Form	88	79-	EO
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### **IRS e-file Signature Authorization** for an Exempt Organization

For calendar year 2014, or fiscal year beginning m OCT~1 , 2014, and ending m SEP~30,20 15

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

Department of the Treasury Internal Revenue Service Name of exempt organization Information about Form 8879-EO and its instructions is at <u>www.irs.gov/form8879eo</u>
 Employer identification number

OMB No. 1545-1878

2014

53-0183181

Defenders of Wildlife

Name and title of officer Jamie Rappaport Clark President & CEO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here <b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12)	1b	30,657,331.
2a	Form 990-EZ check here <b>b</b> Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here <b>b</b> Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here <b>b</b> Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

#### Declaration and Signature Authorization of Officer Part II

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

### Officer's PIN: check one box only

X   authorize Rogers & Company PLLC	to enter my PIN 71399
ERO firm name	Enter five numbers, but do not enter all zeros
as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within t is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also au enter my PIN on the return's disclosure consent screen.	
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charprogram, I will enter my PIN on the return's disclosure consent screen.	
Officer's signature Date	10/16
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN. do not enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the confirm that I am submitting this return in accordance with the requirements of <b>Pub. 4163</b> , Modernized e-File (MeF <i>e-file</i> Providers for Business Returns.	
ERO's signature Date Date 02/	04/16

**ERO** Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So

				** PUBL	IC DI	SCLOSUR	E C	OPY **			
_	Q	90	Return o								OMB No. 1545-0047
For	m 🛡	50	<ul> <li>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)</li> <li>Do not enter social security numbers on this form as it may be made public.</li> </ul>								
		of the Treasury nue Service			-			-	nade public. s. <i>gov/form990</i>		Open to Public Inspection
A	For the	e 2014 calend	lar year, or tax year be		CT 1,	2014			EP 30,	2015	
B	Check if applicabl	C Name o	f organization						D Employer	identifica	ation number
, 											
	Addre chang		enders of Wi	ldlife						F 2 01	0 2 1 0 1
Name change       Doing business as       53-0183181         Initial return       Number and street (or P.0. box if mail is not delivered to street address)       Room/suite       E							83181				
	return  Final	1130	17th Stree		livered to str	reet address)		Room/suite	E Telephone		82-9400
	Lreturn termin ated	)-	own, state or province,		ZIP or fore	eign postal co	de		G Gross receipt		36,430,715
	Amen		ington, DC	20036		ngir pootal oo	uo		H(a) Is this a		
	Applic tion	<sup>ca-</sup> <b>F</b> Name a	nd address of principal	officer:Jam	ie Raj	ppaport	C1	ark		ordinates?	
	pendi	same	as C above						H(b) Are all sub	ordinates incl	uded? Yes No
		empt status:			<ul> <li>(insert)</li> </ul>	no.) 🛄 494	7(a)(1)	or 🛄 527	lf "No,"	attach a lis	st. (see instructions)
			defenders.o:			014			H(c) Group e		
	orm of art I			Trust 🛄 As	sociation	Other ►		L Year	of formation: 1	94/ M	State of legal domicile: DO
			be the organization's m	ission or most	significant	t activities. H	abi	tat an	d speci	es pr	otection.
nce	<b>'</b>	Dheny descrit		1551011 01 111051	signincan		.uo ±	cuc un	u ppeer	<u> </u>	000001011
Activities & Governance	2	Check this bo	ox 🕨 🛄 if the organ	nization disco	ntinued its	operations or	r dispo	sed of more	than 25% of i	ts net ass	ets.
ove			ting members of the go								28
ي م			dependent voting mem								20
ies			of individuals employed			(Part V, line 2a	a)				15
tivit			of volunteers (estimate	• ·							28 9,999
Ac			d business revenue fro								-10,723
	d	Net unrelated	business taxable incor	ne from Form	990-1, line				Prior Yea		Current Year
đ	8	Contributions	and grants (Part VIII, li	ne 1h)					29,385,		29,358,805
nue			ice revenue (Part VIII, li							751.	20,000
Revenue	10	Investment in	come (Part VIII, column	n (A), lines 3, 4	, and 7d)				211,		626,581
ш	11	Other revenue	e (Part VIII, column (A),	lines 5, 6d, 8c	, 9c, 10c, a	and 11e)			579,		651,945
			- add lines 8 through 1				e 12)		30,239,		30,657,331
			milar amounts paid (Pa			3)			784,	292.	817,739 0
	I		to or for members (Par	, , , ,	,, ,	lump (A) lipos	5 10)		11,786,		12,322,538
Ises	15 16a		r compensation, emplo undraising fees (Part IX				5-10)		1,876,		1,733,644
Expenses	b		ing expenses (Part IX, o			• 97	6,4	86.	, ,		, , .
ш	17		es (Part IX, column (A),				-		15,240,		15,524,533
			es. Add lines 13-17 (mu						29,686,		30,398,454
	19	Revenue less	expenses. Subtract line	e 18 from line	12				553,		258,877
Fund Balances									ginning of Curre	ent Year	End of Year
\sset Bala	20								37,216, 10,895,		35,612,023 9,959,455
let ∕	21		s (Part X, line 26) fund balances. Subtrad	at line 01 from					$\frac{10,895}{26,321}$		25,652,568
P	art II	Signatur		ct line 21 from	1 IIne 20				20,521,	<u>++0•</u>	25,052,500
		-	I declare that I have exami	ined this return,	including a	ccompanying s	chedule	s and statem	ents, and to the	best of my l	knowledge and belief, it is
			. Declaration of preparer (		-					-	- /
			ELECTRONICAL	LY- SEE A	TTACHE	D FORM 8	<u> 879-</u>	EO		/10/1	.6
Sig	n	, s	e of officer						Date		
Hei	re		e Rappaport	Clark,	Pres	ident &	CE	0			
		Print/Type pre	parer's name	_	Preparer's	signature			Date	Check	PTIN

	Print/Type preparer's name	Preparer s signature					
Paid	Lori A. Collingsworth	FILED ELECTRONICALLY	02/04/16 self-employed P00639819				
Preparer	Firm's name 🕨 Rogers & Company		Firm's EIN <b>58-2676261</b>				
Use Only	Firm's address 8300 Boone Boule	evard, Suite 600					
	Vienna, VA 22182		Phone no. (703) 893-0300				
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)						

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	Defenders of Wildlife 53-01831	81 ı	-age <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	Defenders of Wildlife is a national, nonprofit membership organiz		
	dedicated to the protection of all native animals and plants in a natural communities. See Schedule O for continuation of mission	cnei	r
	inactural communities. See Schedule o for continuation of mission	•	
2	Did the organization undertake any significant program services during the year which were not listed on		
2		Yes 🖸	XNo
	If "Yes," describe these new services on Schedule O.		
3		Yes 🖸	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	enses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	nses, an	d
	revenue, if any, for each program service reported.		
4a	(Code: ) (Expenses \$ 7,798,462. including grants of \$ 324,389. ) (Revenue \$		<b>00.</b> )
	Endangered Species Act (ESA): 10-year benchmark - More than half	of '	the
	species presently listed under the ESA are stable or improving.		
4b	(Code:) (Expenses \$ 11,149,157. including grants of \$ 209,569. ) (Revenue \$		00.)
	Key Species - 10-year benchmark - 25 vulnerable species are secu:	re i	n
	important ecosystems and focal landscapes.		
4c	(Code: ) (Expenses \$ 6,860,142. including grants of \$ 283,781. ) (Revenue \$		00.)
	Habitat - 10-year benchmark - Double the acreage of high priority	Y	
	wildlife habitat managed for ecological integrity.		
	-		
4d	Other program services (Describe in Schedule O.)		
14	(Expenses \$ including grants of \$ ) (Revenue \$ )		
4e	Total program service expenses > 25,807,761.		
		orm <b>990</b>	<b>)</b> (2014)

 Form 990 (2014)
 Defenders of Wildlife

 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		
•	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a	Δ	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		x
•	assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		
с	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	L
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		v	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u> </u>
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	 		<u> </u>
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2014)

 Form 990 (2014)
 Defenders
 of
 Wildlife

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		37	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	00	х	
242	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	-23	
<b>24</b> d	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schodula K If "No" as to line 250	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		x
00	of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		
28	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		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24	х	
250	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	-77	x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	358		- 23
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		L	
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2014)

Form	990 (2014) Defenders of Wildlife	53-0183	181	Р	age <b>5</b>
Pa					uge -
	Check if Schedule O contains a response or note to any line in this Part V				
	· · · · · · · · · · · · · · · · · · ·	·····		Yes	No
19	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 95		103	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and re		-		
U	(gambling) winnings to prize winners?		1c	x	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Za		2a 155			
h	filed for the calendar year ending with or within the year covered by this return		2b	x	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax return Note: If the sum of lines 1a and 2a is greater than 250, you may be required to a <i>file</i> (as instructional)		20	- 11	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		3a	x	
		<u></u>	3b	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule (		30		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	•	4-		x
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		
a	If "Yes," enter the name of the foreign country:				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad		_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X X
			5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th				v
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	-			
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		_	v	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for \$75 made partly as a contribution and \$75 made partly as a contributi		7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required			37
	to file Form 8282?	·····	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	I			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	_		
b		10b			
11	Section 501(c)(12) organizations. Enter:	I			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	•	13b			
с	Enter the amount of reserves on hand	13c			
			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b		

1 UIIII <b>33U</b> (2014)	Form 9	<b>90</b> (	2014)
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### Defenders of Wildlife

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 28			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			37
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		37	
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
10-	Did the eventiantian have lead charters branches as officiates?	10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b		
110	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Па		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
Ũ	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
	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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed K, AL, AR, CA, CO, CT, DC, FL, GA	,HI	,IL	,KS
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website 🛛 Upon request Other ( <i>explain in Schedule O</i> )			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	The Organization - 202-682-9400			
	1130 17th Street, NW, Washington, DC 20036		000	(00 + 1)
432006	See Schedule O for full list of states	Form	390	(2014)

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

Check if Schedule O contains a response or note to any line in this Part VI

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

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

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

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

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

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

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

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

(A)	(B) (C)							(D)	(F)			
Name and Title	Average	(da		Pos	ition			Reportable	<b>(E)</b> Reportable	Estimated		
	hours per	box	not c , unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of		
	week		cer an	dad	irecto	or/trus	tee)	from	from related	other		
	(list any	ector						the	organizations	compensation		
	hours for	or dir	e			ated		organization	(W-2/1099-MISC)	from the		
	related	istee	truste		e	pens		(W-2/1099-MISC)		organization		
	organizations below	Jal tri	onal		ploye	ee com				and related		
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) Jamie Rappaport Clark	39.50	드	느	ò	¥	тə	R.					
President & CEO		x		х				376,698.	4,938.	34,887.		
(2) Winsome McIntosh	10.00											
Chair	0.20	Х		х				0.	0.	0.		
(3) Susan Wallace	10.00											
Vice Chair	0.00	Х		Х				0.	0.	0.		
(4) Mark Caylor	10.00											
Treasurer	0.00	Х		Х				0.	0.	0.		
(5) Caroline Gabel	10.00	37		37				0.	0	0		
Secretary	0.20 2.00	Х		Х				0.	0.	0.		
(6) Dinah Bear	0.00	x						0.	0.	0.		
Director (7) Cassie Carroll	2.00	^						0.	0.	0.		
Director	0.00	x						0.	0.	0.		
(8) Eric Glitzenstein	2.00								Ŭ.			
Director		x						0.	0.	0.		
(9) James Hecker	2.00											
Director	0.00	х						0.	0.	0.		
(10) Mari Snyder Johnson	2.00											
Director	0.00	Х						0.	0.	0.		
(11) Ruth Musgrave	2.00											
Director	0.00	Х						0.	0.	0.		
(12) Judith Posnikoff	2.00											
Director	0.00	X						0.	0.	0.		
(13) Ronald Pulliam	2.00									0		
Director	0.00	X						0.	0.	0.		
(14) Joel Sartore	2.00							0		0		
Director	0.00	Х						0.	0.	0.		
(15) Laura Turner Seydel	2.00	x						0.	0.	0		
Director	2.00	A						0.	0.	0.		
(16) Loretta Stadler Director	0.00	v						0.	0.	0.		
(17) Lisa Wan	2.00	^						0.	0.	0.		
Director	0.00	x						0.	0.	0.		
			1						•			

432007 11-07-14

Form 990 (2014)

	Form	990	(2014)
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)	(C)						(D)	(E)			(F)	
Name and title	Average	(do		Pos		<b>ا</b> than o	one	Reportable	Reportable		Es	timate	ed
	hours per	box	, unles	ss pe	rson	is bot	h an	compensation	compensation	n	an	nount	of
	week		cer an	aaa	recto	or/trus	tee)	from	from related			other	
	(list any hours for	recto						the	organizations			pensa	
	related	or di	ee			sated		organization	(W-2/1099-MIS	C)		om the	
	organizations	'ustee	trust		88	npen		(W-2/1099-MISC)			•	anizat d relat	
	below	lual tr	tional		yolqr	st cor yee	-					nizati	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former						
(18) Robert Wiygul	2.00												
Director	0.00	Х						0.		0.			0.
(19) Edward Asner	2.00												
Director	0.00	Х						0.		0.			0.
(20) Jeff Corwin	2.00												-
Director	0.00	Х						0.		0.			0.
(21) Norm Dicks	2.00												•
Director	0.00	х						0.		0.			0.
(22) Holly Doremus	2.00	v						0.		ο.			0.
Director (23) Liberty Godshall	2.00	^						0.		0.			0.
Director	0.00	x						0.		0.			0.
(24) Mamie Parker	2.00							•••					
Director	0.00	х						0.		0.			0.
(25) Richard Robb	2.00												
Director	0.00	х						0.		0.			0.
(26) Daniel Rohlf	2.00												
Director	0.00	Х						0.		0.			0.
1b Sub-total								376,698.	4,93				87.
c Total from continuation sheets to Part V	II, Section A							1,386,723.	5,96				97.
d Total (add lines 1b and 1c)								1,763,421.	10,90	)5.	17	9,8	84.
2 Total number of individuals (including but n	ot limited to th	iose	liste	ed al	bov	e) wł	no r	received more than \$100	,000 of reportable	е			
compensation from the organization 🕨													18
												Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,			e, ke	y er	nplo	oyee,	or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su									•			v	
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual						4	Х						
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services						-		v					
rendered to the organization? If "Yes," complete Schedule J for such person													
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.													
(A) (B) (C)													
							ompei		n				
Russ Reid Company, Inc. Public Education &													
2 N Lake Avenue, Pasadena	a, CA 91	L1(	)1					constituent	dev	1	,19	7,6	00.
Blackbaud, Inc., 2000 Day	Blackbaud, Inc., 2000 Daniel Island Drive, Computer and service												
Charleston, SC 29492								bureau			66	3,9	51.
Public Interest Communica	ations,	7	700	)				Public Educa	tion &				
- 1 - 1 - 201		_							-				

Leesburg Pike, Suite 301 North, Fall constituent dev 601,446. Alta Resources 120 N Commercial Street, Neenah, WI 54956 Fulfillment services 418,651. Direct Mail Processors, Inc. Computer and service 1150 Conrad Court, Hagerstown, MD 21740 283,976. bureau Total number of independent contractors (including but not limited to those listed above) who received more than 17 \$100,000 of compensation from the organization

	See	Part	VII,	Section	Α	Continuation	sheets	Form <b>990</b> (2014)
432008 11-07-14								

Form 990 Defender:									53-018	3181
Part VII Section A. Officers, Directors, Tru	istees, Key Ei	nplo	oyee	es, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated
	hours	(c	hecł	k all '	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					oyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for	e or d	tee			sated		(W-2/1099-MISC)		organization
	related organizations	rustee	trus		ee	npen				and related organizations
	below	d ual t	tiona	Ι.	loldu	st cor	-			organizations
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) Lee Talbot	2.00	-	-		-	<u> </u>				
Director	0.00	x						ο.	0.	0
(28) Susan Rieff	2.00								••	0
Director	0.00	x						0.	0.	0
(29) Donald Barry	40.00							Ŭ•	••	0.
Senior Vice President, Conservation	0.00	1		x				216,363.	0.	17,047
(30) James Stofan	39.50	-		<u> </u>	-	-		210,303.	0.	±,,0±/
Chief Operating Officer	0.50	1		x				157,134.	317.	2,340
(31) Sajjad Ahrabi	40.00			^				137,134.	JT1.	2,540
	0.00				x			156,255.	0.	13,405
Vice President, Information Systems (32) Nina Fascione	40.00				^			10,200.	0.	13,403
	0.00				x			157 265	0.	25 200
Vice President, Development	38.60				<u>^</u>			157,265.	0.	25,200
(33) Mikaela King	1.40					x		146 621	5,199.	10 274
VP, Marketing & Online Communication	39.90					^		146,631.	5,199.	19,374
(34) Robert Dewey	0.10					x		111 200	4 5 1	10 010
VP, Government Relations/Ext Affairs						^		144,288.	451.	18,840
(35) Michael Senatore	40.00							140 250	0	
VP, Conservation Law & Gen. Counsel	0.00					X		140,250.	0.	29,385
(36) Nancy Dimaio	40.00					37		120 002	0	7 0 2 2
VP, Information Services/ CIO	0.00					X		136,982.	0.	7,832
(37) Nancy Gloman	40.00							101 555	0	
VP, Field Conservation Programs	0.00					X		131,555.	0.	11,574
		]								
								1 206 702		1 4 4 . 0.0 -
Total to Part VII, Section A, line 1c								1,386,723.	5,967.	144,997

		Check if Schedule O cont	ains a response	of hote to any line	(A)	(B) I	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	<b>(D)</b> Revenue exclude from tax under sections 512 - 514
1	а	Federated campaigns	1a					
	b	Membership dues	1b					
	с	Fundraising events	1c	276,417.				
	d	Related organizations	1d					
	е	Government grants (contribut	ions) <b>1e</b>	2,450.				
	f	All other contributions, gifts, gran	ts, and					
		similar amounts not included above	ve 1f	29,079,938.				
	g	Noncash contributions included in lines	1a-1f: \$	210,785.				
	h	Total. Add lines 1a-1f			29,358,805.			
				Business Code				
2	а	Registration fees		900099	20,000.	20,000.		
	b							
	с							
	d							
	е							
	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		►	20,000.			
3		Investment income (including	dividends, inter	est, and				
		other similar amounts)		►	170,396.			170,39
4		Income from investment of tax	x-exempt bond p	proceeds 🕨				
5		Royalties		►	637,229.		9,999.	627,23
			(i) Real	(ii) Personal				
6		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)		····· •				
7	а	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	6,148,240.					
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss)		····· •	456,185.			456,18
8		Gross income from fundraising						
		including \$ 276						
		contributions reported on line						
		Part IV, line 18		81,329.				
		Less: direct expenses		81,329.				
		Net income or (loss) from func	•	····· •	0.			
9		Gross income from gaming ac						
		Part IV, line 19		<u> </u>				
		Less: direct expenses						
		Net income or (loss) from gam		▶				
10	а	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
	С	Net income or (loss) from sale						
		Miscellaneous Revenu	e	Business Code	14 516			14 51
	_	Reimbursed expenses		900099	14,716.			14,71
	b			<b>├</b> ──── <b>├</b>		<u>                                     </u>		
	c			<b>├</b> ─── <b>├</b>				
		All other revenue			44 846			
1	е	Total. Add lines 11a-11d		🕨 📘	14,716.			

Defenders of Wildlife

432009 11-07-14

Form 990 (2014)

53-0183181

Page 9

Defenders of Wildlife Part IX Statement of Functional Expenses

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
	Check if Schedule O contains a respor	ise or note to any line in (A)	this Part IX (B)	(C)	(D)				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to domestic organizations		·		·				
	and domestic governments. See Part IV, line 21	789,239.	789,239.						
2	Grants and other assistance to domestic								
	individuals. See Part IV, line 22	28,500.	28,500.						
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,	1 155 446		107 450	00 400				
	trustees, and key employees	1,155,446.	1,007,505.	127,458.	20,483				
6	Compensation not included above, to disqualified								
	persons (as defined under section $4958(f)(1)$ ) and								
_	persons described in section 4958(c)(3)(B)	0 601 177	7,569,927.	057 655	152 005				
7	Other salaries and wages	8,681,477.	7,309,947.	957,655.	153,895				
8	Pension plan accruals and contributions (include	177 520	202 601	70 052	5 900				
-	section 401(k) and 403(b) employer contributions)	477,539. 1,296,679.	392,684.	79,053. 78,589.	5,802 29,711				
9	Other employee benefits	711,397.	1,188,379. 589,299.	112,970.	9,128				
10	Payroll taxes	/11,39/•	505,255.	112,970.	9,120				
11	Fees for services (non-employees):								
	Management	26,036.	25,221.	772.	43				
		46,800.	23,221.	46,800.	±3				
	Accounting	40,000		40,000.					
	Lobbying Professional fundraising services. See Part IV, line 17	1,733,644.			1,733,644				
f		46,697.		46,697.	1,755,011				
	Other. (If line 11g amount exceeds 10% of line 25,	10,05,1		10,05,1					
9	column (A) amount, list line 11g expenses on Sch 0.)	1,530,523.	1,329,009.	166,585.	34,929				
12	Advertising and promotion	544,343.	488,748.	30,684.	24,911				
13	Office expenses	4,614,674.	3,965,122.	409,369.	240,183				
14	Information technology	1,092,546.	839,483.	210,936.	42,127				
15	Royalties	744,069.	646,631.	50,597.	46,841				
16	Occupancy	799,866.	663,130.	131,994.	4,742				
17	Travel	467,110.	376,110.	80,553.	10,447				
18	Payments of travel or entertainment expenses	-	-		-				
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	186,192.	86,516.	94,008.	5,668				
20	Interest	244,090.	202,196.	38,762.	3,132				
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	645,714.	534,889.	102,540.	8,285,				
23	Insurance	84,229.	69,777.	13,372.	1,080.				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)								
а	Printing/publications	2,513,435.	2,166,235.	188,361.	158,839				
a b	Nember abin in nembinen	871,452.	752,547.	61,848.	57,057				
c	Mangaghian / hanly food	601,363.	202,173.	392,869.	6,321				
d	Duef fund aller	0.	1,506,721.	118,775.	-1,625,496				
	All other expenses	465,394.	387,720.	72,960.	4,714				
25	Total functional expenses. Add lines 1 through 24e	30,398,454.	25,807,761.	3,614,207.	976,486				
26	Joint costs. Complete this line only if the organization		. ,	· ·					
·	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here Kif following SOP 98-2 (ASC 958-720)	5,152,288.	3,455,639.	832,788.	863,861				

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Schedule D

\_iabilities

**Vet Assets or Fund Balances** 

	990 (		ild	life		53-		
Par	rt X	Balance Sheet						
		Check if Schedule O contains a response or not	e to ar	y line in this Part X				
					<b>(A)</b> Beginning of year			
	1	Cash - non-interest-bearing			6,337,351.	1		
	2	Savings and temporary cash investments		7,072,234.	2			
	3	Pledges and grants receivable, net		2,187,110.	3			
	4	Accounts receivable, net	248,552.	4				
	5	Loans and other receivables from current and for	ns and other receivables from current and former officers, directors,					
		trustees, key employees, and highest compensation	nployees. Complete					
		Part II of Schedule L				5		
	6	Loans and other receivables from other disqualit section 4958(f)(1)), persons described in section employers and sponsoring organizations of sect	rsons (as defined under c)(3)(B), and contributing					
S		employees' beneficiary organizations (see instr).	lete Part II of Sch L		6			
Assets	7	Notes and loans receivable, net				7		
¥:	8	Inventories for sale or use		F	588,131.	8		
	9				765,226.	9		
	10a	Land, buildings, and equipment: cost or other						
		basis. Complete Part VI of Schedule D	10a	17,160,466.				
	b	Less: accumulated depreciation	10b	7,132,410.	10,255,545.	10c		

Investments - program-related. See Part IV, line 11

Intangible assets

Other assets. See Part IV, line 11

Accounts payable and accrued expenses

Grants payable

Loans and other payables to current and former officers, directors, trustees,

key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔟 and

Unrestricted net assets

Temporarily restricted net assets

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here

Total liabilities and net assets/fund balances

Escrow or custodial account liability. Complete Part IV of Schedule D

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of

Total liabilities. Add lines 17 through 25

and complete lines 30 through 34.

complete lines 27 through 29, and lines 33 and 34.

Total assets. Add lines 1 through 15 (must equal line 34) .

(B) End of year 6,379,964. 6,465,671. 645,096. 226,013.

> 811,925. 735,031.

10,028,056.

6,096,403.

4,223,864.

1,588,611.

5,831,859.

2,453,955.

9,959,455.

17,693,415.

6,573,442.

1,385,711.

85,030.

35,612,023.

5,749,640.

4,012,383.

2,416,802.

6,063,442.

2,414,812.

10,895,056.

16,998,649

7,824,759.

1,497,708.

26,321,116.

37,216,172.

37,216,172.

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Form **990** (2014)

25,652,568.

35,612,023.

Form	Defenders of Wildlife	53-01	83181	Pa	ge <b>12</b>	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	30,657			
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,398			
3	Revenue less expenses. Subtract line 2 from line 1	3	258			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	26,321			
5	Net unrealized gains (losses) on investments	5	-927	7,4	25.	
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	25,652	2,5	68.	
Pa	rt XII Financial Statements and Reporting					
Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	-			
2a			2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat					
	consolidated basis, or both:	,				
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit.				
-	review, or compilation of its financial statements and selection of an independent accountant?		2c	х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si					
	Act and OMB Circular A-133?		3a		х	
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit				
5	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Зb			
				000	<u> </u>	

Form **990** (2014)

Department of the Treasury

Internal Revenue Service

(Form 9	990 or	990-EZ)
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# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

	2014
	Open to Public Inspection
r	identification numbe

OMB No. 1545-0047

Name of the organization

Name	of the organization							identification number
_		nders of W						3-0183181
Part	t I Reason for Public	Charity Status (	All organizations must co	omplete th	is part.) Se	ee instruction	S.	
The or	rganization is not a private found	dation because it is: (	For lines 1 through 11, c	check only	one box.)			
1	A church, convention of ch	nurches, or association	on of churches described	d in <b>sectio</b>	n 170(b)(1	I)(A)(i).		
2	A school described in <b>sect</b>	tion 170(b)(1)(A)(ii).	Attach Schedule E.)					
з <u> </u>	A hospital or a cooperative	hospital service org	anization described in <b>s</b> e	ection 170	(b)(1)(A)(ii	ii).		
4	A medical research organiz	zation operated in co	njunction with a hospita	l described	d in <b>sectio</b>	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
_	city, and state:							
5 🗆	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
_	section 170(b)(1)(A)(iv). (0							
6	A federal, state, or local go	vernment or governr	nental unit described in	section 17	70(b)(1)(A)	(v).		
7 L	X An organization that norma	-	intial part of its support f	rom a gov	ernmental	unit or from t	he general	public described in
- Г	section 170(b)(1)(A)(vi). (C							
8 L	A community trust describ							
9 L	An organization that norma							
	activities related to its exer							-
	income and unrelated busi		(less section 511 tax) fr	om busine	sses acqu	iired by the oi	ganization	after June 30, 1975.
<b>40</b> [	See section 509(a)(2). (Co	• •						
10 L	An organization organized			•				
11 🗆	An organization organized	•	•	•				
	more publicly supported of lines 11a through 11d that							FRECK THE DOX III
а	Type I. A supporting org				-		-	aivina
a	the supported organizati		-	•				
	organization. You must			a majority (				apporting
b	Type II. A supporting org	-		tion with it	s sunnorte	ed organizatio	on(s) by ha	vina
	control or management of					-		-
	organization(s). You mus						igo ino oup	portou
с	Type III functionally inte			in connec	tion with.	and functiona	llv integrate	ed with
-	its supported organizatio							
d	Type III non-functional						rted organi	zation(s)
	that is not functionally in						-	
	requirement (see instruct	tions). You must cor	nplete Part IV, Sections	A and D,	and Part	V.		
е	Check this box if the org	anization received a	written determination fro	om the IRS	that it is a	а Туре I, Туре	II, Type III	
	functionally integrated, o	r Type III non-functio	nally integrated support	ing organi:	zation.			
f	Enter the number of supported	organizations						
	Provide the following informatio	n about the supporte	ed organization(s).					
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o listed i		(v) Amount of	-	(vi) Amount of
	organization		above or IRC section	governing o		support Instruct	-	other support (see Instructions)
			(see instructions))	Yes	No	Instruct	10113)	
Total								

## Schedule A (Form 990 or 990-EZ) 2014 Defenders of Wildlife

## 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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	28,345,792.	23,753,315.	31,375,687.	29,385,093.	29,358,805.	142,218,692.
2	Tax revenues levied for the organ-						
	ization'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	28,345,792.	23,753,315.	31,375,687.	29,385,093.	29,358,805.	142,218,692.
	The portion of total contributions	, , -	, , -	, , -	, , -	, , -	, , .
Ŭ	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,						0 010 040
-	column (f)						2,316,943.
	Public support. Subtract line 5 from line 4.						139,901,749.
	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	28,345,792.	23,753,315.	31,375,687.	29,385,093.	29,358,805.	142,218,692.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources $\dots$	1,339,837.	839,510.	699,575.	704,039.	797,626.	4,380,587.
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 VI.)	201,526.	114,069.	30,068.	33,196.	14,716.	393,575.
11	Total support. Add lines 7 through 10				•		146,992,854.
	Gross receipts from related activities,	etc. (see instructio	nns)			12	881,795.
	First five years. If the Form 990 is for		,				
10	organization, check this box and stop	e e				11001(0)(0)	
Sec	ction C. Computation of Publ		rcentage		<u></u>		
	Public support percentage for 2014 (I			column (f))		14	95.18 %
						15	91.75 %
	Public support percentage from 2013						
108	<b>33 1/3% support test - 2014.</b> If the c						
	stop here. The organization qualifies						
b	<b>33 1/3% support test - 2013.</b> If the c						
	and <b>stop here.</b> The organization qual						▶∟
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			-	-	-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	<b>t - 2013.</b> If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or <sup>-</sup>	17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ	cumstances" test.	The organization o	qualifies as a publi	cly supported orga	anization	
18	Private foundation. If the organizatio	n did not check a	box on line 13, <u>16</u>	a, 16b, 17a, or 17b	o, check this box a	ind see instruction	s 🕨 🗖

Schedule A (Form 990 or 990-EZ) 2014

## 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.)

Sec	tion A. Public Support			_			
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						1
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here						
Sec	tion C. Computation of Publi	c Support Pe	ercentage				
15	Public support percentage for 2014 (li	ne 8, column (f) c	livided by line 13,	column (f))		15	%
16	Public support percentage from 2013	Schedule A, Part	t III, line 15			16	%
	tion D. Computation of Inves						
17	Investment income percentage for 20	14 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from 2	2013 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2014. If the	organization did I	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3% , and line	17 is not
	more than 33 1/3%, check this box ar	-					
b	33 1/3% support tests - 2013. If the						
	line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organization						
	23 09-17-14						90 or 990-EZ) 2014

Yes

No

### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in *Part VI* how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *Part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in *Part VI* when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
   (B) purposes? If "Yes," explain in *Part VI* what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" *and if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in Part VI.*
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer (b) below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

10b

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
		-		
~	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	-		
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	:).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
5	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
2	-	20		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а		20		
L.	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
u	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b		
	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	30		

Schedule A (Form 990 or 990-EZ) 2014

## Schedule A (Form 990 or 990 EZ) 2014 Defenders of Wildlife

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations ot Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990 or 990-EZ) 2014

1

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	Ŭ
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
-	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
 c				
	Excess from 2013			
	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

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


\*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

## 2014

Employer identification number

53-0183181

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

### Defenders of Wildlife

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

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

### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

### **Special Rules**

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Defenders of Wildlife

Name of organization

Employer identification number

53-0183181

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$92,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution         Person         Payroll         Noncash         (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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

Page **2** 

53-0183181

### Defenders of Wildlife

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

Part II	<b>Noncash Property</b> (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

name of orga			Employer Identification number
Defend <b>Part III</b>	ers of Wildlife Exclusively religious, charitable, etc., cor the year from any one contributor. Complete completing Part III, enter the total of exclusively religio	i <b>tributions to organizations describe</b> columns (a) through (e) and the follo us, charitable, etc., contributions of \$1,000 of	53 - 0183181 ed in section 501(c)(7), (8), or (10) that total more than \$1,000 fo llowing line entry. For organizations or less for the year. (Enter this info once) \$
	Use duplicate copies of Part III if additio		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi	gift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi and ZIP + 4	gift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. 		(e) Transfer of gi	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. _			
-	Transferee's name, address, a	(e) Transfer of gi and ZIP + 4	gift Relationship of transferor to transferee

SCHEDULE C	SCHEDULE C Political Campaign and Lobbying Activities								
(Form 990 or 990-EZ)									
	<ul> <li>Complete if the organization is described below.</li> <li>Attach to Form 990 or Form 990-EZ.</li> </ul>								
Department of the Treasury Internal Revenue Service	oper to Public Open to Public Open to Public								
-	-	Form 990, Part IV, line 3, or Form		e 46 (Political Campaigr	n Activities), then				
	-	plete Parts I-A and B. Do not com							
		01(c)(3)) organizations: Complete F	Parts I-A and C below.	Do not complete Part I-E	3.				
<ul> <li>Section 527 organiz</li> </ul>		,							
-		Form 990, Part IV, line 4, or Form							
	-	have filed Form 5768 (election und							
	-	have NOT filed Form 5768 (electio			-	<u></u>			
Tax) (see separate inst		Form 990, Part IV, line 5 (Proxy	rax) (see separate in	structions) or Form 990	J-EZ, Part V, line 350 (Pro)	UXY			
<i>,</i>		tions: Complete Part III.							
Name of organization	), or (o) organiza			Em	ployer identification numb	nber			
	Defende	rs of Wildlife			53-0183181				
Part I-A Compl	ete if the org	anization is exempt unde	r section 501(c) o	or is a section 527	organization.				
1 Provide a descripti	on of the organiz	ation's direct and indirect political	campaign activities ir	n Part IV.					
2 Political expenditur	es			▶	\$				
<b>3</b> Volunteer hours									
		anization is exempt unde							
		incurred by the organization unde							
		incurred by organization manager							
		n 4955 tax, did it file Form 4720 fo				No			
					Yes 📖 I	No			
b If "Yes," describe in Part I-C Compl		anization is exempt unde	r section 501(c)	except section 501	1(c)(3)				
-	-	d by the filing organization for sect	• • •						
		ization's funds contributed to othe	•		Ψ				
			-		\$				
		. Add lines 1 and 2. Enter here and			•				
	-			►	\$				
		<b>1120-POL</b> for this year?			Yes	No			
		nployer identification number (EIN)							
made payments. F	or each organiza	tion listed, enter the amount paid	from the filing organiza	ation's funds. Also enter	the amount of political				
		omptly and directly delivered to a			rate segregated fund or a	i.			
political action com	mittee (PAC). If	additional space is needed, provid	le information in Part I	V.					
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid from					
				filing organization's funds. If none, enter -0	contributions received a promptly and directly				
				iunus. Il none, enter -0	delivered to a separate				
					political organization.	n.			
					If none, enter -0				

Sche	dule C (Form 990 or 990-EZ) 2014 Defen	ders of Wildlife	53-0	183181 Page 2
Par		on is exempt under section 501(c)(3) and fi	led Form 5768 (e	lection under
	section 501(h)).			
A Cł	neck 🕨 🛄 if the filing organization belong	gs to an affiliated group (and list in Part IV each affiliated	l group member's nam	e, address, EIN,
	expenses, and share of exces	s lobbying expenditures).		
B Cł	neck 🕨 🛄 if the filing organization check	ed box A and "limited control" provisions apply.		
		oying Expenditures eans amounts paid or incurred.)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence pub	lic opinion (grass roots lobbying)	195,545.	
b	Total lobbying expenditures to influence a lea	gislative body (direct lobbying)	183,194.	
с		d 1b)	378,739.	
d			28,218,652.	
е		s 1c and 1d)	28,597,391.	
	Lobbying nontaxable amount. Enter the amo		1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% o	f line 1f)	250,000.	
h	Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.	
i	Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		
	reporting section 4911 tax for this year?		[	Yes No
		4-Year Averaging Period Under section 501(h)		
	(Some organizations that made	a section 501(h) election do not have to complete all	of the five columns h	elow

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> Total	
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.	
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.	
<b>c</b> Total lobbying expenditures	315,055.	372,741.	225,531.	378,739.	1,292,066.	
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.	
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.	
f Grassroots lobbying expenditures	151,544.	161,495.	49,028.	195,545.	557,612.	

Schedule C (Form 990 or 990-EZ) 2014

## Schedule C (Form 990 or 990-EZ) 2014 Defenders of Wildlife53-018318Part II-BComplete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	or each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	ount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
d	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
i	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction		
	501(c)(6).					
			_	Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	• •			ne 3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
	Carryover from last year					
	Total					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical				
	expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)					
Par	t IV Supplemental Information					
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	-A, lines 1 a	and 2 (see		

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SC (Form Depart Interna	<b>20</b> Open t	OMB No. 1545-0047				
Nam	e of the organization Defenders of Wildl	ife	Emp	loyer identificati 53-0183		
Par			Accou			
	organization answered "Yes" to Form 990, Part IV, lir		/10004			
		(a) Donor advised funds	(b) Fund	ds and other acco	ounts	
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised f	unds			
	are the organization's property, subject to the organization's			Yes	No No	
6	Did the organization inform all grantees, donors, and donor					
	for charitable purposes and not for the benefit of the donor		ferring		<b>—</b>	
Par				Yes	No	
	t II Conservation Easements. Complete if the or Purpose(s) of conservation easements held by the organiza		v, line 7.			
1	Purpose(s) of conservation easements held by the organiza		lly import	ant land area		
	Protection of natural habitat	Preservation of a certified				
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form of a	conserva	tion easement or	the last	
	day of the tax year.					
				Held at the End of	the Tax Year	
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
с	Number of conservation easements on a certified historic st	tructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired					
-	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	anization	during the tax		
4	year ► Number of states where property subject to conservation ea	accoment is leasted				
4 5	Does the organization have a written policy regarding the pe					
5	violations, and enforcement of the conservation easements			Yes	No	
6	Staff and volunteer hours devoted to monitoring, inspecting					
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) abo		-		_	
	and section 170(h)(4)(B)(ii)?			Yes	🗌 No	
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expense sta	tement, a	nd balance sheet	, and	
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the	organizat	ion's accounting	for	
Dec	conservation easements.					
Par	t III Organizations Maintaining Collections of		r Simila	ar Assets.		
	Complete if the organization answered "Yes" to Form				-6	
Ia	If the organization elected, as permitted under SFAS 116 (A historical treasures, or other similar assets held for public ex					
	the text of the footnote to its financial statements that desc			service, provide,	in Fait All,	
h	If the organization elected, as permitted under SFAS 116 (A		l balance	sheet works of a	rt. historical	
~	treasures, or other similar assets held for public exhibition, e					
	relating to these items:	,	, p		5	
	(i) Revenue included in Form 990, Part VIII, line 1		🕨 🤋	6		
				6		
2	If the organization received or held works of art, historical tro					
	the following amounts required to be reported under SFAS					
а	Revenue included in Form 990, Part VIII, line 1		🕨 🤋	ß		
b	b Assets included in Form 990, Part X					

Sche	dule D (Form 990) 2014 Defende	rs of Wild	life		53-	0183181 Page 2		
Par	t III Organizations Maintaining C	Collections of Ar	t, Historical Tr	easures, or Oth	er Similar A	<b>ssets</b> (continued)		
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant use c	f its collection items		
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4								
5								
	to be sold to raise funds rather than to be maintained as part of the organization's collection?							
Par	t IV Escrow and Custodial Arran		te if the organizatio	n answered "Yes" to	o Form 990, Parl	t IV, line 9, or		
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custod		•					
	on Form 990, Part X?					. └── Yes └── No		
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:			• •		
						Amount		
	Beginning balance							
	Additions during the year							
-	Distributions during the year							
f 2a	Ending balance Did the organization include an amount on F					Yes No		
	If "Yes," explain the arrangement in Part XIII.							
Par								
		(a) Current year	(b) Prior year		(d) Three years t	back (e) Four years back		
1a	Beginning of year balance	1,497,708.	7,730,724.		6,355,9			
	Contributions		· ·					
	Net investment earnings, gains, and losses	-111,997.	50,518.	292,516.	292,516. 1,082,25019,210			
	Grants or scholarships							
	Other expenditures for facilities							
	and programs		6,283,534.			76,173		
f	Administrative expenses							
	End of year balance	1,385,711.	1,497,708.	7,730,724.	7,438,2	6,355,958		
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a	a)) held as:				
	Board designated or quasi-endowment	.00	_%					
b	Permanent endowment  100.00	%						
с	Temporarily restricted endowment	.00 %						
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organization	) 		
	by:					Yes No		
	(i) unrelated organizations							
	(ii) related organizations							
b	If "Yes" to 3a(ii), are the related organizations					3b		
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	<b>t VI</b> Land, Buildings, and Equipm		Dest N/ Kee 11 - O		1 <b>1</b> 0			
	Complete if the organization answere					(1)		
	Description of property	(a) Cost or of		.,		(d) Book value		
	Land	basis (investm	,	(other) de	epreciation	4,585,586.		
	Land				074,707.	4,613,582		
	Buildings		0,00	0,209. 4,	0/4,/0/.	4,013,30Z.		
	Leasehold improvements		3 0 2	3,362. 2,	378,535.	644,827.		
	Equipment			3,229.	<u>578,333</u> . 679,168.	184,061		
	Other				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	10,028,056		
Total	Aud miles ra uniough re. (Column (a) must e	iyuan onn 330, Part .	∧, colui III (¤), IIIIe I		<b>P</b>	dule D (Form 990) 2014		
					JULIE			

432052 10-01-14

	T MITGITIC	JJ UIUUI Faye
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	to Form 990, Part IV, line	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

### Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Assets held in charitable remainder and other trusts	2,773,626.
(2) Accrued interest and dividends	1,642.
(3) Unamortized loan costs	56,078.
(4) Bequests and trusts receivable	1,369,712.
(5) Deferred compensation assets	22,806.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	4,223,864.

### Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Annuity and other split-interest	
(3)	obligations	2,339,194.
(4)	Capital lease obligation	91,955.
(5)	Deferred compensation liabilities	22,806.
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.) 🕨	2,453,955.

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

Schedule D (Form 990) 2014

20	•	~	E	-		2	2	1	
- 5 U		n	2			- 5	- 5		
		~	-		1	-	-	-	•

33,331,955.

2,933,501.

30,398,454.

30,398,454.

0.

Ο.

The earnings of donor-restricted contributions can be used to fund either specific programs or general operations.

Defenders of Wildlife

e Add lines 2a through 2d

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

a Net unrealized gains (losses) on investments

**b** Donated services and use of facilities

c Recoveries of prior year grants

d Other (Describe in Part XIII.)

a Investment expenses not included on Form 990, Part VIII, line 7b

c Add lines 4a and 4b

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

b Other (Describe in Part XIII.)

a Donated services and use of facilities

b Prior year adjustments

c Other losses

d Other (Describe in Part XIII.)

a Investment expenses not included on Form 990, Part VIII, line 7b

**b** Other (Describe in Part XIII.)

3 Subtract line 2e from line 1

5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

2 Amounts included on line 1 but not on Form 990, Part IX, line 25:

4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Part XIII Supplemental Information.

c Add lines 4a and 4b

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Total revenue, gains, and other support per audited financial statements

Subtract line 2e from line 1

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Total expenses and losses per audited financial statements

e Add lines 2a through 2d

5 Total expenses, Add lines 3 and 4c, (This must equal Form 990, Part I, line 18.)

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Defenders had no significant uncertain tax positions at September 30, 2015

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 a and 4; Part IV, lines 1 b and 2b; Part V, line 4; Part X, line 2; Part XI,

and 2014.

Part XI, Line 2d - Other Adjustments:

## Annual Dinner - Direct benefits to donors

## Part XII, Line 2d - Other Adjustments:

1

2e

3

4c

5

1

2e

3

4c

5

-927,425

2,852,172.

2,852,172.

81,329.

81,329.

2a

2b 2c

2d

4a 4b

2a |

2b 2c

2d

4a 4b 32,663,407.

2,006,076.

30,657,331.

81,329.

Part V, line 4:

Schedule D (Form 990) 2014

1

3

4

1

Part X, Line 2:

Schedule D (Form 990) 2014 Defenders of Wildlife	53-0183181 Page 5
Part XIII Supplemental Information (continued)	
Annual Dinner - Direct benefits to donors	81,329.

Part I General Info	rmation on A	Activities Out	tside the United States. Compl	ete if the organization answered "Y	es" on
Form 990, Part I	V, line 14b.				
1 For grantmakers. Does	s the organization	n maintain recor	ds to substantiate the amount of its gr	ants and other assistance,	
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award th	e grants or assistance?	Yes 🗌 No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and other assistance outs	side the
United States.					
3 Activities per Region. (T	he following Par	t I, line 3 table ca	an be duplicated if additional space is	needed.)	
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
	offices	employees,	(by type) (e.g., fundraising, program	is a program service,	expenditures
	in the region	agents, and independent	services, investments, grants to	describe specific type	for and investments
		contractors in region	recipients located in the region)	of service(s) in region	in region
North America -		9			
Canada and Mexico,					
but but not the					
United States	0	1	Program services	See Part V	126,436.
3 a Sub-total	0	1			126,436
<b>b</b> Total from continuation					
sheets to Part I	0	0			0.
c Totals (add lines 3a					
and 3b)	0	1			126,436.

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

Statement of Activities Outside the United States

Department of the Treasury Internal Revenue Service

Δ **Open to Public** Inspection

Employer identification number

53-0183181

OMB No. 1545-0047

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

Name of the organization

Defenders of Wildlife

SCHEDULE F (Form 990)

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

Schedule F (Form 990) 2014

Defenders of Wildlife

53-0183181

Page 2

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

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)		
<ul> <li>2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter</li> <li>3 Enter total number of other organizations or entities</li> </ul>										

Defenders c	of Wi	.1d1	ife
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53-0183181

Page **3** 

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2014

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 De:	fenders of Wildlife
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**Supplemental Information** 

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

Part I, Line 2:

Part V

The Organization enters into a written grant agreement with the grantee

that includes specific financial and programmatic accomplishment

reporting requirements.

Part I, line 3:

Foreign expenditures are directly tracked and accounted for on the

accrual method of accounting used for books.

Part I, line 3, Column (e):

Mexican programs include national and international wildlife trade and

habitat conservation, particularly as it affects Defenders' priority

species and ecosystems and the progressive development of wildlife law

and policy in Mexico. A consultant works throughout the country on the

various programs from the northern Gulf of California to the Southern

Yucatan Peninsula.

SCHEDULE G	Gummlama	ntel Information Devending	<b>F</b> undad	-:-	ing of Coming	N		OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	ental Information Regarding e organization answered "Yes" to	Form 990	), Pa	art IV, lines 17, 18, o			2014
Department of the Treasury Internal Revenue Service		organization entered more than \$1 Attach to Form 990 Attach to Form 990 or 990-EZ	) or Form	990	0-EZ.	ov/fo	rm 990	Open to Public Inspection
Name of the organization	n						Employer id	entification number
		ers of Wildlife					53-018	
	complete this par	<ul> <li>Complete if the organization answer</li> <li>t.</li> </ul>	ered "Yes'	' to	Form 990, Part IV, li	ne 17	7. Form 990-E	Z filers are not
<ul> <li>a X Mail solicitat</li> <li>b X Internet and</li> <li>c X Phone solici</li> <li>d X In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ul>	tions I email solicitations itations blicitations on have a written of ted in Form 990, F n highest paid ind	s <b>f</b> X Solicita <b>g</b> Special or oral agreement with any individual Part VII) or entity in connection with p lividuals or entities (fundraisers) purs	tion of nor tion of gov fundraisir l (including profession	n-go verr ng e g of	overnment grants nment grants events fficers, directors, trus undraising services?	stees	X Ye	
(i) Name and addres or entity (fund	ss of individual	(ii) Activity	(iii) Did fundraise have custo or control contribution	of	(iv) Gross receipts from activity	to (c	Amount paid or retained by fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization
Public Interest			Yes N	lo				
Communications, In	.c 7700	Telemarketing	Х	(	493,845.		506,248	-12,403.
Russ Reid Company,	Inc	Public education,						
1615 L St. NW, Sui		supporter participation	X	:	0.		1,197,600	-1,197,600.
Sea Change Strateg		Public education,						
Birch Ave., Takoma	Park, MD	supporter participation	X	:	0.		105,667	-105,667.
				_				
Total			<u></u>	►	493,845.		1,809,515	
<ol> <li>List all states in white or licensing.</li> </ol>	ich the organizatio	on is registered or licensed to solicit	contributio	ons	or has been notified	l it is	exempt from	registration

 AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ

 NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

# Schedule G (Form 990 or 990 EZ) 2014 Defenders of Wildlife

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

	_	of fundraising event contributions and gr	ross income on Form 990	-EZ, lines 1 and 6b. List	events with gross receip	ots greater than \$5,000.
			(a) Event #1 Annual dinner	<b>(b)</b> Event #2	(c) Other events None	(d) Total events (add col. (a) through col. (c))
ē			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	357,746.			357,746.
	2	Less: Contributions	276,417.			276,417.
	3	Gross income (line 1 minus line 2)	81,329.			81,329.
	4	Cash prizes				
Ş	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	22,938.			22,938.
irect E>	7	Food and beverages	33,088.			33,088.
Δ	8	Entertainment				
	9	Other direct expenses				25,303.
	10	Direct expense summary. Add lines 4 throug	h 9 in column (d)	·	►	81,329.
_		Net income summary. Subtract line 10 from I				0.
Ра	rt I	<b>Gaming.</b> Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	
Revenue		\$13,000 011 0111 990°LZ, inte da.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				L
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
						1

8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states?	<b>Y</b>	es 🗌	No
<b>b</b> If "No," explain:			

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

7 Direct expense summary. Add lines 2 through 5 in column (d)

432082 08-28-14

Schedule G (Form 990 or 990-EZ) 2014

\_\_ No

Sch	edule G (Form 990 or 990-EZ) 2014 Defenders of Wildlife 5	3-0183	8181	Page <b>3</b>
	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in:			
a	a The organization's facility	13a		%
	• An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	:		
	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
	b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amoun of gaming revenue retained by the third party ▶ \$	t		
C	If "Yes," enter name and address of the third party:			
10	Address			
10	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer     Employee     Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	L	Yes	└── No
b	D Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the		
Do	organization's own exempt activities during the tax year <b>&gt;</b> \$	+ III. I'm a a 0	01- 10	
Fa	<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	t III, lines 9	, 9D, TC	D, 15D,
Sc	hedule G, Part I, Line 2b, List of Ten Highest Paid Fundrai	sers:		
<u>(i</u>	) Name of Fundraiser: Public Interest Communications, Inc.			
<u>(i</u>	) Address of Fundraiser:			
77	00 Leesburg Pike, Suite 301 North, Falls Church, VA 22043			
<u>(i</u>	) Name of Fundraiser: Russ Reid Company, Inc.			
(i				20036
<u> </u>	i) Activity: Public education, supporter participation and	<u>rever</u>	pille	11L

(i) Name of Fundraiser: Sea Change Strategies

(i) Address of Fundraiser: 7409 Birch Ave., Takoma Park, MD 20912

(ii) Activity: Public education, supporter participation and development

Schedule G (Form 990 or 990-EZ)

SCHEDULE I		G	arants and Oth	ner Assistan	ce to Orgar	nizations.		OMB No. 1545-004	47	
(Form 990)		Go	vernments, an lete if the organization	nd Individual	s in the Ŭn	ited States		2014	ŀ	
Department of the Treasury Internal Revenue Service	► Attach to Form 990. Open to Pub Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.									
Name of the organization				(i orm 550) and its		at www.irs.gov/form95	<i>i</i> 0.	Employer identification nu		
	Defenders		.ife					53-01831	81	
-	rmation on Grants a									
							sistance, and the selec		٦	
criteria used to awa	ard the grants or assisted in a second se	stance?						X Yes	_ No	
	Y		toring the use of gran			anization answered "	Yes" to Form 990, Part	IV line 21 for any		
		-	be duplicated if addi			Janization answered	res to ronn 990, Fan	TV, IIIIe 21, IOF ally		
<b>1 (a)</b> Name and addr or gover	ess of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Wilderness Soci	.ety							Subgrant to support a		
1615 M Street, NW								joint project on		
Washington, DC 2003	6	53-0167933	501(c)(3)	175,000.	0.	N/A	N/A	renewable energy poli	cy.	
Natural Resources D	efense Council							Subgrant to support a	L	
40 West 20 Street								joint project on		
New York, NY 10011		13-2654926	501(c)(3)	148,750.	0.	N/A	N/A	renewable energy poli	су.	
The Nature Conserva	-							Subgrant to support a		
4245 North Fairfax			F01/-\/2\	104 204	0			joint project on		
Arlington, VA 22203	)	53-0242652	501(c)(3)	124,384.	0.	N/A	N/A	renewable energy poli	су.	
National Religious 110 Maryland Avenue								To assist with operat	ing	
Washington, DC 2000	2	13-6996770	501(c)(3)	10,000.	0.	N/A	N/A	costs of NRPE.		
Sheep Springs Sheep 1200 W Queen Creek								To share the costs of range rider to help prevent livestock	a	
Chandler, AZ 85248		86-0772508	N/A	6,000.	0.	N/A	N/A	depredations on		
KCK Investments LLC	2							To assist with costs associated with effor	ts	
4747 S. Power Road					-			to avoid livestock		
Mesa, AZ 85212		86-0920223	N/A	15,000.	0.	N/A	N/A	depredation by wolves		
			rganizations listed in t	ne line 1 table				🕈	$\frac{5}{7}$	
3 Enter total number LHA For Paperwork R	of other organization							Schedule I (Form 990) (		
		, see the manual							(	

See Part IV for Column (h) descriptions

# Schedule I (Form 990) Defenders of Wildlife Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							Re-grant to assist in
Singleton Strategies, LLC							costs for work on
1756 Clarkson Street, #410							Renewable Energy
Denver, CO 80218	74-3223997	N/A	13,444.	0.	N/A	N/A	Mitigation Workshops.
							To assist with costs
Y Canyon Ranch, LLC							associated with efforts
HC 62 BOX 701							to avoid livestock
Aragon, NM 87820	85-0465394	N/A	9,000.	0.	N/A	N/A	depreciation by wolves on
							To assist with costs
Flying W. Ranch, Inc.							associated with efforts
P.O. Box 644							to avoid livestock
Reserve, NM 87830	86-1001499	N/A	7,500.	0.	N/A	N/A	depreciation by wolves on
							To assist with costs
Strayhorse Ranch, LLC							associated with efforts
1849 Homestead Rd.							to avoid livestock
Lakeside, AZ 85929	26-0702407	N/A	9,000.	0.	N/A	N/A	depredation by wolves on
,			,				To assist with costs
Slade Ranch, LLC							associated with efforts
P.O. Box 761							to avoid livestock
Springerville, AZ 85938	20-2888386	N/A	6,000.	0	N/A	N/A	depredation by wolves on
							Re-grant to CSP to
Conservation Science Partners,							develop a risk-based
Inc 11050 Pioneer Trail, Suite							analysis of impacts from
202 - Truckee, CA 96161	45-2504981	501(c)(3)	50,000.	0	N/A	N/A	energy development on

Schedule I (Form 990)

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
To assist with costs associated with efforts to					
avoid livestock depreciation by wolves on					
allotment in the Apache-Sitgreaves National Forest					
where Mexican wolves are present.	1	7,500.	0.	N/A	N/A
To assist with costs associated with efforts to					
avoid livestock depreciation by wolves on					
allotment in the Gila National Forest during the					
2015 grazing season.	1	13,500.	0.	N/A	N/A
To share the cost of a range rider to help monitor					
livestock and wolves on grazing allotments in the					
Apache-Sitgreaves National Forest during the 2015					
grazing season.	1	7,500.	0.	N/A	N/A

**Part IV** Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part I, Line 2:

The Organization enters into a written grant agreement with the grantee

that includes specific financial and programmatic accomplishment reporting

requirements.

Part II, line 1, Column (h):

Name of Organization or Government: Sheep Springs Sheep Co.

(h) Purpose of Grant or Assistance: To share the costs of a range rider

to help prevent livestock depredations on allotments in the

Part IV Supplemental Information

Apache-Sitgreaves National Forest where Mexican Wolves are present.

Name of Organization or Government: KCK Investments LLC

(h) Purpose of Grant or Assistance: To assist with costs associated with

efforts to avoid livestock depredation by wolves on allotment in the

Apache National Forest during the 2015 grazing season.

Name of Organization or Government: Y Canyon Ranch, LLC

(h) Purpose of Grant or Assistance: To assist with costs associated with

efforts to avoid livestock depreciation by wolves on allotment in the

Gila National Forest during 2015 grazing season.

Name of Organization or Government: Flying W. Ranch, Inc.

(h) Purpose of Grant or Assistance: To assist with costs associated with

efforts to avoid livestock depreciation by wolves on allotment in the

Gila National Forest during 2015 grazing season.

Name of Organization or Government: Strayhorse Ranch, LLC

(h) Purpose of Grant or Assistance: To assist with costs associated with

efforts to avoid livestock depredation by wolves on allotment in the

Apache National Forest during the 2014/2015 grazing season.

Name of Organization or Government: Slade Ranch, LLC

(h) Purpose of Grant or Assistance: To assist with costs associated with

efforts to avoid livestock depredation by wolves on allotment in the Blue

Range Wolf Recovery area during 2015 summer/fall grazing season.

Part IV Supplemental Information
(h) Purpose of Grant or Assistance: Re-grant to CSP to develop a
risk-based analysis of impacts from energy development on important
wildlife species and habitats.

Defenders of Wildlife

53-0183181 Page 2

Schedule I (Form 990)

SCHEDULE J   Compensation Inform		Compensation Information	1	OMB No.	1545-00	47	
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		2014			
•	·	Compensated Employees		20	14	ŀ	
Dena	tment of the Treasury	<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</li> <li>Attach to Form 990.</li> </ul>		Open to			
	al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www.irs.gov/fo.		Inspe			
Nan	ne of the organizatio		Employer i			mber	
_		Defenders of Wildlife	53-0	)18318	1		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a		iate box(es) if the organization provided any of the following to or for a person listed in Form	990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or o	, jaka setter set					
	Travel for com						
		cation and gross-up payments					
	Discretionary spending account						
Ŀ	If any of the have-						
D		on line 1a are checked, did the organization follow a written policy regarding payment or		46			
•		provision of all of the expenses described above? If "No," complete Part III to explain		1b			
2	0	n require substantiation prior to reimbursing or allowing expenses incurred by all directors, ers, including the CEO/Executive Director, regarding the items checked in line 1a?		2			
	trustees, and onice			2			
3	Indicate which if a	ny, of the following the filing organization used to establish the compensation of the organization	ation's				
U		ector. Check all that apply. Do not check any boxes for methods used by a related organization					
		ation of the CEO/Executive Director, but explain in Part III.					
	X Compensation						
		compensation consultant X Compensation survey or study					
	X Form 990 of c		committee				
4	During the year, did	any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a re						
а	Receive a severand	ce payment or change-of-control payment?		4a		X	
b	Participate in, or re	ceive payment from, a supplemental nonqualified retirement plan?		4b		X	
с	Participate in, or re	ceive payment from, an equity-based compensation arrangement?		4c		X	
	If "Yes" to any of li	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	Only section 501(	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n				
	contingent on the r						
						X	
b		ration?		5b		X	
		r 5b, describe in Part III.					
6	-	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n				
	contingent on the r					v	
						X	
b		ration?		6b		X	
_		r 6b, describe in Part III.	_				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		_		x	
~		es 5 and 6? If "Yes," describe in Part III		7			
8	•	reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the particle described in Regulations section 52 (1059, 4(a)(2)) If "Vest" described in Regulations				x	
0		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8			
9		d the organization also follow the rebuttable presumption procedure described in					
		n 53.4958-6(c)?			- 000		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	lule J (Forr	11 990	12014	

#### 53-0183181

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title	Γ	(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	compensation	Denents	(B)(i)-(D)	reported as deferred
		compensation	compensation	compensation				in prior Form 990
(1) Jamie Rappaport Clark	(i)	349,376.	25,000.	2,322.	29,803.	4,590.	411,091.	0.
	ii)	4,938.	0.	0.	428.	66.	5,432.	0.
	(i)	210,556.	0.	5,807.	15,071.	1,976.	233,410.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(3) James Stofan	(i)	156,625.	0.	509.	0.	2,334.	159,468.	0.
	ii)	317.	0.	0.	0.	б.		0.
(4) Sajjad Ahrabi	(i)	155,320.	0.	935.	7,362.	6,043.	169,660.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(5) Nina Fascione	(i)	156,520.	0.	745.	11,200.	14,000.	182,465.	0.
	ii)	0.	0.	0.	0.	0.		0.
(6) Mikaela King	(i)	146,361.	0.	270.	9,790.	8,921.		0.
VP, Marketing & Online Communication (	ii) [	5,199.	0.	0.	347.	316.		0.
(7) Robert Dewey	(i)	143,620.	0.	668.	9,829.	8,952.		0.
VP, Government Relations/Ext Affairs (	ii) [	451.	0.	0.	31.	28.		0.
(8) Michael Senatore	(i)	139,816.	0.	434.	10,192.	19,193.	169,635.	0.
VP, Conservation Law & Gen. Counsel (	ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
(	ii)							

#### Part III Supplemental Information

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

432113 10-13-14

SCHE	DULE	Μ
(Form	990)	

# **Noncash Contributions**

OMB No. 1545-0047 2014

Department of the Treasury
Internal Revenue Service

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

**Open To Public** Inspection

Name	of the	organization
------	--------	--------------

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. w; 1A1; f 7 ~

Employer identification number **- -**0100101

	Defenders of	53-0	53-0183181					
Pa	rt I Types of Property							
		<b>(a)</b> Check if applicable		(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property						_	
9	Securities - Publicly traded	Х	25	205,772.	Fair Market	Va	lue	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles	Х	1	5,013.	Fair Market	Va	lue	
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other  ( )							
27	Other  ( )							
28	Other  ( )							
29	Number of Forms 8283 received by the organ	ization durin	g the tax vear for c	ontributions				
	for which the organization completed Form 82							
	0	, ,		······			Yes	No
30a	During the year, did the organization receive b	ov contributio	on any property rep	oorted in Part I. lines 1 throu	ah 28. that it			
	must hold for at least three years from the dat			,	0 /			
	exempt purposes for the entire holding period					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	eauires the review	of any non-standard contrib	utions?	31	x	
	Does the organization hire or use third parties							
	contributions?		-			32a		х
þ	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	n column (c) f	for a type of prope	rty for which column (a) is ch	necked.			

Schedule M (Form 990) (2014)

53-0183181 Page **2** 

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


SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	OMB No. 1545-0047 <b>2014</b> Open to Public Inspection								
Name of the organization		identification number 183181							
Form 990, Part III, Line 1, Description of Organization Mission:									
Defenders protects and restores imperiled species by transforming									
policies and	institutions and promoting innovative soluti	ons ne	eded to						
conserve wildlife and habitat. Informed by scientific, legal and policy									
expertise, hands-on wildlife management experience and effective									
advocacy, Defenders works to improve public attitudes and policies									
toward wildl	toward wildlife and its habitat.								

In FY2013 Defenders implemented a new ten-year strategic plan that defines three main conservation goals that constitute the focal areas of Defenders' mission-driven work. These three conservation goals were translated into new program classifications for budgetary purposes and are shown in the program line items of the FY2015 financial statements. The three conservation goals and related 10-year benchmarks of success are defined in Part III, Lines 4a-4c.

Form 990, Part VI, Section B, line 11:
The Organization's staff sends the draft 990 to all Board members and
requests that any comments or questions be sent directly to the Audit
Committee. The Audit Committee meets with staff and auditors to review
the draft 990 and address any Board member comments prior to submission of
the 990 to the IRS.

Form 990, Part VI, Section B, Line 12c:

 

 The Organization annually requests completion of the conflict of interest

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2014)

 432211 08-27-14
 08-27-14

Name of the organization									Employer identification number		
Defenders of Wildlife								53-0183181			
form.	The	Board	of	Directors	will	take	action,	as	deemed	necessary,	to

Form 990, Part VI, Section B, Line 15a:

For the President's salary, Human Resources independently collects salary survey information from other not-for-profit's as well as other Green groups and compiles findings. These findings are provided to the Organization's Executive Committee that then holds a closed door conference to establish the president's salary.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990: AK,AL,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,LA,MA,MD,ME,MI,MN,MS,MO,NH,NJ,NM,NY NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

Form 990, Part VI, Section C, Line 19: The Organization's governing documents, conflict of interest policy, and financial statements are available to the public upon request.

Form 990, Part XII, line 2c:

The Organization's Audit Committee assumes responsibility for oversight

of the audit. This process is consistent with previous years.

SCHEDULE R (Form 990)		Related Organization	Related Organizations and Unrelated Partnerships lete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.							
Department	of the Treesury	► At	Attach to Form 990. mation about Schedule R (Form 990) and its instructions is at <u>www.jrs.gov/form990.</u>							
	the organization Defenders of			u www.irs.gov/forn	1990.		Inspection mployer identification number 53-0183181			
Part I	Identification of Disregarded Entities Com									
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state c foreign country)	or Total inco	(e) End-of-year assets		ets Direct cc ent		g	
	Identification of Related Tax-Exempt Orga	mizations Complete if the organization	answered "Yes" on Form 990	) Part IV line 34 h		or more r	related tax.ex	emot		
Part II	organizations during the tax year.	-		, 1 art 10, inte 04 b						
	<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section		(f) ct controlling entity	cont	<b>g)</b> 512(b)(13) trolled tity?	
					501(c)(3))			Yes	No	
	rs of Wildlife Action Fund - 744, 1130 17th Street, NW,									
	ton, DC 20036	See Part VII	District of Columbia	501(c)(4)					x	

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

Schedule R (Form 990) 2014

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(i	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule	Gener mana partr	<sup>Il or</sup> Percentage <sup>ing</sup> ownership er?
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	Sec 512( cont ent	(i) ction (b)(13) trolled tity?
		country)		or tracty		uccette		Yes	No

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

lote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	es No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	1	X
<b>b</b> Gift, grant, or capital contribution to related organization(s)			X
c Gift, grant, or capital contribution from related organization(s)	1c	;	X
d Loans or loan guarantees to or for related organization(s)		1	2
e Loans or loan guarantees by related organization(s)		•	X
f Dividends from related organization(s)			X
g Sale of assets to related organization(s)	1ç	1	2
h Purchase of assets from related organization(s)		n	2
i Exchange of assets with related organization(s)			2
j Lease of facilities, equipment, or other assets to related organization(s)	1j	i	2
k Lease of facilities, equipment, or other assets from related organization(s)	1k		2
Performance of services or membership or fundraising solicitations for related organization(s)			2
m Performance of services or membership or fundraising solicitations by related organization(s)	1n	n	2
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		n X	
o Sharing of paid employees with related organization(s)		, X	:
p Reimbursement paid to related organization(s) for expenses		,	2
<b>q</b> Reimbursement paid by related organization(s) for expenses		1	Σ
r Other transfer of cash or property to related organization(s)	1r		2
s Other transfer of cash or property from related organization(s)		;	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction			
	(-1)		

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) Defenders of Wildlife Action Fund	N	1,675.	Timesheet allocation
(2) Defenders of Wildlife Action Fund	0	13,041.	Timesheet allocation
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
_(6)	57		0.h.c.t.d. D (5

## Schedule R (Form 990) 2014 Defenders of Wildlife

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

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

	(1)		( n			(0)	()			(1)	0	(1)								
<b>(a)</b> Name, address, and EIN	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile	(d)	(€ Are partner 501(c org	all	<b>(f)</b> Share of	<b>(g)</b> Share of	(I Diepr	ר)	(i) Code V URI	(j) General (	(k)								
of entity	Primary activity	(state or foreign	(related, unrelated,	partner 501 (d	's sec. c)(3)	total	end-of-year	tior	nate	amount in box 20	managin									
or entity		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	org	s.? ′	income	assets	alloca	tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?									
		country)	sections 512-514)	Yes	No	Income	455615	Yes	No	(FORM 1065)	Yes NO	·								
								<u> </u>	<u> </u>			<b> </b>								

Schedule R (Form 990) 2014

Schedule R (Form 990) 2014 $ m D$	)	Ę
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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

Schedule R, Part II, Column (b) - Primary Activity

# Protecting wildlife, natural habitats and the environment through

### education and advocacy.

(Rev. January 2014)

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

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

1

Department of the Treasury Internal Revenue Service

•	f you are filing for an	Automatic 3-Month Extension, complete	only Part I and check this box
---	-------------------------	---------------------------------------	--------------------------------

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

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

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

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

Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) o				
print	Defenders of Wildlife	53-0183181				
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. 1130 17th Street, NW	Social security number (SSN)				
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Washington, DC 20036					

Enter the Return code for the return that this application is for (file a separate application for each return	)	0

Application	Return	Application			Return	
Is For	Code	Is For Co				
Form 990 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990-BL	02	Form 1041-A			08	
Form 4720 (individual)	03	Form 4720 (other than individual)			09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above)	06	Form 8870			12	
• The books are in the care of ► 1130 17th Stre				6		
Telephone No. ►       202-682-9400       Fax No. ►       202-682-1331         • If the organization does not have an office or place of business in the United States, check this box       ►       □         • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)       If this is for the whole group, check this box         • If it is for part of the group, check this box       ►       and attach a list with the names and EINs of all members the extension is for.						
1       I request an automatic 3-month (6 months for a corporation May 15, 2016 , to file the exemption is for the organization's return for:         ▶ calendar year or         ▶ X tax year beginning OCT 1, 2014	ipt organiza			The extension		
2 If the tax year entered in line 1 is for less than 12 months, Change in accounting period	check reas	on: Initial return Fina	ıl retur	'n		
3a If this application is for Forms 990-BL, 990-PF, 990-T, 472	0, or 6069,	enter the tentative tax, less any				
nonrefundable credits. See instructions.			3a	\$	0.	
h If this application is for Forms 990.PE 990.T 4720 or 606	0 ontor an	v refundable credits and				

b	If this application is for Forms 990-PF, 990-1, 4720, or 6069, enter any refundable credits and		
	estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required		

by using EFTPS (Electronic Federal Tax Payment System). See instructions.

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

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Product: Exempt	Category:	IRS Center: Ogden
Name: Defenders of Wildlife		e-Postmark: 2/15/2016 12:00:00 AM
FEIN: *****3181		Notification:
Fiscal Year	Fiscal Year	eSigned:
Begin Date: 10/1/2014	End Date: 9/30/2015	<ul> <li>Boundard (2008) 10 - 1 - 1 - 1 - 1</li> </ul>

Date	Type Of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
2/17/2016	Upload Started				
2/17/2016	Ready to Release by Customer				
2/17/2016	Released for Transmission - Validation in Progress			739466	
2/17/2016	Ready to transmit - Validation Complete				
2/17/2016	Transmitted to FD	5410612016048032fe00			
2/17/2016	Accepted by FD on 2/17/2016				Ì