS TREASURER AND CFO	40 00			х				174,905	0	30,546
(16) AMY CARRASQUILLO MANAGER, INVESTMENTS/CASH	40 00			х				64,567	0	5,768

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

(A) Name and Title	(B) Average hours		() ition that a			II		(D) Reportable compensation	(E) Reportable compensation	Esti amount	F) mated of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	fror organiz rel	nsation n the ation and ated izations
(17) RONNIE J HUBBARD VICE PRESIDENT, OPERATIONS	40 00			х				223,152	(28,891
(18) MARK TRIBBLE CHIEF OF PARTY	40 00					х		243,721	(52,319
(19) WILLIAM C BELL CHIEF OF PARTY	40 00					х		192,516	(23,901
(20) JOHN PALMUCCI CHIEF OF PARTY	40 00					х		221,945	(30,690
(21) DARRELL DEPPERT CHIEF OF PARTY	40 00					х		214,026	(15,845
(22) PATRICK PERNER CHIEF OF PARTY	40 00					х		208,464	(30,153
1b Sub-Total							<u> </u>				
c Total from continuation sheets						· ·					
							>	2,045,287	0		253,860
Total number of individuals (incl \$100,000 in reportable compen	_				ted a	above)) who	received more tha	n		
3 Did the organization list any for on line 1a? If "Yes," complete Sci	·			-						Yes	No No
4 For any individual listed on line organization and related organiz	ations greater th	nan \$15	0,00	0? I	f "Ye	es," co	mple	te Schedule J for suc	from the	4 Yes	
5 Did any person listed on line 1a										4 res	+

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

services rendered to the organization? If "Yes," complete Schedule J for such person \cdot \cdot \cdot

(A) Name and business address	(B) Description of services	(C) Compensation
ROCKEFELLER FINANCIAL 10 ROCKEFELLER PLAZA NEW YORK, NY 10112	INVESTMENT MANAGEMENT	131,002
2. Total number of independent contractors (including but not limited to those listed above	who received more than	

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 ►1 5

			Revenue	I	/# `	/=:		753
ا جر	1~	Federated campai	ane 4-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
≝								
ੂ ∣	b	Membership dues	1b					
₩	c	Fundraising events	s 1 c					
<u>₹</u>	d	Related organizati	ons 1d					
Ξl	e	Government grants (co	ontributions) 1e	71,993,102				
<u>ळ</u>	f	All other contributions,		8,628,385				
\$	g	similar amounts not in Noncash contributions	included in lines 1a-1f \$					
-	9							
and other similar amounts	h	Total. Add lines 1	a-1f	. ▶	80,621,487			
				Business Code				
[]	2a							
=	b							
<u>.</u>	c							
[d							
<u> </u>	e							
<u> </u>		All other program	service revenue					
ANIA ANIA ANIA ANIA ANIA ANIA ANIA ANIA	•	seller prograill	55. F166 76 Venue					
			a-2f					
			e (ıncludıng dıvıdends, ınteı	rest				1 005 :
		and other similar a	•	•	1,025,128			1,025,128
			ent of tax-exempt bond proceeds	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties	() D. I					
	6~	Grass Panta	(ı) Real	(II) Personal				
		Gross Rents Less rental						
	_	expenses						
	-	Rental income or (loss)						
	d	Net rental income	or(loss)	•				
		_	(ı) Securities	(II) O ther				
		Gross amount from sales of	7,853,517	11,325,036				
		assets other than inventory						
	b	Less cost or	6,581,194	685,019				
		other basis and sales expenses						
	-	Gain or (loss)	1,272,323	10,640,017				
				►	11,912,340			11,912,340
		Gross income from (not including	n fundraising events					
		\$	_					
		of contributions re						
		See Part IV, line 1	.8 a					
	b	Less direct exper						
			s) from fundraising events	►				
			n gaming activities See					
		Part IV , line 19						
		Less direct expenses						
			b					
	С	Net income or (los	s) from gaming activities					
		Gross sales of inv	• •					
		returns and allowa	nces . a					
	b	Less cost of good						
			s) from sales of inventory	►				
 		Miscellaneous F	<u> </u>	Business Code				
	11a							
	 b							
	c							
		All other revenue						
	u	All other revenue						
	_	Total Add bear 4:	1 2 _ 1 1 d					
	e	Total. Add lines 1	la-11d	· •				

	990 (2010)				Page 10			
Par	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 no	ot include amounts reported on lines 6b, b, 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		САРСПЗСЗ	денени ехрепаез	Скрепосо			
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	17,531	17,531					
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	1,036,796	1,036,796					
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	29,993,080	25,595,502	4,397,578				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)							
9	Other employee benefits	2,024,144	2,024,144					
10	Payroll taxes							
а	Fees for services (non-employees) Management							
ь	Legal							
c	Accounting	304,076	113,764	190,312				
d	Lobbying							
e	Professional fundraising services See Part IV, line 17							
f	Investment management fees							
g	Other	3,269,719	2,851,053	418,666				
12	Advertising and promotion							
13	Office expenses	2,275,245	1,967,187	308,058				
14	Information technology							
15	Royalties							
16	Occupancy	2,705,492	2,444,597	260,895				
17	Travel	6,110,806						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	315,817	285,518	30,299				
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	697,566	43,801	653,765				
23	Insurance	230,443	157,041	73,402				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)							
а	SUBCONTRACTS	21,668,102	21,668,102					
b	FELLO WSHIPS	5,538,532	5,538,524	8				
c	PROCUREMENT	4,238,049	4,236,449	1,600				
d	COMMUNICATIONS	894,848	714,050	180,798				
e	SECURITY SERVICES	532,620	495,748	36,872				
f	All other expenses	2,810,125	1,756,573	1,053,552				
25	Total functional expenses. Add lines 1 through 24f	84,662,991	76,737,825	7,925,166	0			
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							

Part X Balance Sheet (A) (B) Beginning of year End of year 6,183,069 4.298.902 1 2.055,275 801.985 2 Savings and temporary cash investments 71,161 181,538 3 8,493,774 4 12,692,237 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 7 8 8 Prepaid expenses and deferred charges 385,930 9 469,176 10a Land, buildings, and equipment cost or other basis Complete 13.055.502 10a Part VI of Schedule D 10b 3.324.992 ь Less accumulated depreciation 10.304.621 10c 9.730.510 11 11 39,752,327 12 41,482,083 12 Investments—other securities See Part IV, line 11 4,482,324 4,482,324 13 13 Investments—program-related See Part IV, line 11 . . 14 14 2,919 15 3,759 15 16 71,731,400 16 74,142,514 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 5,607,463 17 8.627.883 17 Accounts payable and accrued expenses . 18 18 2.133.485 19 3,109,871 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 5.255.000 23 23 5.135.000 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 1,958,188 25 2.363.785 Other liabilities Complete Part X of Schedule D 15,930,522 18,260,153 26 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 46,175,212 47,661,970 Temporarily restricted net assets 9,625,666 8,220,391 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 55,800,878 33 55,882,361 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 71.731.400 74.142.514

Pal	Check if Schedule O contains a response to any question in this Part XI			.┏	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		93,5	558,955
2	Total expenses (must equal Part IX, column (A), line 25)	2			562,991
3	Revenue less expenses Subtract line 2 from line 1	3		8,8	395,964
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		55,8	300,878
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-8,8	314,481
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		55,8	382,361
Pai	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	•
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	ssued			
3a	,	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the readily or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

DLN: 93493262007011

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section

Public Charity Status and Public Support

4947(a)(1) nonexempt charitable trust.

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

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT 71-0603560 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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). 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) 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) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 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 Type I **b** Type II c Type III - Functionally integrated Type III - Other 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) 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 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) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization of (i) list your gove docume	e ion in ted in rning nt?	organizati col (i) of suppor	organization in col (i) of your col (i) the US?		Is the organization in col (i) organized in the US?	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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.)

	under Part III. II tile	e organizacion	Talls to quality	under the tests	iistea below, pi	ease co	ilipiete i	Part III.)		
	ection A. Public Support endar year (or fiscal year beginning	1								
Care	in) -	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	55,073,68	60,985,34	.1 58,945,999	66,316,291	80,621,487		66,316,291 80,621,4		321,942,806
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	55,073,68	88 60,985,34	58,945,999	66,316,291	80	0,621,487	321,942,806		
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)									
6	Public Support. Subtract line 5 from line 4							321,942,806		
S	ection B. Total Support			•						
Cale	endar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	010	(f) Total		
_	beginning in)	55,073,688	60,985,341	58,945,999	66,316,291		,621,487	321,942,806		
7 8	A mounts from line 4 Gross income from interest,	33,013,000	00,303,341	30,543,555	00,510,251		,021,407	321,342,000		
•	dividends, payments received on securities loans, rents, royalties and income from similar sources	1,260,967	1,309,248	788,394	683,233	1	,025,128	5,066,970		
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	8,953	12,693	12,712	9,069			43,427		
11	Total support (Add lines 7 through 10)							327,053,203		
12	Gross receipts from related activiti	ies, etc (See ins	structions)			12				
13	First Five Years If the Form 990 is check this box and stop here	for the organiza	tion's first, secon	d, thırd, fourth, or t	fifth tax year as a	501(c)(3) organız	zation, ▶Г		
	ection C. Computation of Pul									
14	Public Support Percentage for 201	0 (line 6 column	(f) divided by line	e 11 column (f))		14		98 440 %		
15	Public Support Percentage for 200	9 Schedule A , P	art II, line 14			15		98 270 %		
	33 1/3% support test—2010. If the and stop here. The organization que	alıfıes as a publı	cly supported org	anızatıon				► ▼		
17a	33 1/3% support test—2009. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization mecorganization	n qualifies as a permanal of the orm of the control	oublicly supported ganization did not facts and circum id circumstances	d organization check a box on lii stances" test, che " test The organiz	ne 13, 16a, or 16 ck this box and s ation qualifies as	b and lind t op here. a publici	e 14 Explain ly support	▶ □		
ь 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organization Explain in Part IV how the organization Private Foundation If the organization	nization meets t ition meets the '	he "facts and circ 'facts and circum	umstances" test, stances" test The	check this box ar organization qua	id stop h o lifies as	ere. a publicly	• •⊏		
	instructions		= = : / · · · · · · · · · · · · · · · · · ·	, = = =, = = = , = , = 0	,			▶ □		

Schedule A (Form 990 or 990-EZ) 2010 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
Public support percentage from 2009 Schedule A, Part III, line 15			
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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DLN: 93493262007011

OMB No 1545-0047

Supplemental Financial Statements

Department of the Treasury

SCHEDULE D (Form 990)

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

F Attac	ii to roilii 330. F See separate ilistructions.		Inspection	
Name of the organization WINROCK INTERNATIONAL INSTITUTE		Employ	er identification number	
FOR AGRICULTURAL DEVELOPMENT		71-06	03560	
Part I Organizations Maintaining Don organization answered "Yes" to For	or Advised Funds or Other Similar	r Funds or	Accounts. Complete if t	:he
organization answered res to re-	(a) Donor advised funds	(b)	Funds and other accounts	
L Total number at end of year				
Aggregate contributions to (during year)				
Aggregate grants from (during year)				
Aggregate value at end of year				
Did the organization inform all donors and dono funds are the organization's property, subject			d Yes N	lo
Did the organization inform all grantees, donor used only for charitable purposes and not for the conferring impermissible private benefit	•		urpose Yes N	lo
Part II Conservation Easements. Com	plete if the organization answered "Yes	s" to Form 9	990, Part IV, line 7.	
Purpose(s) of conservation easements held by Preservation of land for public use (e g , re Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held easement on the last day of the tax year	ecreation or pleasure) Preservation o	f a certified h	lly importantly land area istoric structure ervation	
,			Held at the End of the Year	
a Total number of conservation easements		2a		
b Total acreage restricted by conservation ease	ments	2b		
c Number of conservation easements on a certif	ied historic structure included in (a)	2c		
d Number of conservation easements included in	n (c) acquired after 8/17/06	2d		
Number of conservation easements modified, t the taxable year ▶	ransferred, released, extinguished, or termin	nated by the o	organization during	
Number of states where property subject to co	nservation easement is located ►			
Does the organization have a written policy requestion enforcement of the conservation easements it		nandling of vi	olations, and Yes N	lo
Staff and volunteer hours devoted to monitorin				_
7 A mount of expenses incurred in monitoring, in:			ne year ► \$	_
Does each conservation easement reported or 170(h)(4)(B)(I) and 170(h)(4)(B)(II)?	ı line 2(d) above satisfy the requirements of	section	┌ Yes ┌ N	lo
In Part XIV, describe how the organization rep balance sheet, and include, if applicable, the to the organization's accounting for conservation	ext of the footnote to the organization's finan			
	ections of Art, Historical Treasure ered "Yes" to Form 990, Part IV, line 8		r Similar Assets.	
If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIV, the text of the footnote to	s held for public exhibition, education or res	earch in furth		
b If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these	ld for public exhibition, education, or research			
(i) Revenues included in Form 990, Part VIII,	line 1		▶ \$	_
(ii) Assets included in Form 990, Part X			► \$	
If the organization received or held works of ar following amounts required to be reported unde		ts for financia	·	_
a Revenues included in Form 990, Part VIII, line	_		► \$	

Assets included in Form 990, Part X

Part	••• Organizations Maintaining Co	llections of Art	, His	torica	<u> Treasu</u>	res, or Oth	er Similar	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne follow	ng that are	e a sıgnıfıcant	use of its coll	ection	ı	
а	Public exhibition		d	┌ Lo	an or excl	nange progran	ns			
b	Scholarly research		e	Γ \circ	ther					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın hov	w they fu	rther the o	rganization's	exemnt nurno	e in		
•	Part XIV	onections and expla	111 1101	v they la	rener the o	rgamzacion s	exempt purpo.	, c III		
5	During the year, did the organization solicity assets to be sold to raise funds rather than			,			ımılar	г	Yes	Г No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar	ements. Comple	ete ıf	the org	janızatıor		"Yes" to Forr			, 110
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					r other asset	s not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table	•					
						_		A mou	nt	
с	Beginning balance					10				
d	Additions during the year					10	1			
е	Distributions during the year					16				
f	Ending balance					1f	·			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?					Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\									
Pa	rt V Endowment Funds. Complete									
		(a)Current Year 4,699,133	(b)Prior Yea 4,113			(d)Three Years B	ack (e)Four Y	ears Back
1a	Beginning of year balance					5,373,177		_		
b	Contributions	69,298			2,700	111,652				
c	Investment earnings or losses	540,815		550	0,636	-1,349,300				
d	Grants or scholarships									
e	Other expenditures for facilities and programs									
f	Administrative expenses	79,836		97	7,866	-21,866				
g	End of year balance	5,229,410		4,699	9,133	4,113,663				
2	Provide the estimated percentage of the year	r end halance held a		<u> </u>						
		100 000 %	a 5							
а	Board designated or quasi-endowment	100 000 70								
Ь	remanent endowment F									
c	Term endowment ► 0 %									
3a	Are there endowment funds not in the posse organization by	ssion of the organiza	ation	that are	held and a	dministered f	or the		Yes	No
	(i) unrelated organizations							3a(i)	Yes	110
	(ii) related organizations						_	Ba(ii)		No
Ь	If "Yes" to 3a(II), are the related organization				R?			3b	İ	i i
4	Describe in Part XIV the intended uses of th	e organization's end	dowm	ent funds	5					
Par	t VI Investments—Land, Building	s, and Equipme	nt. S	ee Fori	n 990, Pa	rt X, line 10).			
	Description of investment				ost or other investment)	(b) Cost or othe basis (other)	er (c) Accumula depreciation		(d) Bo	ok value
1a	Land				1,377,444					1,377,444
Ь	Buildings				7,138,692		1,575	,738		5,562,954
c I	Leasehold improvements				1,821,606		<u> </u>	,478		1,658,128
d I	Equipment				2,096,683		1,397	,608		699,075
	Other				621,077		<u> </u>	,168		432,909
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colur	nn (B)), line 10				+		9,730,510
	•	•					Schedul	e D (F		90) 2010

Part VII Investments-Other Securities. Se	e Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		·
(2)Closely-held equity interests		
(3)0 ther (A) EQUITY SECURITIES & MUTUAL FUNDS	25,683,295	F
(B) LIMITED PARTNERSHIPS	15,355,601	F
(C) OTHER INVESTMENTS	443,187	F
(C) OTHER INVESTMENTS	443,107	<u>'</u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	+ 41,482,083	
Part VIII Investments—Program Related. S		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) REAL ESTATE	4,482,324	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	4,482,324	
Part IX Other Assets. See Form 990, Part X, (a) Desc		(b) Book value
	•	, ,
Total. (Column (b) should equal Form 990, Part X, col.(B) lin		<u> </u>
Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	,	
DEFERRED RENT	2,340,183	
OTHER NONCURRENT LIABILITIES	23,602	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	2 262 705	
Total. (Column (b) should equal Form 990, Falt A, col (b) line 23)	▶ 2,363,785	

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	93,558,955
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	84,662,991
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	8,895,964
4	Net unrealized gains (losses) on investments	4	-8,814,481
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	-8,814,481
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	81,483
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	84,744,474
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	-8,814,481
3	Subtract line 2e from line 1	3	93,558,955
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	93,558,955
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	84,662,991
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
- а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	84,662,991
4	A mounts 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 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	84,662,991
Par	t 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 Also complete this part to provide any additional information

Ident if ier Return Reference | Explanation

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DLN: 93493262007011

OMB No 1545-0047

2010

Open to Public

Inspection

SCHEDULE F (Form 990)

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

► Attach to Form 990. ► See separate instructions.

Statement of Activities Outside the United States

Name of the organization
WINROCK INTERNATIONAL INSTITUT
FOR AGRICULTURAL DEVELOPMENT

Employer identification number

	GRICULTURAL DEVELOPMEN				71-0603560	
Part	General Information "Yes" to Form 990, Par			he United States. C	omplete if the organiz	ation answered
a	For grantmakers. Does the observable of the observable of the grantees' eligible grants or assistance?	organization m gibility for the	naıntaın record grants or assıs	stance, and the select	ion criteria used to awa	ırd
2 F	For grant makers. Describe in Pa Jnited States					·
3 A	Activites per Region (Use Part \	V ıf addıtıonal s	pace is needed j)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
9	SEE ATTACHED STATEMENT			SEE ATTACHED	SEE ATTACHED STATEMENT	
_						
_						
_						
_						
-						
-						
-						
-						
-						
-						
-						
-						
-						
-						
_						
b 1	Sub-total Fotal from continuation sheets		0			C
t	o Part I	I	0			

0

c Totals (add lines 3a and 3b)

Part	Part IV, lı	ne 15, for any					olete if the organizate received more than		
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nun tax-exempt by	hber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	ecognized as chari ovided a section 50:	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	 as . ▶	
3	Enter total nun	nber of other o	organizations or en	tities					(Form 990) 2010

Page **3** 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 Part V if additional space is needed. (c) Number of (d) A mount of (e) Manner of cash (a) Type of grant or (b) Region (g) Description (f) A mount of (h) Method of recipients cash grant disbursement of non-cash valuation assistance non-cash (book, FMV, assistance assistance appraisal, other) 17,531 DEPOSIT INTO BANK PHNOM PENH, 1 0 THE GRANT WAS CAMBODIA ACCOUNT UPON ISSUED TO SELECTION COMMISSION A RESEARCH TEAM TO ASSESS SOCIO-**ECONOMIC FACTORS** AFFECTING AVIAN INFLUENZA PREVENTION IN CAMBODIA AND LAO PDR

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 (see instructions for Form 926)	Γ	Yes	⊽	Νo
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 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
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)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	r	Νo
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)	Г	Yes	্	Νo
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).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information (see inst	ructions) required in Part I, line 2, ar	id any additional
information.		

information.		
Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING		SCHEDULE F, PART I, LINE 2 WINROCK INTERNATIONAL
GRANTS OUTSIDE THE U S		IMPLEMENTS PROJECTS IN APPROXIMATELY 60
		COUNTRIES WORLD-WIDE WINROCK PROJECTS ARE
		FUNDED BY BOTH DOMESTIC AND INTERNATIONAL
		FUNDERS, WITH 94% OF FUNDING PROVIDED BY THE U S
		FEDERAL GOVERNMENT IN 2010 WHEN AWARDED,
		WINROCK ESTABLISHES A PRESENCE IN THE REQUIRED
		AREA AND CARRIES OUT THE SCOPE OF WORK INCLUDED
		WITHIN THE AWARDED PROPOSAL THE THREE MAIN AREAS
		OF WINROCK'S WORK ARE THE AREAS OF ENTERPRISE &
		A GRICULTURE, EMPOWERMENT & CIVIC ENGAGEMENT, AND
		ENVIRONMENT (INCLUDING FORESTRY MANAGEMENT,
		ENERGY, AND ECOSYSTEM SERVICES) IN ADDITION TO
		THE WORK PROVIDED WITHIN THE US, THE PRIMARY
		REGIONS IN WHICH WINROCK WORKS INCLUDE CENTRAL
		ASIA, SOUTH/SOUTHEAST ASIA, AFRICA, AND LATIN
		AMERICA
		Schedule F (Form 990) 2010

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DLN: 93493262007011

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of	t ne organization	
WINROCK	INTERNATIONAL INSTITUTE	
FOR AGRIC	CULTURAL DEVELOPMENT	

Employer identification number

FOR	AGRICULTURAL DEVELOPMENT	[71-0003500						
Pa	Tt I Questions Regarding Compensation	n						
					Yes	Νo		
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III							
	First-class or charter travel	굣	Housing allowance or residence for personal use					
	▼ Travel for companions	Γ	Payments for business use of personal residence					
	▼ Tax idemnification and gross-up payments	\vdash	Health or social club dues or initiation fees					
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)					
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses described.			1b		No		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2	Yes			
_	Todayaha ushada da sana asaha salaha salaha sana asaha		4					
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the		У					
	Compensation committee	l F	Written employment contract					
	Independent compensation consultant		Compensation survey or study					
	Form 990 of other organizations	Į.	Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, For a related organization	Part VII	I, Section A, line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-control	paymer	nt from the organization or a related organization?	4a		Νo		
b	Participate in, or receive payment from, a supplement	ntal non	iqualified retirement plan?	4b		Νo		
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo		
	If "Yes" to any of lines 4a-c, list the persons and pro-	ovide th	ne applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	plete lines 5-9.					
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	, did the organization pay or accrue any					
а	The organization?			5a		Νo		
b	Any related organization?			5b		Νo		
	If "Yes," to line 5a or 5b, describe in Part III							
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a,	, did the organization pay or accrue any					
а	The organization?			6a		Νo		
b	Any related organization?			6b		Νo		
	If "Yes," to line 6a or 6b, describe in Part III							
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7		Νo		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in							
	in Part III	i iveys	Section 33 4330-4(a)(3). It les, describe	8		Νo		
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutt	able presumption procedure described in Regulations	9				

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

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) FRANK TUGWELL	(I) (II)	416,518 0	0 0	0 0	24,500	4,073 0	445,091		
(2) MIKE MYERS	(I)	174,905 0	0	0 0	16,171	14,375 0	205,451		
(3) RONNIE J HUBBARD	(ı)	223,152 0	0	0 0	18,568	10,323 0	252,043		
(4) MARK TRIBBLE	(ı) (ıı)	171,449 0	0	72,272	14,176	38,143 0	296,040		
(5) WILLIAM C BELL	(ı) (ıı)	155,605 0	0	36,911	14,933	8,968 0	216,417		
(6) JOHN PALMUCCI	(ı) (ıı)	167,994 0	0	53,951	1	6,190 0	252,635		
(7) DARRELL DEPPERT	(ı) (ıı)	172,390 0	0	41,636	15,695	150 0	229,871		
(8) PATRICK PERNER	(ı) (ıı)	169,991 0	0	38,473	16,917	13,236 0	238,617		
(9)									
(10)		1	1						
(11)									
(12)		1	· · · · · · · · · · · · · · · · · · ·						
(13)									
(14)	+	+							
(15)	+	+	<u> </u>						
(16)		+			+				

Schedule J (Form 990) 2010

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	PART I, LINE 1A	A HOUSING ALLOWANCE IS PROVIDED TO DIRECTORS OF PROJECTS IN FOREIGN COUNTRIES THIS IS A PROJECT EXPENSE REIMBURSED BY FUNDERS

Schedule J (Form 990) 2010

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

DLN: 93493262007011 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Part I Bond Issues

Name of the organization WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number

71-0603560

_	GIGE BOILG IDDUCE												
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP#	(d) Date Issued	(e) Issue Price	(f) Description of Purpose		(g) Defeased					Pool ncing
								Yes	No	Yes	No	Yes	No
A	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KLV8	06-19-2003	125,000	CONSTRUCTION OF HEADQUARTERS OFFICE			x		x		x
В	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KLW6	06-19-2003	125,000		CONSTRUCTION OF HEADQUARTERS OFFICE		х		х		х
С	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KLX4	06-19-2003	130,000		CONSTRUCTION OF HEADQUARTERS OFFICE		Х		х		Х
D	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KLY2	06-19-2003	135,000		CONSTRUCTION OF HEADQUARTERS OFFICE		х		х		х
_													
Р	Part II Proceeds				Α		В		С		1		
1	A mount of bonds retired												
	A mount of bonds legally defea	sed											
3	Total proceeds of issue												
4	Gross proceeds in reserve fun	ds											
5	Capitalized interest from proce	eeds											
6	Proceeds in refunding escrow												
7	Issuance costs from proceeds	3											
8	Credit enhancement from proc	eeds											
9	Working capital expenditures f	from proceeds											
10	Capital expenditures from prod	ceeds											
11	Other spent proceeds												
12	Other unspent proceeds												
_					+						•		

uno.	cation o	, p. c	cccas	
Part III	Priva	ate	Business	Use

allocation of proceeds?

Year of substantial completion

13

15

16

17

		A		В		c		[)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		х		×		Х
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		×		X

Yes

Were the bonds issued as part of a current refunding issue?

Has the final allocation of proceeds been made?

Were the bonds issued as part of an advance refunding issue?

Does the organization maintain adequate books and records to support the final

No

Χ

Χ

Х

Χ

Yes

No

Χ

Χ

Χ

Χ

Yes

No

Χ

Χ

Х

Χ

Yes

No

Χ

Χ

Χ

Χ

Part III Private Business Use (Continued)

	Filvate business use (continueu)		A		В			С	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х		×		Х		х
b	Are there any research agreements that may result in private business use of bond-financed property?		х		×		Х		х
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		x		х		х		x
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		х		х		х		х

		A		В	}	C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
			^		^		^		^
2	Is the bond issue a variable rate issue?		Х		Х		×		Х
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
			X		X		X		X
b	Name of provider		.1				1		
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х		х		х		х
6	Did the bond issue qualify for an exception to rebate?		Х		х		х		х

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanat ion

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493262007011

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I Bond Issues

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number

71-0603560

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP#	(d) Date Issued	(e) Issue Pr	nc e	(f)	(f) Description of Purpose		(g) Def	eased	Beh	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KLZ9	06-19-2003	145,	000 C	CONSTRUCTION OF HEADQUARTERS OFFICE			X		X		х	
В	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KMA3	06-19-2003	150,			TRUCTION QUARTERS			Х		х		х
c	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KMB1	06-19-2003	155,			TRUCTION QUARTERS			Х		х		х
D	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KMC9	06-19-2003	160,			TRUCTION QUARTERS			Х		х		х
_															
۱.,															
Pā	art III Proceeds				A			В			С		T .	D	
1	A mount of bonds retired								'						
2	A mount of bonds legally defea:	sed													
3	Total proceeds of issue														
4	Gross proceeds in reserve fund	ds													
5	Capitalized interest from proce	eds													
6	Proceeds in refunding escrow														
7	Issuance costs from proceeds														
8	Credit enhancement from proc	eeds													
9	Working capital expenditures f	rom proceeds													
10	Capital expenditures from proc	eeds													
11	Other spent proceeds														
12	Other unspent proceeds														
13	Year of substantial completion														
					Yes	No		Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part			Х			Х			Х			Х		
15	Were the bonds issued as part of an advance refunding issue?					Х			Х			Х			Х

allocation of proceeds? Part IIII Private Business Use

Has the final allocation of proceeds been made?

16

			4	В		С		I	D
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		Х		x		Х
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		×		x

Does the organization maintain adequate books and records to support the final

Х

Х

Х

Χ

Х

Х

Х

Х

Part III Private Business Use (Continued)

	Filvate business use (continueu)		A	В			С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х		×		Х		х
b	Are there any research agreements that may result in private business use of bond-financed property?		х		×		Х		х
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		x		х		х		x
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		х		х		х		х

		A		В	}	C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
			^		^		^		^
2	Is the bond issue a variable rate issue?		Х		Х		×		Х
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
			X		X		X		X
b	Name of provider		.1				1		
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х		х		х		х
6	Did the bond issue qualify for an exception to rebate?		Х		х		х		х

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanat ion

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
 ► Attach to Form 990.
 ► See separate instructions.

OMB No 1545-0047

DLN: 93493262007011

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I Bond Issues

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT Employer identification number

(h) O n

71-0603560

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose		efeased	Beh	on alf of suer		Pool ncing
							Yes	No	Yes	No	Yes	No
A	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KMD7	06-19-2003		CONSTRUCTION OF HEADQUARTERS OFFIC	E	×		X		х
В	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KME5	06-19-2003		CONSTRUCTION OF HEADQUARTERS OFFIC	E	х		х		х
c	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KMF2	06-19-2003		CONSTRUCTION OF HEADQUARTERS OFFIC	E	х		х		х
D	ARKANSAS DEVELOPMENT FINANCE AUTHORITY	71-0503641	04108KMG0	06-19-2003	1,605,000	CONSTRUCTION OF HEADQUARTERS OFFIC	E	х		Х		Х
_												
												,
l Ex	art II Proceeds				Α	В		С		T .	D	
1	A mount of bonds retired				A	В						
	A mount of bonds legally defea:	sed										
	Total proceeds of issue											
4	Gross proceeds in reserve fund	ds										
<u> </u>	Capitalized interest from proce	eeds										
6	Proceeds in refunding escrow											
7	Issuance costs from proceeds	<u> </u>										
8	Credit enhancement from proc	eeds										
9	Working capital expenditures f	from proceeds										
10	Capital expenditures from proc	ceeds										
11	Other spent proceeds											
12	Other unspent proceeds				1							
13	Year of substantial completion	1				I	I			1		

allocation of proceeds?

Part III Private Business Use

14

15

16

			Α		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		Х		x		Х
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		×		X

Yes

Were the bonds issued as part of a current refunding issue?

Has the final allocation of proceeds been made?

Were the bonds issued as part of an advance refunding issue?

Does the organization maintain adequate books and records to support the final

No

Χ

Χ

Х

Χ

Yes

No

Χ

Χ

Χ

Χ

Yes

No

Χ

Χ

Х

Χ

Yes

No

Χ

Χ

Х

Χ

Part III Private Business Use (Continued)

	Filvate business use (continueu)		A	В			С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х		×		Х		х
b	Are there any research agreements that may result in private business use of bond-financed property?		х		×		Х		х
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		x		х		х		x
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		х		х		х		х

		A		В	}	C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
			^		^		^		^
2	Is the bond issue a variable rate issue?		Х		Х		×		Х
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
			X		X		X		X
b	Name of provider		.1				1		
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х		х		х		х
6	Did the bond issue qualify for an exception to rebate?		Х		х		х		х

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanat ion

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493262007011

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

2010

Open to Public Inspection

WINRO	of the organization CK INTERNATIONAL INSTITUTE GRICULTURAL DEVELOPMENT								• •		tion numb	er
Part I	Excess Benefit Trai							organı		only).		
	Complete if the organizat	ion ans	wered "	Yes" on For	m 990, F	Part IV, line 25a	or 25b,	or Form	990-EZ,	Part V , I		
1	(a) Name of disq	ualıfıed	person			(b) Desc	ription	of trans	action		<u> </u>	orrected?
											Yes	No
	nter the amount of tax impos		_			· · · · · · · · · · · · · · · · · · ·		ing the y	/ear unde	r • \$		
	nter the amount of tax, if any									• \$		
			•	·						T		
Part												
	Complete if the organiz	zation a T	nswere	d "Yes" on F T	orm 990), Part IV, line 26 T	, or Fori	m 990-l		, line 38	<u>a</u>	
		(b) L	oan to				(e) i	ſn	(f) Approv	/ o d	(g)Written	
(a) Na	me of interested person and		m the	(c)0 rig		(d)Balance due			by boar		agreeme	
	purpose	organi	zatıon?	principal a	amount	` '	default?		committee?		 	
		То	From				Yes	No	Yes	No	Yes	No
					. .							
Total	Cupata au Assista			ine Teter	▶ \$	Dawasas						
Part I	Grants or Assistar Complete if the organic						/ lına 1	7				
						een interested per						
	(a) Name of interested pers	on	\	-	•	ganization	3011	(c) A n	nount of g	rant or ty	pe of assi:	stance
			1				1					

Part IV Business Transactions Involving Interested Persons
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Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the		(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) PETER O'NEILL	BOARD MEMBER	131,002	SEE BELOW		Νο

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanation
		PETER IS ON THE WINROCK BOARD OF DIRECTORS AND THE ROCK & CO BOARD OF DIRECTORS AS WELL PETER RECEIVED NO DIRECT COMPENSATION FROM PAYMENTS MADE FROM WINROCK TO ROCK & CO FOR CONSULTING PETER'S ACTIVITIES WERE LIMITED TO UNPAID BOARD POSITIONS

Schedule L (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493262007011

OMB No 1545-0047

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT Employer identification number

71-0603560

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		NEVA GOODWIN AND DAVID KAISER, WHO BOTH SERVE AS DIRECTORS, ARE MOTHER AND SON PETER O'NEILL IS A COUSIN TO BOTH NEVA GOODWIN AND DAVID KAISER

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE 990 WAS PRESENTED TO THE AUDIT COMMITTEE BY THE TAX PREPARERS PRIOR TO THE FILING OF THIS TAX RETURN AT THEIR RECOMMENDATION, THE BOARD AND OFFICERS THEN HAD THE OPPORTUNITY TO REVIEW THE ACCURACY AND COMPLETENESS OF THE RETURN BEFORE IT WAS FILED HOWEVER, THE AUTHORITY TO SUGGEST CHANGES TO THE FORM LIES WITH THE AUDIT COMMITTEE

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY THE WINROCK CORPORATE SECRETARY DISTRIBUTES BOTH A COPY OF THE CONFLICT OF INTEREST POLICY AND A SIGNATURE STATEMENT TO ALL MEMBERS OF MANAGEMENT, KEY EMPLOYEES, AND MEMBERS OF THE BOARD OF DIRECTORS THE SIGNATURE STATEMENT REQUIRES THE SIGNER TO SIGN AFTER READING THE CONFLICT OF INTEREST POLICY AND DISCLOSE ANY POSSIBLE CONFLICTS OF INTEREST OR STATING THAT THE EMPLOYEE/BOARD MEMBER HAS NONE IF THERE IS A DISCLOSURE NECESSARY, THEY ARE THEN REVIEWED BY BOTH THE CEO AND THE CHAIRMAN OF THE BOARD TO DETERMINE THEIR SEVERITY

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	A COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS USES COMPENSATION SURVEYS AND OTHER RESOURCES TO DETERMINE THE APPROPRIATE COMPENSATION FOR THE CEO THE DECISION BY THE COMPENSATION COMMITTEE IS THEN APPROVED BY THE FULL BOARD BEFORE BEING FINALIZED THE COMPENSATION COMMITTEE ALSO REVIEWS ANNUALLY THE COMPENSATION OF OFFICERS AND KEY EMPLOYEES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ARTICLES OF INCORPORATION AND BY LAWS ARE MADE PUBLIC THROUGH THE ARKANSAS SECRETARY OF STATE'S OFFICE OR CAN BE DIRECTLY REQUESTED FROM THE CORPORATE SECRETARY THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST TO THE CORPORATE SECRETARY OR HUMAN RESOURCES DIRECTOR THE FINANCIAL STATEMENTS ARE PUBLISHED THROUGH DUNN & BRADSTREET, A FEDERAL AUDIT CLEARINGHOUSE, AND A CONDENSED VERSION OF THE BALANCE SHEET AND INCOME STATEMENT IS AVAILABLE ON THE WINROCK INTERNATIONAL WEBSITE (WWW WINROCK ORG)

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -8,814,481