

Form **990**
 Department of the Treasury
 Internal Revenue Service

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

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

OMB No 1545-0047
2010
Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 09-01-2010 and ending 08-31-2011

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	C Name of organization NATIONAL WILDLIFE FEDERATION Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 11100 WILDLIFE CENTER DRIVE City or town, state or country, and ZIP + 4 RESTON, VA 201905362	D Employer identification number 53-0204616 E Telephone number (703) 438-6000 G Gross receipts \$ 104,220,904
F Name and address of principal officer LARRY J SCHWEIGER 11100 WILDLIFE CENTER DRIVE RESTON, VA 201905362		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) <input type="checkbox"/> 501(c) () (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 NWF'S MISSION IS TO INSPIRE AMERICANS TO PROTECT WILDLIFE FOR OUR CHILDREN'S FUTURE			
	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)	3		36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		35
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5		508
	6 Total number of volunteers (estimate if necessary)	6		3,907
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		1,037,895
	b Net unrelated business taxable income from Form 990-T, line 34	7b		408,734
Revenue		Prior Year	Current Year	
	8 Contributions and grants (Part VIII, line 1h)	75,868,139	77,941,133	
	9 Program service revenue (Part VIII, line 2g)	10,324,026	9,617,738	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	94,710	369,655	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12,140,076	10,888,111	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	98,426,951	98,816,637	
Expenses				
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,007,437	5,830,036	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	30,552,678	32,544,837	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	2,400,937	1,813,091	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,625,801			
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	57,057,595	56,072,120	
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	94,018,647	96,260,084	
	19 Revenue less expenses Subtract line 18 from line 12	4,408,304	2,556,553	
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	20 Total assets (Part X, line 16)	64,121,805	64,808,553	
	21 Total liabilities (Part X, line 26)	84,891,779	79,539,168	
	22 Net assets or fund balances Subtract line 21 from line 20	-20,769,974	-14,730,615	

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 _____ DULCE M GOMEZ-ZORMELO TREASURER Type or print name and title	2012-03-28 Date	
Paid Preparer Use Only	Print/Type preparer's name MICHAEL SORRELLS MICHAEL SORRELLS CPA	Preparer's signature MICHAEL SORRELLS MICHAEL SORRELLS CPA	Date Check if self-employed <input type="checkbox"/> PTIN
	Firm's name ▶ BDO USA LLP Firm's address ▶ 7101 WISCONSIN AVE SUITE 800 BETHESDA, MD 208144827		Firm's EIN ▶ Phone no ▶ (301) 654-4900

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

NATIONAL WILDLIFE FEDERATION'S MISSION IS TO INSPIRE AMERICANS TO PROTECT WILDLIFE FOR OUR CHILDREN'S FUTURE NWF ACCOMPLISHES ITS MISSION THROUGH EDUCATION PROGRAMS AND BY IMPLEMENTING EFFECTIVE SOLUTIONS TO THE THREE BIGGEST THREATS FACING WILDLIFE TODAY A) PEOPLE BECOMING MORE DISCONNECTED FROM NATURE, B) LOSS OF HABITAT AND C) THE ACCELERATING THREAT OF GLOBAL CLIMATE CHANGE THROUGH THE HARD WORK OF OUR DEDICATED STAFF, NINE REGIONAL OFFICES, NATIONAL ADVOCACY CENTER AND 47 STATE AFFILIATES, NWF IS WORKING TO KEEP THE WILD ALIVE

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 32,469,963 including grants of \$ 5,729,794) (Revenue \$ 677,299)
 CONSERVATION ADVOCACY PROGRAMS EDUCATE AND ENGAGE THE PUBLIC IN NWF'S WORK SAFEGUARDING WILDLIFE AND HABITAT AND ADVANCING SOLUTIONS TO CLIMATE CHANGE 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, 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 CLIMATE CHANGE IS HAVING PROFOUND EFFECTS ON THE RESILIENCY AND HEALTH OF ECOSYSTEMS AND THE ABILITY OF NATURE, WILD SPECIES AND PEOPLE TO REMAIN HEALTHY AND ALIVE, NWF WORKS TO INSPIRE PEOPLE TO TAKE ACTION AT HOME AND AT WORK, ON THEIR WORKING LANDS, IN THEIR COMMUNITIES, AND IN STATE AND FEDERAL LEGISLATURES THAT WILL ACCELERATE THE SHIFT AWAY FROM CARBON-BASED ENERGY

4b (Code) (Expenses \$ 23,339,259 including grants of \$ 100,242) (Revenue \$ 8,390,832)
 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 OUR PUBLICATIONS NATIONAL WILDLIFE, RANGER RICK, YOUR BIG BACKYARD, WILD ANIMAL BABY, AND JUST FOR FUN EACH YEAR THE FEDERATION REACHES TWO MILLION SCHOOL CHILDREN AND ANOTHER TWO MILLION YOUNG READERS THROUGH ITS EDUCATIONAL PROGRAMS THE 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 885 EXPLORERS OUTSIDE 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 146,000 CERTIFIED HABITATS, 3,700 SCHOOLYARD HABITATS AND 52 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 815 SCHOOLS REPRESENTING 350,000 STUDENTS AND 12,400 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

4c (Code) (Expenses \$ 12,945,003 including grants of \$) (Revenue \$ 3,259,648)
 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 EVERY MONTH, THROUGH NATIONAL WILDLIFE MILLIONS OF PEOPLE CAN READ INFORMATIVE FEATURE ARTICLES ABOUT WILDLIFE AND WILDLIFE CONSERVATION , THE LATEST ENVIRONMENTAL NEWS AND SUCCESS STORIES FROM NWF AND AROUND THE NATION

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**
 (Expenses \$ 7,838,129 including grants of \$) (Revenue \$ 4,693,136)

4e Total program service expenses \$ 76,592,354

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>	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	Yes	
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>		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <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>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		No
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>		No
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		No
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>	Yes	
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a 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>	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	Yes	
c 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>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>	Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	Yes	
12a 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>		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		No
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 (see instructions).</i>	Yes	
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>	Yes	
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>		No
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1a	600		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1b	0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.		
2a	508		
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 (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	Yes	
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)?	Yes	
4b	If "Yes," enter the name of the foreign country: <u>NT, CJ</u> See instructions for 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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		No
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?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	1a 36		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 35		
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?		No
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Does the organization have members or stockholders?	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
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		No

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

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

Section C. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed: **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**
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **DULCE GOMEZ-ZORMELO, 11100 WILDLIFE CENTER DRIVE, RESTON, VA 201905362, (703) 438-6000**

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							2,527,525	0	267,247	

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 **48**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
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? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

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	2,773,109
MERKLE INC 7001 COLUMBIA GATEWAY DRIVE COLUMBIA, MD 21046	DATABASE DEV & MGMT, GRAPHICS & DESIGN	1,152,111
PARADYZE MATERA CO INC 5 HANOVER SQUARE 6TH FLOOR NEW YORK, NY 10004	LIST RENTAL CONSULTING	993,964
USA 800 INC 9808 EAST 66TH TERRACE KANSAS CITY, MO 64133	FULFILMENT AND CONSULTING SERVICES	936,320
RMS DIRECT 4510 BUCKEYSTOWN PIKE UNIT M FREDERICK, MD 21704	FULFILMENT SERVICES	798,189

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 **24**

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a	234,840				
	b Membership dues 1b	9,018,440				
	c Fundraising events 1c	823,029				
	d Related organizations 1d	4,769,000				
	e Government grants (contributions) 1e	1,243,808				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	61,852,016				
	g Noncash contributions included in lines 1a-1f \$	226,626				
	h Total. Add lines 1a-1f ▼	77,941,133				
	Program Service Revenue	2a SUBSCRIPTION REVENUE		Business Code		
		900099	8,882,462	8,882,462		
b TV AND FILM PRODUCTION		900099	274,200	274,200		
c LITIGATION FEES		900099	249,735	249,735		
d CONTRACTUAL/CONSULTING		900099	150,000	150,000		
e REGISTRATION FEES		900099	59,602	59,602		
f All other program service revenue			1,739	1,739		
g Total. Add lines 2a-2f ▼			9,617,738			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) ▼		180,481		180,481	
	4 Income from investment of tax-exempt bond proceeds ▼					
	5 Royalties ▼		2,916,870	2,423	2,914,447	
	6a Gross Rents	(i) Real	1,063,404			
		(ii) Personal				
		b Less rental expenses	552,404			
		c Rental income or (loss)	511,000			
	d Net rental income or (loss) ▼		511,000	498,296	12,704	
	7a Gross amount from sales of assets other than inventory	(i) Securities	2,003,352	1,005		
		(ii) Other				
		b Less cost or other basis and sales expenses	1,814,002	1,181		
		c Gain or (loss)	189,350	-176		
	d Net gain or (loss) ▼		189,174		189,174	
	8a Gross income from fundraising events (not including \$ 823,029 of contributions reported on line 1c) See Part IV, line 18 a					
		b Less direct expenses b		105,565		
c Net income or (loss) from fundraising events ▼			-480,112		-480,112	
9a Gross income from gaming activities See Part IV, line 19 a						
	b Less direct expenses b					
	c Net income or (loss) from gaming activities ▼					
10a Gross sales of inventory, less returns and allowances a						
	b Less cost of goods sold b		9,616,614			
	c Net income or (loss) from sales of inventory ▼		7,165,611	7,165,611		
Miscellaneous Revenue		Business Code				
11a ADVERTISING		511120	537,176	537,176		
	b HONORARIA	900099	44,859	44,859		
	c					
	d All other revenue		192,707	192,707		
e Total. Add lines 11a-11d ▼		774,742				
12 Total revenue. See Instructions ▼		98,816,637	17,020,915	1,037,895	2,816,694	

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	5,811,236	5,811,236		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	9,300	9,300		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	9,500	9,500		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,133,204	1,642,354	260,464	230,386
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	23,190,021	17,853,997	2,831,501	2,504,523
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,937,385	1,491,592	236,555	209,238
9	Other employee benefits	3,203,222	2,466,161	391,114	345,947
10	Payroll taxes	2,081,005	1,602,165	254,091	224,749
a	Fees for services (non-employees)				
	Management				
b	Legal	469,103	392,676	19,843	56,584
c	Accounting	123,560	103,506	5,140	14,914
d	Lobbying	74,135	74,135		
e	Professional fundraising services See Part IV, line 17	1,813,091			1,813,091
f	Investment management fees	101,482	83,337	6,109	12,036
g	Other	12,638,052	12,083,630	616,140	-61,718
12	Advertising and promotion	487,574	400,396	29,352	57,826
13	Office expenses	18,645,616	14,209,923	1,484,697	2,950,996
14	Information technology	1,822,354	1,496,517	109,706	216,131
15	Royalties	610,081	479,829	46,549	83,703
16	Occupancy	1,255,639	974,122	165,755	115,762
17	Travel	2,124,169	1,755,178	168,818	200,173
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,349,075	1,120,157	77,074	151,844
20	Interest	891,035	731,718	53,640	105,677
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,007,427	742,777	194,332	70,318
23	Insurance	248,230	203,847	14,943	29,440
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	MAJOR PROGRAM MATERIALS	10,840,234	8,094,776	852,938	1,892,520
b	LIST RENTAL SERVICES	1,576,660	1,240,043	120,299	216,318
c	TEXT/EDITORIAL	311,999	251,512	19,655	40,832
d	A/V PRODUCTION COSTS	174,037	144,741	7,951	21,345
e	AWARDS	34,805	28,582	2,095	4,128
f	All other expenses	1,286,853	1,094,647	73,168	119,038
25	Total functional expenses. Add lines 1 through 24f	96,260,084	76,592,354	8,041,929	11,625,801
26	Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	21,174,421	11,134,554	2,886,697	7,153,170

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	2,457,497	2	168,049
	3 Pledges and grants receivable, net	15,779,979	3	19,061,225
	4 Accounts receivable, net	1,620,324	4	1,206,212
	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)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	887,187	8	1,018,027
	9 Prepaid expenses and deferred charges	2,866,909	9	2,771,593
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	35,046,657		
	b Less accumulated depreciation	12,299,894	22,946,622	10c 22,746,763
	11 Investments—publicly traded securities	867,990	11	975,867
	12 Investments—other securities. See Part IV, line 11	5,772,402	12	6,526,201
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	10,922,895	15	10,334,616
16 Total assets. Add lines 1 through 15 (must equal line 34)	64,121,805	16	64,808,553	
Liabilities	17 Accounts payable and accrued expenses	18,060,085	17	16,696,525
	18 Grants payable		18	
	19 Deferred revenue	11,990,754	19	11,507,913
	20 Tax-exempt bond liabilities	15,935,554	20	15,466,919
	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	7,424,134	23	7,812,798
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	31,481,252	25	28,055,013
	26 Total liabilities. Add lines 17 through 25	84,891,779	26	79,539,168
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	-54,031,207	27	-50,440,820
	28 Temporarily restricted net assets	24,994,704	28	27,304,762
	29 Permanently restricted net assets	8,266,529	29	8,405,443
	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	-20,769,974	33	-14,730,615	
34 Total liabilities and net assets/fund balances	64,121,805	34	64,808,553	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	98,816,637
2	Total expenses (must equal Part IX, column (A), line 25)	2	96,260,084
3	Revenue less expenses Subtract line 2 from line 1	3	2,556,553
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-20,769,974
5	Other changes in net assets or fund balances (explain in Schedule O)	5	3,482,806
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	-14,730,615

Part XII Financial Statements and Reporting

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

		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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated 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?	Yes	
b	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	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

2010

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

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?
 (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 the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

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

(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									

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	67,233,769	78,729,510	69,409,609	75,868,139	77,852,204	369,093,231
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	67,233,769	78,729,510	69,409,609	75,868,139	77,852,204	369,093,231
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						369,093,231

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	67,233,769	78,729,510	69,409,609	75,868,139	77,852,204	369,093,231
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,525,502	3,932,499	3,465,112	3,983,118	4,158,332	20,064,563
9 Net income from unrelated business activities, whether or not the business is regularly carried on	16,918		455,562	606,150	1,037,895	2,116,525
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	396,124	440,312	125,145	319,691	237,566	1,518,838
11 Total support (Add lines 7 through 10)						392,793,157
12 Gross receipts from related activities, etc (See instructions)					12	77,066,968

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** **Section C. Computation of Public Support Percentage**

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	93.970%
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	94.170%

16a 33 1/3% support test—2010. 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—2009.** If the organization did not check the 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—2010.** 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—2009.** 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions 		

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

Facts And Circumstances Test

--

--

Additional Data

Software ID:
Software Version:
EIN: 53-0204616
Name: NATIONAL WILDLIFE FEDERATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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			
STEPHEN K ALLINGER DIRECTOR	3 00	X					0	0	0	
GREGOR BAILAR DIRECTOR	3 00	X					0	0	0	
TAHLIA BEAR 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	
ALISON BYERS DIRECTOR	3 00	X					0	0	0	
DAVID CARRUTH DIRECTOR	3 00	X					0	0	0	
SHELLEY COHEN DIRECTOR	3 00	X					0	0	0	
DIANE DILLON-RIDGLEY DIRECTOR	3 00	X					0	0	0	
JOHN THOMAS GRANT JR DIRECTOR	3 00	X					0	0	0	
KATHLEEN HADLEY 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	
JERRY LITTLE DIRECTOR	3 00	X					0	0	0	
GERALD MERAL DIRECTOR	3 00	X					0	0	0	
CHRISTOPHER NOOK 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	
GLORIA REUBEN DIRECTOR	3 00	X					0	0	0	
JULIA REED-ZAIC DIRECTOR	3 00	X					0	0	0	
KENT SALAZAR DIRECTOR	3 00	X					0	0	0	
TRUMAN T SEMANS 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	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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			
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
BEATRICE B VON GONTARD DIRECTOR	3 00	X						0	0	0
BRUCE WALLACE 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
CRAIG THOMPSON CHAIR	3 00	X		X				0	0	0
LARRY J SCHWEIGER PRESIDENT - NWF	40 00			X				352,469	0	27,514
JAIME B MATYAS COO	40 00			X				233,594	0	29,195
DULCE M GOMEZ-ZORMELO TREASURER	40 00			X				167,521	0	24,239
THOMAS KEARNEY ASST TREASURER - NWF	40 00			X				52,390	0	4,950
CYNTHIA LEWIN SECRETARY - NWF	40 00			X				99,658	0	9,620
BARBARA G MCINTOSH SECRETARY - NWF	0 00			X				0	0	0
JULIE BLESSYN DAVIS ASST SECRETARY - NWF	40 00			X				125,173	0	10,660
JEREMY SYMONS SR VP-CONSERVATION & EDU	40 00				X			179,877	0	23,527
DAN T CHU VP-AFF & REG STRATEGIES	40 00				X			170,692	0	22,940
KEVIN J COYLE VP-EDUCATION	40 00				X			171,950	0	21,619
JAMES S LYON VP-CONSERVATION POLICY	40 00				X			165,417	0	19,343
ANDREW P BUCHSBAUM REGIONAL EXEC DIR	40 00					X		147,951	0	12,232
EDWARD J COLEMAN GM PRODUCT & SUPPORT	40 00					X		143,379	0	14,921
MERI-MARGARET DEOUIDES VP STRATEGIC ALLIANCES	40 00					X		135,651	0	15,472
CURTIS FISCHER REGIONAL EXEC DIR	40 00					X		131,787	0	16,173
MONICA M COLLINS VP OF DEVELOPMENT	40 00					X		145,773	0	9,786
KAREN B KRESS FORMER VP OF DEVELOPMENT	40 00						X	104,243	0	5,056

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 7,838,129 including grants of \$) (Revenue \$ 4,693,136)
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
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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2010

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 V, 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) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

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?
4a Was a correction made?
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?
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

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												
1a 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														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>	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		
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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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?	Yes		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c Media advertisements?	Yes		5,000
d Mailings to members, legislators, or the public?	Yes		28,098
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?	Yes		3,918,804
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		203,303
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		63,001
i Other activities? If "Yes," describe in Part IV		No	
j Total lines 1c through 1i			4,218,206
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
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) non-deductible 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.

Identifier	Return Reference	Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2010

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), 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?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

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

Table with 2 columns: Description, Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
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 170(h)(4)(B)(ii)?
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 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 the 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
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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	9,219,725	8,625,334	7,266,196		
b Contributions	1,440,630	594,937	1,425,021		
c Investment earnings or losses	80,865	44,331			
d Grants or scholarships					
e Other expenditures for facilities and programs	306,336	44,877	65,883		
f Administrative expenses					
g End of year balance	10,434,884	9,219,725	8,625,334		

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

- a** Board designated or quasi-endowment ▶ 50.420 %
- b** Permanent endowment ▶ 48.100 %
- c** Term endowment ▶ 1.480 %

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	3a(i)	No
(ii) related organizations	Yes	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	Yes

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		16,851,119	4,025,624	12,825,495
c Leasehold improvements		4,098,923	1,097,263	3,001,660
d Equipment		8,711,462	7,177,007	1,534,455
e Other		929,600		929,600
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				22,746,763

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	98,816,637
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	96,260,084
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,556,553
4	Net unrealized gains (losses) on investments	4	1,170,814
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	2,311,992
9	Total adjustments (net) Add lines 4 - 8	9	3,482,806
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	6,039,359

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	107,428,013
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	1,170,814
b	Donated services and use of facilities	2b	2,233,338
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	9,976,224
e	Add lines 2a through 2d	2e	13,380,376
3	Subtract line 2e from line 1	3	94,047,637
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	4,769,000
c	Add lines 4a and 4b	4c	4,769,000
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	98,816,637

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

1	Total expenses and losses per audited financial statements	1	101,896,706
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	2,222,550
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	4,153,631
e	Add lines 2a through 2d	2e	6,376,181
3	Subtract line 2e from line 1	3	95,520,525
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	739,559
c	Add lines 4a and 4b	4c	739,559
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	96,260,084

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	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 CONSERVATION AND ENVIRONMENTAL ISSUES THE AMOUNT ABOVE ALSO CONTAINS INTERNALLY DESIGNATED FUNDS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE FEDERATION'S MANAGEMENT BELIEVES IT HAS NO MATERIAL UNCERTAIN TAX POSITIONS AND ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS FOR THE YEARS ENDED AUGUST 31, 2011 AND 2010, THE FEDERATION DID NOT RECOGNIZE ANY INTEREST OR PENALTIES
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN SPLIT INTEREST AGREEMENTS 259,562 GAIN (LOSS) ON PENSION INVESTMENT 2,041,642 CAPITALIZED IN-KIND GIFT 10,788 CHANGE IN NET ASSETS, NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC
PART XII, LINE 2D - OTHER ADJUSTMENTS		NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC REVENUE 6,127,402 RENTAL EXPENSES 552,404 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 259,562 LOSS ON DISPOSAL OF FIXED ASSETS 176 SPECIAL EVENT EXPENSE 585,677 COST OF GOODS SOLD 2,451,003
PART XII, LINE 4B - OTHER ADJUSTMENTS		TRANSFER FROM NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC 4,769,000
PART XIII, LINE 2D - OTHER ADJUSTMENTS		NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC EXPENSES & LOSSES, AUDITED F/S 564,546 SPECIAL EVENT EXPENSE 585,677 COST OF GOODS SOLD 2,451,004 RENTAL EXPENSES 552,404
PART XIII, LINE 4B - OTHER ADJUSTMENTS		TRANSFER TO NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC 739,559
		SCHEDULE D, PART XI ALTHOUGH THE ORGANIZATION IS NOT REQUIRED TO COMPLETE PARTS XI, XII AND XIII BECAUSE IT IS PART OF A CONSOLIDATED FINANCIAL STATEMENT AUDIT AND NOT A SEPARATE AUDIT, IT HAS ELECTED TO INCLUDE THE PART XII AND XIII RECONCILIATIONS BASED ON THE CONSOLIDATED TOTALS THE PART XI RECONCILIATION IS BASED UPON THIS ENTITY ONLY AND THE CHANGE IN NET ASSETS REFLECTED HERE IS THE SAME AS THE CHANGE ON FORM 990, PART X SEE THE SEPERATE IRS FORM 990 FILING FOR THE NWF'S SUPPORTING ORGANIZATION, NWF ENDOWMENT, FOR ADDITIONAL NET ASSETS OR FUND BALANCES OF \$61M AND \$63M FOR PRIOR AND CURRENT YEAR, RESPECTIVELY

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).* Yes No

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 PERIODIC REPORTS ARE REQUIRED FROM THE GRANTEE THEY ARE REVIEWED FOR COMPLIANCE WITH GRANT DELIVERABLES

Schedule F (Form 990) 2010

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2010

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

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.

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

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

2a Did the organization have a written or oral agreement with any individual... 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.

Table with 6 columns: (i) Name and address 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.

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 CONSERVATION AWARDS DINNER (event type)	(b) Event #2 GREAT AMERICAN BACKYARD CAMPOUT (event type)	(c) Other Events 2 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	603,070	302,287	23,218	928,575
	2 Less Charitable contributions	534,380	288,629		823,009
	3 Gross income (line 1 minus line 2)	68,690	13,658	23,218	105,566
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages	92,373	119,330		211,703
	8 Entertainment				
	9 Other direct expenses	100,398	182,957	90,620	373,975
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				585,678
11 Net income summary Combine lines 3 and 10 in column (d) ▶				-480,112	

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))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash 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 lines 1 and 7 in column (d) ▶					

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? Yes No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," Explain _____

- 11** Does the organization operate gaming activities with nonmembers? Yes No
- 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? Yes No
- 13** Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Provide 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? Yes No

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

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? Yes No

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

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
DESCRIPTIONS OF PROFESSIONAL FUNDRAISER ACTIVITIES	SCHEDULE J, PART 1	DONOR SERVICE GROUP IS USED TO UPGRADE ANNUAL DONORS TO MONTHLY DONORS AND ACQUIRE NEW MONTHLY DONORS ONLY THE FIRST DONATION RECEIVED IS COUNTED AS REVENUE RAISED BY THEM THE LIFETIME CONTRIBUTION TO NWF FROM THESE DONORS EXCEEDS THE INITIAL COST TO ACQUIRE SHARE GROUP IS USED TO ACQUIRE NEW MEMBERS AND REAQUIRE LAPSED MEMBERS THE LIFETIME CONTRIBUTION TO NWF FROM THESE DONORS EXCEEDS THE INITIAL COST TO ACQUIRE OR RE-ACQUIRE PARADYZE MATERA IS A LIST BROKER USED TO OPTIMIZE THE AUDIENCE MIX FOR THE 12 DIRECT MAIL CAMPAIGNS MEMBERSHIP SENDS EACH YEAR TO PROSPECTS AND TO LAPSED MEMBERS EVENT 360 DOES EVENT PLANNING AND DONATION WEBSITE MAINTENANCE MERKLE IS A DATBASE PROVIDER AND DOES DONOR ANALYSIS FOR DONATION REQUESTS

Schedule I (Form 990)

OMB No 1545-0047

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

2010

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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?
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. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code 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. Row 1 contains 'See Additional Data Table'.

2 Enter total number of section 501(c)(3) and government organizations
3 Enter total number of other organizations

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 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
(1) CONSERVATION ASSISTANCE	1	9,300			

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	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 A 501(C)(3)AFFILIATE, NWF DOES 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 OR NON 501(C)(3)ENTITY THAT IS IN THE CONSERVATION AND EDUCATION FIELD NATIONAL WILDLIFE FEDERATION SPECIFIES IN ITS AWARD LETTER TO GRANTEEES THE REPORTING REQUIREMENTS ON THE USE OF THE FUNDS AND IN SOME CASES RESERVES THE RIGHT TO EXAMINE THE RECORDS ASSOCIATED WITH THE AWARD

Software ID:
Software Version:
EIN: 53-0204616
Name: NATIONAL WILDLIFE FEDERATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
1000 FRIENDS OF MARYLAND 1209 NORTH CALVERT STREET BALTIMORE, MD 21202	52-1864759	501C3	30,000				CONSERVATION ASSISTANCE
ALABAMA TREASURE FOREST ASSOCIATION PO BOX 189 CHUNCHULA, AL 36521	63-1051039	501C3	20,000				CONSERVATION ASSISTANCE
ALABAMA WILDLIFE FEDERATION 3050 LANARK RD MILLBROOK, AL 36054	63-0496911	501C3	44,314				CONSERVATION ASSISTANCE
ALLIANCE FOR THE GREAT LAKES 17 NORTH STATE STREET STE 1390 CHICAGO, IL 60602	23-7104524	501C3	11,000				CONSERVATION ASSISTANCE
ARIZONA WILDLIFE FEDERATION PO BOX 51510 MESA, AZ 85208	86-0076994	501C3	9,033				CONSERVATION ASSISTANCE
ARKANSAS WILDLIFE FEDERATION 9108 RODNEY PARHAM RD SUITE 101 LITTLE ROCK, AR 72205	71-6059226	501C3	6,176				CONSERVATION ASSISTANCE
AUDUBON NEW YORK 200 TRILLIUM LN ALBANY, NY 12203	13-1624102	501C3	22,500				CONSERVATION ASSISTANCE
CHESAPEAKE CLIMATE ACTION PO BOX 11138 TAKOMA PARK, MD 20912	11-3644283	501C3	6,324				CONSERVATION ASSISTANCE
CITIZENS CAMPAIGN FOR ENVN 225-A MAIN ST FARMINGDALE, NY 11735	11-2983418	501C3	14,000				CONSERVATION ASSISTANCE
CITIZENS FOR PENNSYLVANIA'S FUTURE 610 NORTH THIRD STREET HARRISBURG, PA 17101	31-1607866	501C3	45,000				CONSERVATION ASSISTANCE
CITY COLLEGES OF CHICAGO 226 WEST JACKSON BLVD CHICAGO, IL 60606	36-3157624	501C3	6,000				CONSERVATION ASSISTANCE
COAL RIVER MOUNTAIN WATCH PO BOX 651 WHITESVILLE, WV 25209	55-0765268	501C3	5,100				CONSERVATION ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
COALITION TO RESTORE COASTAL LOUISIANA 746 MAIN STREET STE B101 BATON ROUGE, LA 70802	72-1115589	501C3	50,000				CONSERVATION ASSISTANCE
COCOPAH INDIAN TRIBE COUNTY 15TH STREET AVE G SOMERTON, AZ 85350	86-0255690		5,700				CONSERVATION ASSISTANCE
CONTRIBUTION FOR RIVER UP (HURON RIVER WATERSHED COUNCIL) 1100 NORTH MAIN STREET SUITE 210 ANN ARBOR, MI 48104	38-1806452	501C3	20,000				CONSERVATION ASSISTANCE
DELAWARE NATURE SOCIETY 3507 BARLEY MILL RD HOCKESSIN, DE 19707	51-6018321	510C3	30,693				CONSERVATION ASSISTANCE
DUCKS UNLIMITED 1301 PENNSYLVANIA AVENUE NW STE 402 WASHINGTON, DC 20004	13-5643799	510C3	33,000				CONSERVATION ASSISTANCE
ENVIRONMENTAL ADVOCATES OF NEW YORK 353 HAMILTON ST ALBANY, NY 12210	22-2360736	501C3	10,274				CONSERVATION ASSISTANCE
ENVIRONMENTAL COUNCIL OF RHODE ISLAND PO BOX 9061 PROVIDENCE, RI 02940	05-0456927	501C3	6,396				CONSERVATION ASSISTANCE
FLORIDA WILDLIFE FEDERATION PO BOX 6870 TALLAHASSEE, FL 32314	59-1398265	501C3	64,106				CONSERVATION ASSISTANCE
FOREST GUILD PO BOX 8309 SANTA FE, NM 87504	85-0446866	501C3	21,000				CONSERVATION ASSISTANCE
FRESHWATER FUTURE PO BOX 2479 PETOSKEY, MI 49770	20-5693503	501C3	185,000				CONSERVATION ASSISTANCE
GREAT LAKES COMMISSION 2805 S INDUSTRIAL HIGHWAY SUITE 100 ANN ARBOR, MI 48104	38-6027814		29,858				CONSERVATION ASSISTANCE
INDIANA WILDLIFE FEDERATION 4715 W 106TH ST ZIONSVILLE, IN 46077	35-1058426	501C3	50,923				CONSERVATION ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
IOWA WILDLIFE FEDERATION 116 LAKESIDE DR NE SOLON, IA 50316	23-7326585	501C3	5,948				CONSERVATION ASSISTANCE
LAKE PONTCHARTRAIN BASIN FOUNDATION PO BOX 6965 METAIRIE, LA 70009	72-1152784	501C3	50,000				CONSERVATION ASSISTANCE
LOUISIANA WILDLIFE FEDERATION PO BOX 65239 BATON ROUGE, LA 70896	72-0445638	501C3	6,649				CONSERVATION ASSISTANCE
MCINTOSH SEED PO BOX 2355 DARIEN, GA 31305	58-2556194	501C3	8,800				CONSERVATION ASSISTANCE
MICHIGAN UNITED CONSERVATION CLUBS 2101 WOOD ST LANSING, MI 48909	38-0831862	501C3	13,386				CONSERVATION ASSISTANCE
MINNESOTA CONSERVATION FEDERATION 542 SNELLING AVE STE 104 ST PAUL, MN 55116	41-0808383	501C3	25,648				CONSERVATION ASSISTANCE
MISSISSIPPI MUSEUM OF 2148 RIVERSIDE DR JACKSON, MS 39202	64-0592874	501C3	49,000				CONSERVATION ASSISTANCE
MONTANA FISH WILDLIFE AND PARKS FOUNDATION PO BOX 200701 HELENA, MT 59620	81-0528922	501C3	5,439				CONSERVATION ASSISTANCE
MOTE MARINE LABORATORY 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34236	59-0756643	501C3	25,000				CONSERVATION ASSISTANCE
NATIONAL WILDLIFE FEDERATION ACTION FUND 11100 WILDLIFE CENTER DRIVE RESTON, VA 20190	74-2556532	501C4	1,069,999				CONSERVATION ASSISTANCE
NATURAL RESOURCES COUNCIL OF MAINE 3 WADE ST AUGUSTA, ME 04330	01-0270690	501C3	15,548				CONSERVATION ASSISTANCE
NATURAL RESOURCES DEFENSE 40 WEST 20TH ST NEW YORK, NY 10011	13-2654926	501C3	30,000				CONSERVATION ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
NEBRASKA WILDLIFE FEDERATION PO BOX 81437 LINCOLN, NE 68501	23-7401528	501C3	19,086				CONSERVATION ASSISTANCE
NEVADA WILDLIFE FEDERATION PO BOX 71238 RENO, NV 89570	23-7088184	501C3	5,848				CONSERVATION ASSISTANCE
NEW MEXICO WILDLIFE FEDERATION 2610 SAN MATEO BLVD NE ALBUQUERQUE, NM 87110	85-0160947	501C3	98,786				CONSERVATION ASSISTANCE
NO ON 231100 11TH STREET SACRAMENTO, CA 95814	27-1781659	501C4	3,000,000				CONSERVATION ASSISTANCE
NORTH CAROLINA WILDLIFE FEDERATION 1024 WASHINGTON ST RALEIGH, NC 27605	56-1564376	501C3	5,248				CONSERVATION ASSISTANCE
OHIO ENVIRONMENTAL COUNCIL 1207 GRANDVIEW AVE SUITE 201 COLUMBUS, OH 43212	31-0805578	501C3	36,000				CONSERVATION ASSISTANCE
PAGE WHITHAM LAND & CATTLE LLP PO BOX 27 GLASSGOW, MT 59230	81-0393177		26,800				CONSERVATION ASSISTANCE
PENNFUTURE 610 NORTH THIRD STREET HARRISBURG, PA 17101	31-1607866	501C3	6,386				CONSERVATION ASSISTANCE
PRAIRIE RIVERS NETWORK 1902 FOX DRIVE SUITE G CHAMPAIGN, IL 61820	37-6085905	501C3	6,686				CONSERVATION ASSISTANCE
RENEWABLE RESOURCES COALITION 605 WEST 2ND AVE ANCHORAGE, AK 99501	20-3364779	501C6	8,101				CONSERVATION ASSISTANCE
SIERRA CLUB FOUNDATION 85 SECOND ST STE 750 SAN FRANCISCO, CA 94105	94-6069890	501C3	33,000				CONSERVATION ASSISTANCE
SOUTH CAROLINA WILDLIFE FEDERATION 215 PICKENS ST COLUMBIA, SC 29205	57-0602549	501C3	36,536				CONSERVATION ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
SOUTHERN ENVIRONMENTAL LAW CENTER 201 WEST MAIN STREET SUITE 14 CHARLOTTESVILLE, VA 22902	52-1436778	501C3	30,000				CONSERVATION ASSISTANCE
TEXAS A&M UNIV CORPUS CHRISTI 6300 OCEAN DR UNIT 5758 CORPUS CHRISTI, TX 78412	74-1760663	501C3	10,000				CONSERVATION ASSISTANCE
TEXAS CONSERVATION ALLIANCE 2623 SOUTH BOLDT AVE TYLER, TX 75701	23-7112618	501C3	5,686				CONSERVATION ASSISTANCE
THE NATURE CONSERVANCY FAIRFAX DR 100 ARLINGTON, VA 22203	53-0242652	501C3	50,000				CONSERVATION ASSISTANCE
THREE PEAKS RANCH PO BOX 2370 LIVINGSTON, MT 59047	20-1522842		125,000				CONSERVATION ASSISTANCE
TIPP OF THE MITT 426 BAY ST PETOSKEY, MI 49770	38-2361745	501C3	5,025				CONSERVATION ASSISTANCE
VERMONT NATURAL RESOURCES COUNCIL 9 BAILEY AVE MONTPELIER, VT 05602	03-0223731	501C3	8,957				CONSERVATION ASSISTANCE
VIRGINIA CONSERVATION NETWORK 422 FRANKLIN STE 303 RICHMOND, VA 23219	51-0198762	501C3	47,448				CONSERVATION ASSISTANCE
WEST ATLANTA WATERSHED ALLIANCE PO BOX 50043 ATLANTA, GA 30302	20-0890449	501C3	6,500				CONSERVATION ASSISTANCE
WEST VIRGINIA RIVERS 329 DAVIS AVENUE SUITE 7 ELKINS, WV 26241	52-1736621	510C3	31,186				CONSERVATION ASSISTANCE
WISCONSIN WILDLIFE FEDERATION NW 7303 COUNTY HIGHWAY CS Q POYNETEE, WI 53955	39-1095827	501C3	11,779				CONSERVATION ASSISTANCE
WYOMING WILDLIFE FEDERATION PO BOX 106 CHEYENNE, WY 82003	23-7002578	501C3	7,517				CONSERVATION ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
YELLOW DOG WATERSHED PO BOX 5 BIG BAY, MI 49808	38-3251163	501C3	20,000				CONSERVATION ASSISTANCE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

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

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all 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 Yes

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

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 from the organization or a related organization?

4a No

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

4b No

c Participate in, or receive payment from, an equity-based compensation arrangement?

4c No

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

Only 501(c)(3) and 501(c)(4) organizations only 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 No

b Any related organization?

5b No

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 No

b Any related organization?

6b No

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 No

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 No

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

9

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-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				
(1) LARRY J SCHWEIGER	(i)	309,551	0	42,918	16,120	11,394	379,983	0
	(ii)	0	0	0	0	0	0	0
(2) JAIME B MATYAS	(i)	210,988	6,100	16,506	18,580	10,615	262,789	0
	(ii)	0	0	0	0	0	0	0
(3) DULCE M GOMEZ-ZORMELO	(i)	145,605	3,900	18,016	12,925	11,314	191,760	0
	(ii)	0	0	0	0	0	0	0
(4) JEREMY SYMONS	(i)	156,931	6,100	16,846	13,263	10,264	203,404	0
	(ii)	0	0	0	0	0	0	0
(5) DAN T CHU	(i)	147,890	6,100	16,702	13,056	9,884	193,632	0
	(ii)	0	0	0	0	0	0	0
(6) KEVIN J COYLE	(i)	153,472	3,537	14,941	11,582	10,037	193,569	0
	(ii)	0	0	0	0	0	0	0
(7) JAMES S LYON	(i)	147,929	5,426	12,062	9,495	9,848	184,760	0
	(ii)	0	0	0	0	0	0	0
(8) ANDREW P BUCHSBAUM	(i)	122,636	2,800	22,515	9,735	2,497	160,183	0
	(ii)	0	0	0	0	0	0	0
(9) EDWARD J COLEMAN	(i)	115,722	5,000	22,657	6,688	8,233	158,300	0
	(ii)	0	0	0	0	0	0	0
(10) MERI-MARGARET DEOODES	(i)	114,051	5,000	16,600	5,896	9,576	151,123	0
	(ii)	0	0	0	0	0	0	0
(11) MONICA M COLLINS	(i)	140,587	0	5,186	4,334	5,452	155,559	0
	(ii)	0	0	0	0	0	0	0
(12) KAREN B KRESS	(i)	89,966	0	14,277	4,006	1,050	109,299	0
	(ii)	0	0	0	0	0	0	0
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization NATIONAL WILDLIFE FEDERATION

Employer identification number 53-0204616

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 3 main columns: (a) Name of disqualified person, (b) Description of transaction, (c) Corrected? (Yes/No)

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958. 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Table with 7 main columns: (a) Name of interested person and purpose, (b) Loan to or from the organization?, (c) Original principal amount, (d) Balance due, (e) In default?, (f) Approved by board or committee?, (g) Written agreement?

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 3 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) BRUCE WALLACE	DIRECTOR	175,000	PART IV, LINE 1 MR WALLACE'S LAW FIRM IS ENGAGED TO PROVIDE ADVICE, SUPPORT AND LITIGATION SERVICES IN CONNECTION WITH THE EFFORTS BY NWF TO PREVENT OR LIMIT ENVIRONMENTALLY INJURIOUS MINING ACTIVITIES IN THE UPPER PENINSULA OF MICHIGAN, SPECIFICALLY TO A POTENTIAL MINE SITE KNOWN AS "EAGLE PROSPECT"		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2010

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions or items contributed, (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining oncash contribution amounts. Row 9 is filled with X, 35, 226,626, FMV.

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 Acknowledgement

29

Table with 3 columns: Question, Yes, No. Rows 30a, 31, 32a, 33.

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.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	NATIONAL WILDLIFE FEDERATION USES A BROKERAGE HOUSE TO SELL NON CASH CONTRIBUTIONS (PUBLICLY TRADED SECURITIES)

Schedule M (Form 990) 2010

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization
NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		NWF'S 47 STATE AND TERRITORIAL AUTONOMOUS AND UNRELATED AFFILIATES ARE MEMBERS OF THE FEDERATION

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		AFFILIATE REPRESENTATIVES ELECT THE MAJORITY OF THE BOARD OF DIRECTORS OF THE NATIONAL WILDLIFE FEDERATION

Identifier	Return Reference	Explanation
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 DISCUSSING THE 990 PRIOR TO FILING. NWF FINANCE STAFF, GENERAL COUNSEL AND THE BDO TAX PARTNER ADDRESS AND ANSWER ANY QUESTIONS THAT THE BOARD MAY HAVE.

Identifier	Return Reference	Explanation
	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

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	15A - THE COMPENSATION OF THE CEO OF NATIONAL WILDLIFE FEDERATION IS SET BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, WHICH CONSISTS OF SEVEN INDEPENDENT BOARD MEMBERS THE EXECUTIVE COMMITTEE RELIES ON AN ANNUAL COMPREHENSIVE COMPENSATION STUDY PREPARED BY AN INDEPENDENT OUTSIDE CONSULTING FIRM SPECIFICALLY FOR THE NATIONAL WILDLIFE FEDERATION 15B - 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 WHO ARE ALSO EMPLOYEES, THEIR COMPENSATION IS HANDLED AS DESCRIBED, EXCEPT THAT THE BOARD CHAIR IS A VOLUNTEER LEADER WHO IS NOT COMPENSATED

Identifier	Return Reference	Explanation
	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 _

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 1,170,814 CHANGE IN SPLIT INTEREST AGREEMENTS 259,562 GAIN (LOSS) ON PENSION INVESTMENT 2,041,642 CAPITALIZED IN-KIND GIFT 10,788 CHANGE IN NET ASSETS, NATIONAL WILDLIFE FEDERATION ENDOWMENT, INC TOTAL TO FORM 990, PART XI, LINE 5 3,482,806

Identifier	Return Reference	Explanation
THE PROCESS FOR REVIEW FOR 990	FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2010

Open to Public Inspection

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL WILDLIFE FEDERATION

Employer identification number

53-0204616

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on 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" on 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	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) NATIONAL WILDLIFE FEDERATION ENDOWMENT INC 11100 WILDLIFE CENTER DR RESTON, VA 201905362 52-0806695	SUPPORT NWF MISSION	DC	501C3	509A3, TYPE I	N/A		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(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) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) 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" on Form 990, Part IV, line 34, 35, 35A, or 36.)

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)

- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees

- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses

- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
1a		No
1b	Yes	
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m	Yes	
1n		No
1o		No
1p		No
1q	Yes	
1r		No

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	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII **Supplemental Information**

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

Identifier**Return Reference****Explanation****Schedule R (Form 990) 2010**