

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2009, or tax year beginning SEP 1, 2009, and ending AUG 31, 2010

For use with Forms **990, 990-EZ, 990-PF, 1120-POL, and 8868**

2009

Department of the Treasury
Internal Revenue Service

▶ See instructions.

Name of exempt organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

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

Check the box for the return for which you are using this Form 8453-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 for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>98426951</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	

Part II Declaration of Officer

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH 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.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2009 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) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here ▶ Dulce Gomez-Zamolo | 2/14/11 ▶ TREASURER
Signature of officer Date Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-file (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature ▶ <u>Z. M. Smith, CPA</u>	Date <u>2/14/2011</u>	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN <u>P00001737</u>
	Firm's name (or yours if self-employed), address, and ZIP code ▶ <u>BDO USA, LLP</u> <u>7101 WISCONSIN AVE., SUITE 800</u> <u>BETHESDA, MD 20814-4827</u>	EIN <u>13-5381590</u>	Phone no. <u>(301) 654-4900</u>		

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only	Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code ▶	EIN	Phone no.	

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2009** calendar year, or tax year beginning **SEP 1, 2009** and ending **AUG 31, 2010**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NATIONAL WILDLIFE FEDERATION Doing Business As		D Employer identification number 53-0204616
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 11100 WILDLIFE CENTER DRIVE		E Telephone number (703) 438-6000
		City or town, state or country, and ZIP + 4 RESTON, VA 20190-5362		G Gross receipts \$ 101,612,612.
F Name and address of principal officer: LARRY J. SCHWEIGER SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ WWW.NWF.ORG				
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1939	
M State of legal domicile: DC				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>NWF'S MISSION IS TO INSPIRE AMERICANS TO PROTECT WILDLIFE FOR OUR CHILDREN'S FUTURE.</u>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	31	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	31	
	5	Total number of employees (Part V, line 2a)	525	
	6	Total number of volunteers (estimate if necessary)	3085	
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	1,214,892.	
b	Net unrelated business taxable income from Form 990-T, line 34	77,478.		
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	69,409,609.	75,868,139.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,134,039.	10,324,026.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-198,462.	94,710.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,588,337.	12,140,076.
	12		91,933,523.	98,426,951.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,212,295.	4,007,437.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	28,676,305.	30,552,678.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	2,624,143.	2,400,937.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,507,436.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	56,443,538.	57,057,595.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	90,956,281.	94,018,647.	
19	Revenue less expenses. Subtract line 18 from line 12	977,242.	4,408,304.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	64,813,524.	64,121,805.
	22	Net assets or fund balances. Subtract line 21 from line 20	87,937,109.	84,891,779.
22		-23,123,585.	-20,769,974.	

Part II Signature Block

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

Sign Here	Signature of officer	Date		
	DULCE M. GOMEZ-ZORMELO, TREASURER			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN ▶	Phone no. ▶ (301) 654-4900
BDO USA, LLP				
7101 WISCONSIN AVE., SUITE 800				
BETHESDA, MD 20814-4827				

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION NATIONAL WILDLIFE FEDERATION'S MISSION IS TO INSPIRE AMERICANS TO PROTECT WILDLIFE FOR OUR CHILDREN'S FUTURE. NWF ACCOMPLISHES ITS MISSION BY PROVIDING ANSWERS TO THE THREE BIGGEST THREATS FACING OUR ENVIRONMENT TODAY: (CONTINUED ON SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No (X) No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No (X) No If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 29,152,762. including grants of \$ 3,911,246.) (Revenue \$ 742,018.) CONSERVATION ADVOCACY PROGRAMS EXPAND NWF'S WORK ON SAFEGUARDING WILDLIFE AND HABITAT, FINDING SOLUTIONS TO CLIMATE CHANGE, AND ENGAGING THE PUBLIC ON ISSUES RELATING TO WILDLIFE CONSERVATION POLICY AND LEGISLATION. SAFEGUARDING WILDLIFE MEANS PROTECTING AND DEFENDING WILDLIFE AND THE WILD PLACES THAT WILDLIFE NEEDS TO SURVIVE AND RESTORING THE HEALTH OF OUR NATURAL HABITATS AND ECOSYSTEMS. THROUGH WORK WITH OUR AFFILIATES AND PARTNERS, NWF HAS SECURED AND CLOSED, THROUGH OUR ALLOTMENT RETIREMENT PROGRAM, MORE THAN 500,000 ACRES OF PUBLIC LAND TO GRAZING IN THE GREATER YELLOWSTONE ECOSYSTEM, WHICH WILL RESTORE AND PROTECT PRIME WILDLIFE HABITAT. THROUGH OUR NATIONAL POLICY ACTION IN THIS AREA, NWF SECURED AN EPA FORMAL VETO ON THE CLEAN WATER ACT PERMIT FOR THE YAZOO PUMPS PROJECT IN MISSISSIPPI, (CON'T ON SCHD O)

4b (Code:) (Expenses \$ 25,333,973. including grants of \$ 96,191.) (Revenue \$ 10,106,116.) EDUCATION OUTREACH AND PUBLICATIONS PROGRAM RECONNECTS CHILDREN AND ADULTS WITH NATURE THROUGH SUCH PROGRAMS AS BE OUT THERE, CERTIFIED WILDLIFE HABITATS, AND ECO SCHOOLS USA, AND THROUGH NATIONAL WILDLIFE, RANGER RICK, YOUR BIG BACKYARD, WILD ANIMAL BABY, AND JUST FOR FUN PUBLICATIONS. EACH YEAR THE FEDERATION REACHES ONE MILLION SCHOOL CHILDREN AND TWO MILLION YOUNG READERS THROUGH ITS EDUCATIONAL PROGRAMS. BE OUT THERE PROGRAM ENCOURAGES AMERICANS TO GET OUTSIDE AND ENJOY THE NATURAL ENVIRONMENT AND PROVIDES A NUMBER OF USEFUL TOOLS AND ACTIVITIES FOR FAMILIES THAT MAKE IT EASY TO GET OUTSIDE. THIS INCLUDES HIKE & SEEK, WILDLIFE WATCH AND NATURE FIND. HIKE & SEEK, ONE OF OUR SIGNATURE EVENTS BROUGHT 520 EXPLORERS OUTSIDE (CONTINUED ON SCHED O)

4c (Code:) (Expenses \$ 13,665,939. including grants of \$) (Revenue \$ 3,946,222.) MEMBERSHIP EDUCATION PROGRAMS MAINTAIN AN ACTIVE, ENGAGED AND INFORMED MEMBERSHIP PROVIDING SUPPORTERS WITH THE INFORMATION AND INSPIRATION TO MAKE A DIFFERENCE IN THEIR OWN BACKYARDS, THEIR COMMUNITIES, AND ACROSS THE COUNTRY. NWF REACHES MILLIONS OF SUPPORTERS ON A MONTHLY BASIS TO COMMUNICATE THE MOST PRESSING NEEDS FACING THE ENVIRONMENT TODAY - FROM PEOPLE BECOMING MORE DISCONNECTED FROM NATURE TO LOSS OF HABITAT AND THE THREAT OF GLOBAL WARMING. THROUGH SUCH PUBLICATIONS AS NATIONAL WILDLIFE MAGAZINE, THE NWF WEBSITE, AND OTHER SOURCES OF INFORMATION, NWF IS EDUCATING OUR MEMBERSHIP BASE ON HOW NWF IS WORKING TO PROTECT WILDLIFE AND HABITAT. THROUGH NATIONAL WILDLIFE MAGAZINE OVER 650,000 PEOPLE CAN READ MONTHLY ABOUT OUR CEO'S INSIGHT AND ADVICE, THE LATEST ENVIRONMENTAL NEWS AND SUCCESS STORIES FROM NWF AND AROUND THE NATION.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 7,517,526. including grants of \$) (Revenue \$ 8,886,963.)

4e Total program service expenses \$ 75,670,200.

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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 "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	389		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	525		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
4b	If "Yes," enter the name of the foreign country: <u>NETHERLANDS ANTILLES, CAYMAN ISLANDS</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Form 990 (2009)

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.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body; 1b Enter the number of voting members that are independent; 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?; 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?; 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a material diversion of the organization's assets?; 6 Does the organization have members or stockholders?; 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?; 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates?; 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?; 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?; 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13; 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done; 13 Does the organization have a written whistleblower policy?; 14 Does the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official; b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. [X] Own website [] Another's website [X] Upon request; 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.; 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: DULCE GOMEZ-ZORMELO - 703-438-6000 11100 WILDLIFE CENTER DRIVE, RESTON, VA 20190-5362

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

- List all of the organization's **current** key employees. See instructions for definition of "key employee."

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CRAIG THOMPSON CHAIR	10.00	X						0.	0.	0.
THOMAS GONZALES IMMEDIATE PAST CHAIR	10.00	X						0.	0.	0.
STEPHEN K. ALLINGER DIRECTOR	3.00	X						0.	0.	0.
DAVID CARRUTH DIRECTOR	3.00	X						0.	0.	0.
KATHLEEN HADLEY DIRECTOR	3.00	X						0.	0.	0.
GREGOR BAILAR DIRECTOR	3.00	X						0.	0.	0.
PAUL BEAUDETTE DIRECTOR	3.00	X						0.	0.	0.
VIRGINIA BROCK DIRECTOR	3.00	X						0.	0.	0.
CLARK BULLARD DIRECTOR	3.00	X						0.	0.	0.
SHELLEY COHEN DIRECTOR	3.00	X						0.	0.	0.
LYVIER CONSS DIRECTOR	3.00	X						0.	0.	0.
JOHN THOMAS GRANT, JR. DIRECTOR	3.00	X						0.	0.	0.
ELIZABETH HAMILTON DIRECTOR	3.00	X						0.	0.	0.
DAVID L. HARGETT DIRECTOR	3.00	X						0.	0.	0.
MARK W. HECKERT DIRECTOR	3.00	X						0.	0.	0.
MASON BRYANT HOWARD DIRECTOR	3.00	X						0.	0.	0.
JERRY LITTLE DIRECTOR	3.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GERALD MERAL DIRECTOR	3.00	X						0.	0.	0.
GENE T. OGLESBY DIRECTOR	3.00	X						0.	0.	0.
LOIS QUAM DIRECTOR	3.00	X						0.	0.	0.
PAUL ROSE DIRECTOR	3.00	X						0.	0.	0.
KENT SALAZAR DIRECTOR	3.00	X						0.	0.	0.
LESLIE SHAD DIRECTOR	3.00	X						0.	0.	0.
GREGORY SMITH DIRECTOR	3.00	X						0.	0.	0.
DEBORAH SPALDING DIRECTOR	3.00	X						0.	0.	0.
CHRISTINE P. THOMPSON DIRECTOR	3.00	X						0.	0.	0.
LISE VAN SUSTEREN DIRECTOR	3.00	X						0.	0.	0.
1b Total								2,546,864.	0.	324,893.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **40**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ARTCO 1 STATIONARY PLACE, REXBURG, ID 83441	FULFILMENT SERVICES	2,433,233.
MERKLE, INC, 7001 COLUMBIA GATEWAY DRIVE, COLUMBIA, MD 21046	DATABASE DEV & MGMT; GRAPHICS & DESIGN	1,259,890.
PARADYZE MATERA CO, INC., 5 HANOVER SQUARE, 6TH FLOOR, NEW YORK, NY 10004	LIST RENTAL CONSULTING	1,050,505.
CDS GLOBAL 1901 BELL AVENUE, DES MOINES, IA 50315	FULFILMENT SERVICES	1,037,245.
USA 800, INC, 9808 EAST 66TH TERRACE, KANSAS CITY, MO 64133	FULFILMENT AND CONSULTING SERVICES	760,575.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **25**

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

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a	272,615.				
	b	Membership dues	1b	9,671,908.				
	c	Fundraising events	1c	144,221.				
	d	Related organizations	1d	5,215,000.				
	e	Government grants (contributions)	1e	352,211.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	60,212,184.				
	g	Noncash contributions included in lines 1a-1f: \$		185,225.				
	h	Total. Add lines 1a-1f			75,868,139.			
	Program Service Revenue	2 a	SUBSCRIPTION REVENUE	Business Code	9,569,171.	9,569,171.		
b		LITIGATION FEES	900099	422,506.	422,506.			
c		CONTRACTUAL/CONSULTING	900099	195,419.	195,419.			
d		REGISTRATION FEES	900099	80,556.	80,556.			
e		AFFILIATE FEE REVENUE	900099	1,702.	1,702.			
f		All other program service revenue	900099	54,672.	54,672.			
g		Total. Add lines 2a-2f			10,324,026.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)		85,003.			85,003.
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		4,069,843.		2,520.	4,067,323.	
	6 a	Gross Rents	(i) Real	(ii) Personal				
		b	Less: rental expenses		1,026,799.			
		c	Rental income or (loss)		411,625.			
		d	Net rental income or (loss)		615,174.		603,630.	11,544.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less: cost or other basis and sales expenses		657,525.	9,673.		
		c	Gain or (loss)		623,221.	34,270.		
		d	Net gain or (loss)		34,304.	-24,597.		9,707.
	8 a	Gross income from fundraising events (not including \$ 144,221. of contributions reported on line 1c). See Part IV, line 18	a		35,102.			
		b	Less: direct expenses	b	204,310.			
		c	Net income or (loss) from fundraising events			-169,208.		-169,208.
9 a	Gross income from gaming activities. See Part IV, line 19	a						
	b	Less: direct expenses	b					
	c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	a		8,608,068.				
	b	Less: cost of goods sold	b	1,912,235.				
	c	Net income or (loss) from sales of inventory			6,695,833.	6,695,833.		
Miscellaneous Revenue		Business Code						
11 a	ADVERTISING	511120		608,742.		608,742.		
b	HONORARIA	900099		35,539.	35,539.			
c								
d	All other revenue	900099		284,153.	284,153.			
e	Total. Add lines 11a-11d			928,434.				
12	Total revenue. See instructions.			98,426,951.	17,339,551.	1,214,892.	4,004,369.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	3,804,137.	3,804,137.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	203,300.	203,300.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,928,877.	2,318,206.	321,298.	289,373.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	21,301,412.	16,860,069.	2,336,764.	2,104,579.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,152,177.	911,948.	126,394.	113,835.
9 Other employee benefits	3,139,739.	2,485,101.	344,431.	310,207.
10 Payroll taxes	2,030,473.	1,607,119.	222,743.	200,611.
11 Fees for services (non-employees):				
a Management				
b Legal	120,031.	99,773.	5,070.	15,188.
c Accounting	118,070.	99,049.	4,203.	14,818.
d Lobbying	80,279.	67,346.	2,858.	10,075.
e Professional fundraising services. See Part IV, line 17	2,400,937.			2,400,937.
f Investment management fees	95,512.	75,311.	7,565.	12,636.
g Other	13,243,940.	12,740,640.	573,003.	-69,703.
12 Advertising and promotion	452,182.	356,545.	35,813.	59,824.
13 Office expenses	19,832,677.	15,293,314.	1,479,370.	3,059,993.
14 Information technology	1,563,037.	1,231,824.	126,208.	205,005.
15 Royalties	716,404.	561,446.	54,518.	100,440.
16 Occupancy	1,267,306.	973,054.	200,711.	93,541.
17 Travel	2,047,661.	1,700,172.	146,049.	201,440.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	942,922.	752,373.	71,354.	119,195.
20 Interest	910,318.	717,786.	72,097.	120,435.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,000,820.	760,124.	190,356.	50,340.
23 Insurance	328,962.	259,386.	26,054.	43,522.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a MAJOR PROGRAM MATERIALS	11,159,837.	9,286,060.	251,707.	1,622,070.
b LIST RENTAL SERVICES	1,559,081.	1,221,851.	118,646.	218,584.
c TEXT/EDITORIAL	412,052.	334,276.	23,029.	54,747.
d A/V PRODUCTION COSTS	36,934.	28,945.	2,811.	5,178.
e AWARDS	25,609.	20,193.	2,028.	3,388.
f All other expenses	1,143,961.	900,852.	95,931.	147,178.
25 Total functional expenses. Add lines 1 through 24f	94,018,647.	75,670,200.	6,841,011.	11,507,436.
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...	21,396,864.	11,331,416.	2,505,396.	7,560,052.

Part X Balance Sheet

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing		1		
	2 Savings and temporary cash investments	4,514,957.	2	2,457,497.	
	3 Pledges and grants receivable, net	16,230,422.	3	15,779,979.	
	4 Accounts receivable, net	2,067,772.	4	1,620,324.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
	7 Notes and loans receivable, net	457,972.	7		
	8 Inventories for sale or use	34,834.	8	887,187.	
	9 Prepaid expenses and deferred charges	4,193,289.	9	2,866,909.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 36,457,420.			
	b Less: accumulated depreciation	10b 13,510,798.	23,785,643.	10c	22,946,622.
	11 Investments - publicly traded securities	870,794.	11	867,990.	
	12 Investments - other securities. See Part IV, line 11	1,245,803.	12	5,772,402.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	11,412,038.	15	10,922,895.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	64,813,524.	16	64,121,805.		
Liabilities	17 Accounts payable and accrued expenses	17,215,949.	17	18,060,085.	
	18 Grants payable		18		
	19 Deferred revenue	12,334,824.	19	11,990,754.	
	20 Tax-exempt bond liabilities	16,384,177.	20	15,935,554.	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties	10,529,914.	23	7,424,134.	
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities. Complete Part X of Schedule D	31,472,245.	25	31,481,252.	
	26 Total liabilities. Add lines 17 through 25	87,937,109.	26	84,891,779.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	-54,986,706.	27	-54,031,207.	
	28 Temporarily restricted net assets	23,625,724.	28	24,994,704.	
	29 Permanently restricted net assets	8,237,397.	29	8,266,529.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	-23,123,585.	33	-20,769,974.	
34 Total liabilities and net assets/fund balances	64,813,524.	34	64,121,805.		

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
2d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form **990** (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2009

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	60,139,370.	67,233,769.	78,729,510.	69,409,609.	75,868,139.	351,380,397.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	60,139,370.	67,233,769.	78,729,510.	69,409,609.	75,868,139.	351,380,397.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						351,380,397.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	60,139,370.	67,233,769.	78,729,510.	69,409,609.	75,868,139.	351,380,397.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,388,246.	4,525,502.	3,932,499.	3,465,112.	3,983,118.	19,294,477.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	14,440.	16,918.		455,562.	606,150.	1,093,070.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	82,215.	396,124.	440,312.	125,145.	319,691.	1,363,487.
11 Total support. Add lines 7 through 10						373,131,431.
12 Gross receipts from related activities, etc. (see instructions)					12	92,552,345.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	94.17 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	94.36 %

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support (Add lines 9, 10c, 11, and 12).

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2008 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2008 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2009

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

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

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

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/> <hr/>	\$ 5,215,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	<hr/> <hr/> <hr/> <hr/>	\$ 2,310,044.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	<hr/> <hr/> <hr/> <hr/>	\$ 2,772,498.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
---	---

Part II Noncash Property (see instructions)

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

Name of organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2009

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p align="center">NATIONAL WILDLIFE FEDERATION</p>	Employer identification number <p align="center">53-0204616</p>
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009 LHA

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group.
 B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 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:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?	X		1,000.
d Mailings to members, legislators, or the public?	X		156,996.
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?	X		371,494.
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		336,163.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		27,699.
i Other activities? If "Yes," describe in Part IV		X	
j Total. Add lines 1c through 1i			893,352.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	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 carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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 funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	8,625,334.	7,266,196.			
b Contributions	594,937.	1,425,021.			
c Net investment earnings, gains, and losses	44,331.				
d Grants or scholarships					
e Other expenditures for facilities and programs	44,877.	65,883.			
f Administrative expenses					
g End of year balance	9,219,725.	8,625,334.			

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment 43.90 %
 - b Permanent endowment 54.43 %
 - c Term endowment 1.67 %

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-------------------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,455,553.		4,455,553.
b Buildings		16,086,219.	3,434,339.	12,651,880.
c Leasehold improvements		4,861,723.	1,211,918.	3,649,805.
d Equipment		10,324,325.	8,864,541.	1,459,784.
e Other		729,600.		729,600.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				22,946,622.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
INSTITUTIONAL COMMINGLED FUNDS	5,772,402.	END-OF-YEAR MARKET VALUE
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	5,772,402.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

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

(a) Description	(b) Book value
CHARITABLE GIFT ANNUITIES	6,597,715.
INTEREST IN PERPETUAL TRUSTS	3,248,168.
CHARITABLE GIFT REMAINDER TRUSTS	182,096.
UNAMORTIZED BOND AND LOAN ISSUE COSTS	511,596.
DEPOSITS	169,904.
OTHER DONATED ASSETS	213,416.
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	10,922,895.

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

1. (a) Description of liability	(b) Amount	
Federal income taxes		
ANNUITY AND OTHER RESERVES	4,536,134.	
ACCRUED PENSION EXPENSE	15,767,822.	
POSTRETIREMENT BENEFITS RESERVE	11,177,000.	
UNCLAIMED PROPERTY LIABILITY	296.	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	31,481,252.	

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	98,426,951.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	94,018,647.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	4,408,304.
4	Net unrealized gains (losses) on investments	4	-124,889.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-2,801,204.
9	Total adjustments (net). Add lines 4 through 8	9	-2,926,093.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	1,482,211.

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

1	Total revenue, gains, and other support per audited financial statements	1	99,496,458.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-124,889.
b	Donated services and use of facilities	2b	1,209,137.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	5,200,259.
e	Add lines 2a through 2d	2e	6,284,507.
3	Subtract line 2e from line 1	3	93,211,951.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	5,215,000.
c	Add lines 4a and 4b	4c	5,215,000.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	98,426,951.

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

1	Total expenses and losses per audited financial statements	1	98,014,246.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,209,137.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	3,988,578.
e	Add lines 2a through 2d	2e	5,197,715.
3	Subtract line 2e from line 1	3	92,816,531.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	1,202,116.
c	Add lines 4a and 4b	4c	1,202,116.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	94,018,647.

Part XIV Supplemental Information

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

PART V, LINE 4: ENDOWMENT FUNDS ABOVE SUPPORT NATIONAL WILDLIFE

FEDERATION'S CONSERVATION EDUCATION PROGRAMS AND ARE HELD IN ACCORDANCE

WITH EACH DONOR'S STIPULATIONS AND WISHES CONCERNING VARIOUS ENVIRONMENTAL

ISSUES. THE AMOUNT ABOVE ALSO CONTAINS INTERNALLY DESIGNATED FUNDS.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

CHANGE IN SPLIT INTEREST AGREEMENTS: -858053.

LOSS ON PENSION INVESTMENT: -1069032.

Part XIV Supplemental Information (continued)

LOSS ON DISPOSAL OF FIXED ASSETS: -2719.

CHANGE IN NET ASSETS, NATIONAL WILDLIFE FEDERATION ENDOWMENT,

INC.: -871400.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC. REVENUE: 3542861.

RENTAL EXPENSES: 411625.

GAIN ON SALE OF FIXED ASSETS: -10000.

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS: -858053.

LOSS ON DISPOSAL OF FIXED ASSETS: -2719.

SPECIAL EVENT EXPENSE: 204310.

COST OF GOODS SOLD: 1912235.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

TRANSFER FROM NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC.: 5215000.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC. EXPENSES & LOSSES,

AUDITED F/S: 401377.

SPECIAL EVENT EXPENSE: 204310.

COST OF GOODS SOLD: 1912235.

RENTAL EXPENSES: 411625.

GAIN ON SALE OF FIXED ASSETS, RECLASSIFIED TO EXPENSE (& ROUNDED)

ON AFS: -10000.

PENSION AND POSTRETIREMENT EXPENSE: 1069031.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

TRANSFER TO NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC.: 1202116.

Part XIV Supplemental Information (continued)

SCHEDULE D, PART XI

ALTHOUGH THE ORGANIZATION IS NOT REQUIRED TO COMPLETE PARTS XI, XII AND
 XIV BECAUSE IT IS PART OF A CONSOLIDATED FINANCIAL STATEMENT AUDIT AND NOT
 A SEPARATE AUDIT, IT HAS ELECTED TO INCLUDE THESE RECONCILIATIONS BASED ON
 THE CONSOLIDATED TOTALS. THEREFORE, THE INCREASE IN NET ASSETS FOR THE
 YEAR, PER FINANCIAL STATEMENTS, ON LINE 10 (\$1,482,211) DOES NOT AGREE
 WITH THE DIFFERENCE BETWEEN THE BEGINNING AND ENDING NET ASSETS ON FORM
 990, PART I, LINE 22 (\$2,353,611). THERE IS A DIFFERENCE OF \$871,400 WHICH
 REPRESENTS REVENUE AND EXPENDITURES OF RELATED ENTITIES INCLUDED IN THE
 CONSOLIDATED FINANCIAL STATEMENTS.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

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

OMB No. 1545-0047

2009

**Open To Public
Inspection**

Name of the organization **NATIONAL WILDLIFE FEDERATION** Employer identification number **53-0204616**

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SHARE GROUP, INC.	TELEMARKETING		X	424,839.	367,229.	57,610.
DONOR SERVICES GROUP, LLC	TELEMARKETING		X	313,103.	528,068.	-214,965.
HARRIS DIRECT	TELEMARKETING		X	107,948.	146,325.	-38,377.
MERKLE INC.	DIRECT MAIL CONSULTANTS		X	0.	213,600.	-213,600.
PARADYZE MATERA CO, INC.	DIRECT MAIL CONSULTANTS		X	0.	1,050,505.	-1,050,505.
EVENT 360	EVENT CONCEPT DEVELOPMENT		X	0.	95,210.	-95,210.
Total				845,890.	2,400,937.	-1,555,047.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.
AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MO, MS, NH, NJ, NM, NY, NC
ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WA, WI, DC, HI

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		CONSERVATION AWARDS DINNER (event type)	GREAT AMERICAN BACKYARD CAMPOUT (event type)	4 (total number)	
Revenue	1 Gross receipts	155,361.	9,334.	14,628.	179,323.
	2 Less: Charitable contributions	129,918.	2,215.	12,088.	144,221.
	3 Gross income (line 1 minus line 2)	25,443.	7,119.	2,540.	35,102.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	81,869.		26,583.	108,452.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	17,392.	38,450.	40,016.	95,858.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(204,310)
	11 Net income summary. Combine line 3, column (d), and line 10				-169,208.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				(_____)	
8 Net gaming income summary. Combine line 1, column (d), and line 7					

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," explain: _____		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in:

- a** The organization's facility

13a		%
13b		%
- b** An outside facility

13b		%
------------	--	---

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? **15a**

- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____ .

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

- Director/officer 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? **17a**

- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization **NATIONAL WILDLIFE FEDERATION** Employer identification number **53-0204616**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA TREASURE FOREST ASSOCIATION - P.O. BOX 189 - CHUNCHULA, AL 36521	631051039	501C3	41,480.	0.			CONSERVATION ADVOCACY
ALLIANCE FOR THE GREAT LAKES 17 NORTH STATE STREET, STE 1390 CHICAGO, IL 60602	237104524	501C3	7,500.	0.			CONSERVATION ADVOCACY
ASSOCIATION OF NORTHWEST STEELHEADERS - P.O. BOX 22065 - MILWAUKIE, OR 97269	911031100	501C3	22,746.	0.			CONSERVATION ADVOCACY
AUDUBON NEW YORK 200 TRILLIUM LN ALBANY, NY 12203	131624102	501C3	20,000.	0.			CONSERVATION ADVOCACY
CITIZENS CAMPAIGN FOR ENVN 225-A MAIN ST FARMINGDALE, NY 11735	112983418	501C3	18,500.	0.			CONSERVATION ADVOCACY
CLEAN WATER ACTION 308 EAST HENNAPIN AVE MINNEAPOLIS, MN 55414	237128611	501C4	20,000.	0.			CONSERVATION ADVOCACY

- 2** Enter total number of section 501(c)(3) and government organizations **44.**
- 3** Enter total number of other organizations **3.**

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CONSERVATION ASSISTANCE	3	203,300.	0.		

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

SCHEDULE I, PART I, LINE 2: THE NATIONAL WILDLIFE FEDERATION (NWF) PROVIDES

ORGANIZATIONAL SUPPORT THROUGHOUT THE YEAR IN THE FORM OF GRANTS AND

AWARDS. THIS SUPPORT IS GIVEN TO BOTH ORGANIZATIONS AND INDIVIDUALS WHOSE

WORK WILL FURTHER BENEFIT THE MISSION OF NWF'S CONSERVATION AND EDUCATION

PROGRAMS. FOR GRANTS THAT ARE SUB-AWARDS AND WHERE THE ORIGINAL FUNDS WERE

GRANTED TO NWF, WE REQUIRE THE AWARDEE TO REPORT TO NWF ON HOW THE FUNDS

ARE USED. IN CASES WHERE IT IS NWF FUNDS THAT ARE GIVEN OUT AS A GRANT,

THERE ARE TWO TYPES:

1.) IF THE GRANT IS FOR ORGANIZATIONAL SUPPORT TO AN AFFILIATE, NWF DOES

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I 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) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEAN WISCONSIN 122 STATE ST., SUITE 200 MADISON, WI 53703	391413448	501C3	12,000.	0.			CONSERVATION ADVOCACY
COALITION TO RESTORE COASTAL LOUISIANA - 746 MAIN STREET, STE B101 - BATON ROUGE, LA 70802	721115589	501C3	6,000.	0.			CONSERVATION ADVOCACY
CONSERVATION COUNCIL OF HAWAII P.O. BOX 2923 HONOLULU, HI 96802	990199211	501C3	8,497.	0.			CONSERVATION ADVOCACY
CONSERVATION FEDERATION OF MISSOURI - 728 WEST MAIN STREET - JEFFERSON CITY, MO 65101	440606356	501C3	7,974.	0.			CONSERVATION ADVOCACY
CRAZY MOUNTAIN CATTLE COMPANY 696 NORTH YELLOWSTONE TRAIL BIG TIMBER, MT 59011	810474212		50,000.	0.			CONSERVATION ADVOCACY
DELAWARE NATURE SOCIETY 3507 BARLEY MILL RD HOCKESSIN, DE 19707	516018321	501C3	16,259.	0.			CONSERVATION ADVOCACY
DUCKS UNLIMITED 1301 PENNSYLVANIA AVENUE NW, STE 40 WASHINGTON, DC 20004	135643799	501C3	54,000.	0.			CONSERVATION ADVOCACY
EARTH CONSERVATION CORPS 2000 HALF STREET WASHINGTON, DC 20024	521683270	501C3	10,031.	0.			CONSERVATION ADVOCACY

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

Schedule I-1 (Form 990) 2009

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I 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) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ENVIRONMENTAL ADVOCATES OF NEW YORK - 353 HAMILTON ST - ALBANY, NY 12210	222360736	501C3	42,500.	0.			CONSERVATION ADVOCACY
FLORIDA WILDLIFE FEDEDERATION P.O. BOX 6870 TALLAHASSEE, FL 32314	591398265	501C3	84,727.	0.			CONSERVATION ADVOCACY
INDIANA WILDLIFE FEDERATION 4715 W. 106TH ST ZIONSVILLE, IN 46077	351058426	501C3	52,658.	0.			CONSERVATION ADVOCACY
LOUISIANA WILDLIFE FEDERATION P.O. BOX 65239 BATON ROUGE, LA 70896	720445638	501C3	18,941.	0.			CONSERVATION ADVOCACY
MARYLAND LEAGUE OF CONSERVATION VOTERS - 9 STATE CIRCLE, SUITE 202 - ANNAPOLIS, MD 21401	522210858	501C3	20,000.	0.			CONSERVATION ADVOCACY
MICHIGAN UNITED CONSERVATION CLUBS 2101 WOOD ST LANSING, MI 48909	380831862	501C3	41,977.	0.			CONSERVATION ADVOCACY
MINNESOTA CONSERVATION FEDERATION 542 SNELLING AVE, STE 104 ST. PAUL, MN 55116	410808383	501C3	43,401.	0.			CONSERVATION ADVOCACY
MISSISSIPPI WILDLIFE FEDERATION 855 SOUTH PEAR ORCHARD ROAD, STE 5 RIDGELAND, MS 39157	640509531	501C3	19,731.	0.			CONSERVATION ADVOCACY

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I 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) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTANA FISH, WILDLIFE, AND PARKS FOUNDATION - P.O. BOX 200701 - HELENA, MT 59620	810528922	501C3	60,033.	0.			CONSERVATION ADVOCACY
NATIONAL TRIBAL ENVIRONMENTAL COUNCIL - 4520 MONTGOMERY BLVD NE STE 3 - ALBUQUERQUE, NM 87109	521745332	501C3	13,500.	0.			CONSERVATION ADVOCACY
NATIONAL WILDLIFE FEDERATION ACTION FUND - 11100 WILDLIFE CENTER DRIVE - RESTON, VA 20190	742556532	501C4	566,577.	0.			CONSERVATION ADVOCACY
NATURAL RESOURCES COUNCIL OF MAINE 3 WADE ST AUGUSTA, ME 04330	010270690	501C3	75,977.	0.			CONSERVATION ADVOCACY
NEBRASKA WILDLIFE FEDERATION P.O. BOX 81437 LINCOLN, NE 68501	237401528	501C3	13,451.	0.			CONSERVATION ADVOCACY
NEW MEXICO WILDLIFE FEDERATION 2610 SAN MATEO BLVD NE ALBUQUERQUE, NM 87110	850160947	501C3	49,879.	0.			CONSERVATION ADVOCACY
NORTH CAROLINA WILDLIFE FEDERATION 1024 WASHINGTON ST RALEIGH, NC 27605	561564376	501C3	18,670.	0.			CONSERVATION ADVOCACY
OHIO ENVIRONMENTAL COUNCIL 1207 GRANDVIEW AVE, SUITE 201 COLUMBUS, OH 43212	310805578	501C3	37,000.	0.			CONSERVATION ADVOCACY

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I 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) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNFUTURE 610 NORTH THIRD STREET HARRISBURG, PA 17101	311607866	501C3	55,839.	0.			CONSERVATION ADVOCACY
PLANNING AND CONSERVATION LEAGUE 1107 9TH STREET, STE 360 SCARAMENTO, CA 95814	942190378	501C3	5,753.	0.			CONSERVATION ADVOCACY
RED LAKE BAND OF CHIPPEWA INDIANS P.O. BOX 279 RED LAKE, MN 56671	410692381	501C3	6,305.	0.			CONSERVATION ADVOCACY
SEA TURTLE CONSERVANCY 4424 NW 13TH STREET GAINSVILLE, FL 32609	596151069	501C3	20,000.	0.			CONSERVATION ADVOCACY
SIERRA CLUB FOUNDATION 85 SECOND ST, STE.750 SAN FRANCISCO, CA 94105	946069890	501C3	46,500.	0.			CONSERVATION ADVOCACY
SOUTH CAROLINA WILDLIFE FEDERATION 215 PICKENS ST COLUMBIA, SC 29205	570602549	501C3	100,720.	0.			CONSERVATION ADVOCACY
SOUTHERN PINE PLANTATIONS OF GEORGIA, LLC - 6304 PEAKE ROAD - MACON, GA 31210	582033680		25,000.	0.			CONSERVATION ADVOCACY
TENNESSEE WILDLIFE FEDERATION 300 ORLANDO AVE NASHVILLE, TN 37209	626047188	501C3	6,053.	0.			CONSERVATION ADVOCACY

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I 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) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS CONSERVATION ALLIANCE 2623 SOUTH BOLDT AVE TYLER, TX 75701	237112618	501C3	5,490.	0.			CONSERVATION ADVOCACY
TROUT UNLIMITED 1300 NORTH 17TH STREET, STE 500 ARLINGTON, VA 22209	381612715	501C3	35,000.	0.			CONSERVATION ADVOCACY
VIRGINIA CONSERVATION NETWORK 422 FRANKLIN STE 303 RICHMOND, VA 23219	510198762	501C3	12,377.	0.			CONSERVATION ADVOCACY
VIRGINIA LEAGUE OF CONSERVATION VOTERS - 530 EAST MAIN STREET, STE 410 - RICHMOND, VA 23219	311777101	501C3	50,000.	0.			CONSERVATION ADVOCACY
WASHINGTON WILDLIFE FEDERATION P.O. BOX 1656 BELLEVUE, WA 98009	943122155	501C3	12,857.	0.			CONSERVATION ADVOCACY
WISCONSIN WILDLIFE FEDERATION W 7303 COUNTY HIGHWAY CS & Q POYNETEE, WI 53955	391095827	501C3	11,462.	0.			CONSERVATION ADVOCACY
WYOMING WILDLIFE FEDERATION P.O. BOX 106 CHEYENNE, WY 82003	237002578	501C3	6,215.	0.			CONSERVATION ADVOCACY
YELLOW DOG WATERSHED P.O. BOX 5 BIG BAY, MI 49808	383251163	501C3	19,000.	0.			CONSERVATION ADVOCACY

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

Schedule I-1 (Form 990) 2009

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I 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) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC. - 11100 WILDLIFE CENTER DRIVE - RESTON, VA 20190	52-0806695	501C3	1,202,116.	0.			CONSERVATION ADVOCACY

Part IV Supplemental Information

NOT ASK THEM TO REPORT TO US. THE GRANT CONTRACT SPECIFIES THE TERMS AND
USES OF THE GRANT.

2.) THE OTHER TYPE OF GRANT WOULD BE FOR A NON-AFFILIATE THAT IS IN THE
CONSERVATION AND EDUCATION FIELD. NATIONAL WILDLIFE FEDERATION SPECIFIES
IN ITS AWARD LETTER TO GRANTEES THE REPORTING REQUIREMENTS ON THE USE OF
THE FUNDS AND IN SOME CASES RESERVES THE RIGHT TO EXAMINE THE RECORDS
ASSOCIATED WITH THE AWARD.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) 2009

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
LARRY J. SCHWEIGER	(i)	271,454.	0.	41,739.	25,896.	10,822.	349,911.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
DULCE M. GOMEZ-ZORMELO	(i)	136,751.	750.	16,817.	17,569.	10,597.	182,484.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
CYNTHIA LEWIN	(i)	153,780.	750.	22,861.	10,613.	11,062.	199,066.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JAIME B MATYAS	(i)	198,086.	750.	15,556.	25,458.	10,562.	250,412.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
KAREN B. KRESS	(i)	142,786.	750.	22,778.	9,936.	2,370.	178,620.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
DAN T. CHU	(i)	138,160.	750.	16,696.	17,899.	9,848.	183,353.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JEREMY SYMONS	(i)	146,775.	2,250.	16,838.	18,747.	10,101.	194,711.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
KEVIN J. COYLE	(i)	144,394.	750.	13,404.	9,600.	9,973.	178,121.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JAMES S. LYON	(i)	139,287.	2,750.	11,376.	14,512.	9,810.	177,735.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
DAVID B. STRAUSS	(i)	133,598.	750.	15,517.	13,711.	9,249.	172,825.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
ANDREW P. BUCHSBAUM	(i)	114,905.	750.	22,472.	11,700.	2,458.	152,285.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

NATIONAL WILDLIFE FEDERATION

Employer Identification number

53-0204616

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BEATRICE B. VON GONTARD DIRECTOR	3.00	X					0.	0.	0.	
MARK WINLAND DIRECTOR	3.00	X					0.	0.	0.	
NICOLE WOOD DIRECTOR	3.00	X					0.	0.	0.	
FERNANDO ALBORNOZ DIRECTOR	3.00	X					0.	0.	0.	
TAHLIA BEAR DIRECTOR	3.00	X					0.	0.	0.	
ALISON BYERS DIRECTOR	3.00	X					0.	0.	0.	
GLORIA REUBEN DIRECTOR	3.00	X					0.	0.	0.	
DIANE RIDGLEY DIRECTOR	3.00	X					0.	0.	0.	
TRUMAN T. SEMANS DIRECTOR	3.00	X					0.	0.	0.	
BRUCE WALLACE DIRECTOR	3.00	X					0.	0.	0.	
LARRY J. SCHWEIGER PRESIDENT - NWF	40.00			X			313,193.	0.	36,718.	
DULCE M. GOMEZ-ZORMELO TREASURER - NWF	40.00			X			154,318.	0.	28,166.	
RUPEN D. BALCA-HARUTIUNI ASST TREASURER - NWF	40.00			X			71,255.	0.	7,228.	
CYNTHIA LEWIN SECRETARY - NWF	40.00			X			177,391.	0.	21,675.	
JULIE BLESSYN DAVIS ASST SECRETARY - NWF	40.00			X			102,458.	0.	8,373.	
DEBRA SHAW ASST TREASURER - NWF	40.00			X			36,546.	0.	2,617.	
JAIME B MATYAS COO	40.00			X			214,392.	0.	36,020.	
THOMAS KEARNEY ASST TREASURER	40.00			X			0.	0.	0.	
KAREN B. KRESS VP OF DEVELOPMENT	40.00				X		166,314.	0.	12,306.	
DAN T. CHU VP-AFF & REG STRATEGIC	40.00				X		155,606.	0.	27,747.	

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

NATIONAL WILDLIFE FEDERATION

Employer Identification number

53-0204616

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JEREMY SYMONS VP-CONSERVATION & EDU	40.00				X			165,863.	0.	28,848.
KEVIN J. COYLE VP-EDUCATION	40.00				X			158,548.	0.	19,573.
JAMES S. LYON VP-CONSERVATION POLICY	40.00				X			153,413.	0.	24,322.
DAVID B. STRAUSS VP-DIR MKTG & CONSTIT. O	40.00					X		149,865.	0.	22,960.
ED COLEMAN GEN MERCHANDISE MANAGER	40.00					X		137,481.	0.	11,774.
ANDREW P. BUCHSBAUM ED, GREAT LAKES	40.00					X		138,127.	0.	14,158.
CURTIS FISCHER ED, NORTHEASTERN REGION	40.00					X		127,473.	0.	11,968.
JENNIFER E. JONES VP-COMMUNICATIONS	40.00					X		124,621.	0.	10,440.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2009

**Open to Public
Inspection**

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.**

Name of the organization **NATIONAL WILDLIFE FEDERATION** Employer identification number **53-0204616**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	35	185,225.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2009

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE M, LINE 32B: NATIONAL WILDLIFE FEDERATION USES A BROKERAGE

HOUSE TO SELL NON CASH CONTRIBUTIONS (PUBLICLY TRADED SECURITIES).

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization **NATIONAL WILDLIFE FEDERATION** Employer identification number **53-0204616**

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

NWF FOCUSES ON AND EXCELS IN THREE DISTINCT PROGRAM AREAS - A) GETTING

CHILDREN AND FAMILIES MORE CONNECTED WITH NATURE BY GETTING THEM

OUTDOORS, B) SAFEGUARDING WILDLIFE AND HABITAT AND C) FINDING SOLUTIONS

TO GLOBAL CLIMATE CHANGE. NWF'S DEDICATION TO THESE THREE PROGRAM AREAS

HELPS TO ENSURE THAT AMERICA'S WILDLIFE LEGACY CONTINUES FOR FUTURE

GENERATIONS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

A) PEOPLE BECOMING MORE DISCONNECTED FROM NATURE, B) LOSS OF HABITAT

AND C) THE THREAT OF GLOBAL WARMING. THROUGH THE HARD WORK OF OUR

DEDICATED STAFF, NINE REGIONAL OFFICES, NATIONAL ADVOCACY CENTER AND 47

STATE AFFILIATES, NWF IS CHANGING THE FORECAST FOR WILDLIFE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

WHICH WOULD HAVE DRAINED 200,000 ACRES OF CRITICALLY IMPORTANT

WETLANDS, AND SUCCESSFULLY FOUGHT FOR AND ACHIEVED FEDERAL LEGISLATION

THAT PERMANENTLY WITHDREW MINERAL LEASING IN VALLE VIDAL. BECAUSE

GLOBAL WARMING SERIOUSLY THREATENS THE SURVIVAL OF OUR MOST CHERISHED

WILDLIFE SPECIES AND THEIR HABITATS AND JEOPARDIZES THE HEALTH AND

LIVELIHOODS OF MANY PEOPLE AND COMMUNITIES, FINDING SOLUTIONS TO

CLIMATE CHANGE IS ONE OF OUR MOST IMPORTANT AREAS OF FOCUS. NWF'S WORK

IN THIS AREA INCLUDES PROMOTING A SHIFT FROM DIRTY TO CLEAN SOURCES OF

ENERGY.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

TO EXPERIENCE NATURE IN AN EDUCATIONAL ATMOSPHERE.

NWF'S HABITATS' PROGRAM HAS PRODUCED THREE SUCCESSFUL WAYS FOR OUR FOUR

MILLION MEMBERS AND SUPPORTERS ACROSS THE COUNTRY TO HELP WILDLIFE ON

THEIR OWN TERMS AND IN THEIR OWN TIME - CERTIFIED WILDLIFE HABITAT,

SCHOOLYARD HABITAT AND COMMUNITY HABITAT. WITH OVER 138,000 CERTIFIED

HABITATS, 3,600 SCHOOLYARD HABITATS AND 48 CERTIFIED COMMUNITY

HABITATS, OVER ONE MILLION AMERICANS ARE PARTICIPATING TO MAKE A

DIFFERENCE FOR WILDLIFE.

ECO SCHOOLS IS AN INTERNATIONAL PROGRAM AIMED AT FOSTERING A GREATER

SENSE OF ENVIRONMENTAL STEWARDSHIP IN SCHOOL AGE STUDENTS. NWF WAS

CHOSEN AS THE SOLE AMERICAN ENVIRONMENTAL ORGANIZATION TO INTRODUCE AND

IMPLEMENT THIS PROGRAM IN THE US. SINCE ITS LAUNCH IN 2009 NWF HAS

SIGNED UP 407 SCHOOLS REPRESENTING 175,000 STUDENTS AND 6,200

EDUCATORS.

FOR 44 YEARS RANGER RICK MAGAZINE HAS BEEN INTRODUCING KIDS TO THE

WONDERS OF NATURE. IN 2010, RANGER RICK CONTINUED ITS STANDARD OF

EXCELLENCE IN EDUCATION BY WINNING PERIODICAL OF THE YEAR FOR CHILDREN

(GRADES K-5). TOGETHER WITH OUR TWO OTHER AWARD WINNING CHILDREN'S

MAGAZINES, THEY REACH ONE MILLION HOMES PER MONTH AND OVER TWO MILLION

YOUNG READERS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER NATURE EDUCATION MATERIALS COMMUNICATE NWF'S MISSION TO RAISE

PUBLIC AWARENESS AROUND OUR THREE MAIN OBJECTIVES - GETTING KIDS BACK

OUTSIDE, SAFEGUARDING WILDLIFE AND HABITAT AND FINDING SOLUTIONS TO

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

Schedule O (Form 990) 2009

932211
02-03-10

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
--	--

CLIMATE CHANGE. WITH OUR CARDS AND WILDLIFE CENTERED ITEMS, NWF HAS

MORE WAYS TO ENGAGE OUR 4 MILLION MEMBERS AND SUPPORTERS WHILE ALSO

GETTING OUR MESSAGE TO NEW AUDIENCES WHO HAVE AN INTEREST IN PROTECTING

WILDLIFE.

FORM 990, PART VI, SECTION A, LINE 6: NWF'S 47 STATE AND TERRITORIAL

AFFILIATES ARE MEMBERS OF THE FEDERATION.

FORM 990, PART VI, SECTION A, LINE 7A: AFFILIATE REPRESENTATIVES ELECT THE

MAJORITY OF THE BOARD OF DIRECTORS OF THE NATIONAL WILDLIFE FEDERATION.

FORM 990, PART VI, SECTION B, LINE 11: NWF'S FINANCE DEPARTMENT COMPILES

DATA AND SCHEDULES FOR THE IRS FORM 990 FROM AUDITED FINANCIAL STATEMENTS.

BDO USA, LLP PREPARES AND REVIEWS THE RETURN. NWF BOARD MEMBERS ARE

PROVIDED WITH A DRAFT COPY OF THE 990 RETURN. AN NWF AUDIT COMMITTEE

MEETING IS HELD WHERE THE FULL BOARD IS INVITED TO PARTICIPATE IN 990

DISCUSSION. NWF FINANCE STAFF, GENERAL COUNSEL AND THE BDO TAX PARTNER

ADDRESS AND ANSWER ANY QUESTIONS THAT THE BOARD MAY HAVE.

FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, DIRECTORS, TRUSTEES, AND

EMPLOYEES ARE REQUIRED TO DISCLOSE ANY POTENTIAL ISSUES THAT MAY CAUSE A

CONFLICT. GENERAL COUNSEL AND HUMAN RESOURCES COMMUNICATE POLICY TO BOARD

AND EMPLOYEES. FORMS ARE REVIEWED AND DISCLOSURES REVIEWED BY A COMMITTEE

OF THE BOARD.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
--	--

FORM 990, PART VI, SECTION B, LINE 15A: 15A - THE COMPENSATION OF THE CEO

OF NATIONAL WILDLIFE FEDERATION WAS SET BY THE EXECUTIVE COMMITTEE OF THE

BOARD OF DIRECTORS, WHICH CONSISTS OF SEVEN INDEPENDENT BOARD MEMBERS. THE

EXECUTIVE COMMITTEE RELIED ON A COMPENSATION STUDY PREPARED BY AN OUTSIDE

CONSULTING FIRM SPECIFICALLY FOR THE NATIONAL WILDLIFE FEDERATION. HOWEVER,

IN KEEPING WITH SALARY FREEZES FOR OTHER STAFF, THE CEO REFUSED A

COMPENSATION ADJUSTMENT.

15B - WHILE THE PROCESS FOR THE CEO MEETS THIS TEST AS EXPLAINED ABOVE, THE

CEO IS RESPONSIBLE FOR COMPENSATION FOR ALL OTHER EMPLOYEES, INCLUDING KEY

EMPLOYEES. THE HUMAN RESOURCES DEPARTMENT IS RESPONSIBLE FOR BENCHMARKING

TO MARKET BOTH INITIAL COMPENSATION AND ANY SALARY INCREASES THAT ARE

PROVIDED. THE OFFICERS ARE ALSO EMPLOYEES AND THEIR COMPENSATION IS HANDLED

AS DESCRIBED, EXCEPT THAT THE CHAIR OF THE BOARD IS A VOLUNTEER LEADER WHO

IS NOT COMPENSATED.

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

AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MO, MS, NH, NJ, NM, NY, NC

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

FORM 990, PART VI, SECTION C, LINE 19: NWF MAKES ITS GOVERNING DOCUMENTS,

CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE

PUBLIC UPON REQUEST.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
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FORM 990, PART XI, LINE 2C

OVERSIGHT OF AUDIT

THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS FOR OVERSIGHT

OF THE AUDIT OF THE FINANCIAL STATEMENTS.

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Name of the organization NATIONAL WILDLIFE FEDERATION	Employer identification number 53-0204616
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Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC. - 52-0806695, 11100 WILDLIFE CENTER DR, RESTON, VA 20190-5362	SUPPORT NWF MISSION	DISTRICT OF COLUMBIA	501C3	509A3, TYPE I	N/A

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

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

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

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?

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

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

(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of- year assets	(f) Dispropor- tionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No