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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990. Open to Public Inspection

Α	For th	e 2014 calendar year, or tax year beginning	and ending					
В	Check if applicab	C Name of organization		D Employer iden	tification number			
	Addre	FRIENDS OF THE WORLD FOOD PROGRAM, INC.						
	Name	ge Doing business as World Food Program USA		13-3	843435			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone num	ber			
	Final	1725 I CODERM NU	510	202-	627-3732			
	termii ated	City or town, state or province, country, and ZIP or foreign postal code	**	G Gross receipts \$	G Gross receipts \$ 26,520,471			
	Amer	ded WASHINGTON, DC 20006		H(a) Is this a group	return			
	Appli- tion	F Name and address of principal officer.kichard black		for subordina	tes? Yes X No			
_	pendi	SAME AS C ABOVE			es included? Yes No			
1	Tax-ex	empt status: x 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)	(1) or 527	lf "No," attach	n a list. (see instructions)			
J	Websi	te: HTTP://WWW.WFPUSA.ORG		H(c) Group exemp	tion number			
K	Form o	forganization: x Corporation Trust Association Other	L Year	of formation: 1995	M State of legal domicile: DE			
P	art I	Summary						
ø	1	Briefly describe the organization's mission or most significant activities: BUII	D SUPPORT I	N THE US FOR TH	IE			
Governance		WORLD FOOD PROGRAMME AND THE OVERALL EFFORT TO ADDRESS GLO	BAL					
ern	2	Check this box if the organization discontinued its operations or discontinued its operations or discontinued its operations.	•	The state of the s	assets.			
δ	3	Number of voting members of the governing body (Part VI, line 1a)			3 14			
య	4	Number of independent voting members of the governing body (Part VI, line 1			4 12			
Activities	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)			5 28			
Ξį	6	Total number of volunteers (estimate if necessary)			6 100			
Act		Total unrelated business revenue from Part VIII, column (C), line 12			7a 0.			
-	b	Net unrelated business taxable income from Form 990-T, line 34		in the state of th	'b 0.			
	١.		:	Prior Year	Current Year			
ne	8	Contributions and grants (Part VIII, line 1h)		22,569,15				
Revenue	9	Program service revenue (Part VIII, line 2g)			0. 0.			
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		52,89				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-178,31				
-		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1		22,443,73				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		18,979,06				
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0. 0.			
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-		2,311,40				
eu	10a	Professional fundraising fees (Part IX, column (A), line 11e)	1000000		0.			
EX	170	Total fundraising expenses (Part IX, column (D), line 25)		2 300 00	2 052 500			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,399,00				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		23,689,469				
Ses	19	Revenue less expenses. Subtract line 18 from line 12		-1,245,73				
ets (20	Total agests (Part V. line 16)	De	ginning of Current Yea 21,501,83				
ASS	21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		16,955,27				
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		4,546,56				
	art II	Signature Block	************	1,310,30	0,101,012.			
		lities of perjury, I declare that I have examined this return, including accompanying sche	dules and statem	ents, and to the best of	my knowledge and belief, it is			
		at, and complete. Declaration of preparer (other than officer) is based on all information of			my morniougo ama somon, n to			
30000	*			,				
Sig	n	Signature of officer		Date				
Hei		RICHARD LEACH, PRESIDENT/CEO						
		Type or print name and title						
		Print/Type preparer's name Preparer's signature		Date / Check	PTIN			
Paid	1	YONG ZHANG, CPA GOZEL ZUCA	18	9/22/15 self-emp	ployed P01249785			
Pre	arer	Firm's name MCGLADREY LLP		Firm's EIN	THE STATE OF THE S			
	Only	Firm's address 1861 INTERNATIONAL DRIVE, SUITE 400						
		MCLEAN, VA 22102		Phone no.70	03-336-6400			
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

Pa	It III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	WFP USA IS A NONPROFIT ORGANIZATION THAT BUILDS SUPPORT IN THE US TO	
	END GLOBAL HUNGER. IT ENGAGES INDIVIDUALS AND ORGANIZATIONS, SHAPES	
	PUBLIC POLICY AND GENERATES RESOURCES FOR THE UNITED NATIONS WORLD	
	FOOD PROGRAMME AND OTHER HUNGER RELIEF EFFORTS.	
2	Did the organization undertake any significant program services during the year which were not listed on	
_		Yes X No
	If "Yes," describe these new services on Schedule O.	1100110
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
3		J fes L≛_ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expe	nses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$19,139,119. including grants of \$18,285,114.) (Revenue \$)
	GRANTS: IN 2014, GRANTS FROM THE WORLD FOOD PROGRAMME USA (WFP USA)	
	HELPED THE UN WORLD FOOD PROGRAMME (UNWFP) PROVIDE FOOD TO PEOPLE	
	SUFFERING FROM HUNGER IN THE WORLD'S POOREST COUNTRIES, INCLUDING	
	THOUSANDS OF CHILDREN IN SCHOOL MEAL PROGRAMS AS WELL AS THOSE AFFECTED	
	BY NATURAL DISASTERS AND CONFLICT. FOR THE YEAR ENDED DECEMBER 31,	
	2014, WFP USA, DONATED \$18,285,114 TO THE UN WORLD FOOD PROGRAMME.	
	ZOTI, HII ODII, BOMILED ÇIO, 2005, III IO IME ON HOMED 100D INCOMMEND.	
4b	(Code:) (Expenses \$1, 202, 416. including grants of \$) (Revenue \$))
	COMMUNICATIONS AND OUTREACH: THE COMMUNICATIONS DEPARTMENT AT WFP USA	
	SUPPORTS THE ORGANIZATION'S POLICY, FUNDRAISING AND OUTREACH GOALS BY	
	RAISING AWARENESS ABOUT GLOBAL HUNGER SOLUTIONS.	
_	702.676	
4c	(Code:) (Expenses \$)
	PUBLIC POLICY PROGRAM: WFP USA EDUCATES MEMBERS OF THE CONGRESS, THE	
	ADMINISTRATION AND OTHER OFFICIALS ABOUT INTERNATIONAL HUNGER ISSUES	
	AND SPECIFIC POLICIES THAT COULD IMPROVE U.S GOVERNMENT EFFORTS TO	
	ADDRESS GLOBAL HUNGER. WFP USA ALSO ADVOCATES FOR SUFFICIENT FUNDING TO	
	ENSURE THAT THE U.S. GOVERNMENT CONTINUES TO PROVIDE GLOBAL LEADERSHIP	
	IN REACHING PEOPLE IN NEED AROUND THE WORLD. TO BUILD STRONG SUPPORT	
	FOR U.S. LEADERSHIP IN ADDRESSING GLOBAL HUNGER, WFP USA COLLABORATES	
	WITH AND MOBILIZES OPINION LEADERS, BUSINESSES, GRASSROOTS NETWORK,	
	NONPROFITS, COALITIONS AND OTHERS.	
	·	
	Other progress consists (December in Calcadula C.)	
40	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ▶ 21,125,211.	-arm QQ ()(001.4)

Form 990 (2014) FRIENDS OF THE WORLD FOOD PROGRAM, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		77	
	Schedule D, Parts XI and XII	12a	Х	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	105		х
10	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		<u> </u>
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	225	

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

Form **990** (2014)

Form 990 (2014) **Part V** Sta Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response of note to any line in this Part V					Щ
	ı		l		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	23			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re				77	
٥-	(gambling) winnings to prize winners?		 I	1c	Х	
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	0-	28			
	filed for the calendar year ending with or within the year covered by this return	2a	l		х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax return Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Λ	
20				3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a			30		
- 74	financial account in a foreign country (such as a bank account, securities account, or other financial a		•	4a		х
h	If "Yes," enter the name of the foreign country:	10000		74		
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	ccour	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		` '	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
	any contributions that were not tax deductible as charitable contributions?			6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons c	or gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and contribut	vices p	provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as rec	uired			
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co			7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		<u> </u>
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
^				8		
9	Sponsoring organizations maintaining donor advised funds.			00		
_	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a 9b		
b 10	Section 501(c)(7) organizations. Enter:			90		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		ı			
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
				14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0		14b		

Form 990 (2014) FRIENDS OF THE WORLD FOOD PROGRAM, INC. 13-3843435 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		•	
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	tion A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Ū	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	1101 211 0110100 (This coolion & requeste information about periode net required by the internal riorenae code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- 10.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
.0	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	105		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	iou		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE 0			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	availah	le	
.5	for public inspection. Indicate how you made these available. Check all that apply.	.valiaD		
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
19	statements available to the public during the tax year.	ı ııı ıdı l	oiai	
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
20	RICHARD LEACH - 202-627-3732			

1725 I ST, NW, SUITE 510, WASHINGTON, DC

20006

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Leave this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A)	(B)	Ĭ		((C)			(D)	(E)	(F)
Name and Title	Average hours per week	box offi	not c , unle	Pos heck ss pe	ition more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) HUNTER BIDEN	4.00									
CHAIRMAN		Х		Х				0.	0.	0.
(2) BONNIE RAQUET	1.00									
VICE CHAIRMAN		Х		Х				0.	0.	0.
(3) SAMUEL "SANDY" BERGER	1.00									
SECRETARY/TREASURER		Х		Х				0.	0.	0.
(4) BARBARA BELMONT	1.00	-						_	_	_
DIRECTOR		Х						0.	0.	0.
(5) JONATHAN BLUM	1.00	-						_	_	_
DIRECTOR		Х						0.	0.	0.
(6) HON. ROBERT DOLE	1.00	-						_	_	_
DIRECTOR		Х						0.	0.	0.
(7) DR. MARSHA DUBROW	1.00	-						_	_	_
DIRECTOR		Х						0.	0.	0.
(8) HON. DANIEL GLICKMAN	1.00	-						_	_	_
DIRECTOR		Х						0.	0.	0.
(9) MATTHEW HARRINGTON	1.00	-						_	_	_
DIRECTOR		Х						0.	0.	0.
(10) MARSHALL MATZ	1.00	-						_	_	_
DIRECTOR		Х						0.	0.	0.
(11) DAVID NOVAK	1.00									
DIRECTOR		Х						0.	0.	0.
(12) RANDY RUSSELL	1.00	ļ								
DIRECTOR	1 00	Х						0.	0.	0.
(13) CARL STERN	1.00	ł								
DIRECTOR	1 00	Х						0.	0.	0.
(14) LAWRENCE DARROW	1.00	ł								
DIRECTOR	1 00	Х						0.	0.	0.
(15) JO ANN EMERSON	1.00	١								
DIRECTOR	40.00	Х						0.	0.	0.
(16) RICHARD LEACH	40.00	ļ.,		,,				204 224	_	20.004
PRESIDENT & CEO	40.00	Х	_	Х		\vdash	_	301,331.	0.	30,001.
(17) MARIANNE BERNER	40.00	ł				, .		177 060		07.0
VP FOR DEVELOPMENT	I					Х		177,069.	0.	876.

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Part VII Section A. Officers,	Directors, Truste	es, Key Em	ploy	ees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A) Name and title		(B) Average hours per week	(do box,	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) (E) Reportable Reportable compensation compensation from from related		n	an	(F) stimate nount other				
	o	(list any hours for related rganizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr org and	pensa om the anizat d relat anizatie	e ion ed
(18) SHANNON HISKEY		40.00												
VP FOR OPERATIONS							Х		154,682.		0.		22,	900.
(19) CHARLES DUJON DIR. OF GOV'T RELATIONS	_	40.00					,,		117 064				1.4	220
DIR. OF GOV I REDATIONS	_						Х		117,864.		0.			238.
	_													
									750.046					04.5
1b Sub-total									750,946.		0.		68,	015
c Total from continuation s d Total (add lines 1b and 1c									750,946.		0.		68	015
Total (add lines is and its Total number of individuals compensation from the organization)	(including but not							no re),000 of reportab			<u> </u>	4
	,												Yes	No
3 Did the organization list an line 1a? If "Yes," complete									highest compensated e			3		Х
4 For any individual listed on and related organizations g		-		-					•	-		4	Х	
5 Did any person listed on lin	n? If "Yes," compl					•			•			5		Х
Section B. Independent Contra														
Complete this table for you the organization. Report co	ū	•	•							*	npensa	ation f	from	
Nan	(A) ne and business a	ddress							(B) Description of s	services	Co	(C ompe	C) nsatio	n
3 T T 3 3 T T T T T T T T T T T T T T T								- 1						

(A) Name and business address	(B) Description of services	(C) Compensation
ALLAN JURY		
4948 WYNDHAM COURT, FAIRFAX, VA 22030	CONSULTING	202,750.
MINDSET DIRECT, 1700 N. JEFFERSON STREET,		
SUITE 200, ARLINGTON, VA 22205	CONSULTING	138,716.
SUNSHINE, SACHS MARKETING, 136 MADISON		
AVE, 17TH FLOOR, NEW YORK , NY 10016	CONSULTING	105,568.
2 Total number of independent contractors (including but not limited	d to those listed above) who received more than	

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\$100,000 of compensation from the organization

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
e a		Membership dues						
S, (С	Fundraising events	1c	147,000.				
a git	d	Related organizations	1d					
ini,	е	Government grants (contributi	ons) 1e					
r ioi	f	All other contributions, gifts, grant	s, and					
		similar amounts not included abov	/e 1f	25,571,472.				
do	g	Noncash contributions included in lines	1a-1f: \$					
<u>8 0</u>	h	Total. Add lines 1a-1f			25,718,472.			
				Business Code				
e S	2 a							
e Z	b							
Program Service Revenue	С							
ev ev	d							
S F	е							
₫	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f						
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶ │	42,723.			42,723.
	4	Income from investment of tax	-exempt bond p	roceeds 🕨				
	5	Royalties		>				
			(i) Real	(ii) Personal				
	6 a	Gross rents	105,763.					
	b	Less: rental expenses	571,974.					
		Rental income or (loss)	-466,211.					
	d	Net rental income or (loss)		>	-466,211.			-466,211.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	653,513.					
	b	Less: cost or other basis						
		and sales expenses	661,525.	,				
	С	Gain or (loss)	-8,012.	-2,113.				
		Net gain or (loss)		>	-10,125.			-10,125.
e	8 a	Gross income from fundraising	,					
		including \$ 147						
Other Reven		contributions reported on line						
ĕ		Part IV, line 18						
₹		Less: direct expenses		73,303.	E2 202			#2.202
		Net income or (loss) from fund		>	-73,303.			-73,303.
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses		$\overline{}$				
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
-	С	Net income or (loss) from sales						
-	44 -	Miscellaneous Revenue		Business Code				
	11 a			 				
	b	-		 				
	C	All other recessions	-	 				
		All other revenue						
		Total. Add lines 11a-11d Total revenue. See instructions.			25,211,556.	0.	0.	-506,916.
	12	iolai ievenue. See msuluciions.		🖊 📗	72, ZII, 330.	ı °•l	υ.	1 -200,310.

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).

	Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	60,634.	60,634.		
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	10 004 100	10.004.400		
	individuals. See Part IV, lines 15 and 16	18,224,480.	18,224,480.		
	Benefits paid to or for members				
	Compensation of current officers, directors,	220 262	111 040	60 704	140 700
	trustees, and key employees	329,262.	111,849.	68,704.	148,709.
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1,550,938.	E20 020	224 152	605 057
	Other salaries and wages	1,550,936.	530,828.	334,153.	685,957.
	Pension plan accruals and contributions (include	A1 ECC	12,969.	E 627	22 070
	section 401(k) and 403(b) employer contributions)	41,566. 110,379.	12,969. 34,438.	5,627. 14,943.	22,970. 60,998.
	Other employee benefits	138,599.	48,796.	29,784.	60,998.
	Payroll taxes	130,399.	40,730.	23,704.	00,019.
	Fees for services (non-employees):				
	Management	189,531.	62,891.	37,186.	89,454.
	Legal	69,874.	23,186.	13,709.	32,979.
	Accounting	05,074.	25,100.	13,703.	52,575.
	Lobbying Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A) amount, list line 11g expenses on Sch 0.)	1,866,560.	1,466,647.	51,795.	348,118.
	Advertising and promotion	1,000,500.	1,100,017.	31,753.	310,110.
	Office expenses	176,008.	39,441.	16,104.	120,463.
	Information technology	285,250.	131,357.	16,486.	137,407.
	Royalties				
	Occupancy	542,754.	188,798.	119,338.	234,618.
	Travel	109,096.	42,076.	8,865.	58,155.
	Payments of travel or entertainment expenses			,,,,,,,	
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	91,443.	80,938.	2,863.	7,642.
	Interest	338.	118.	74.	146.
	Payments to affiliates				
	Depreciation, depletion, and amortization	99,668.	34,670.	21,914.	43,084.
	Insurance	17,114.	5,953.	3,763.	7,398.
24	Other expenses. Itemize expenses not covered		·		
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
	DUES & MEMBERSHIP	32,165.	18,262.	3,245.	10,658.
b	STAFF DEVELOPMENT	12,993.	4,768.	901.	7,324.
С	FUND. EXP ON LINE 8B	-73,303.			-73,303.
d	RENTAL EXP. ON LINE 6B	-571,974.		-571,974.	•
е	All other expenses	6,071.	2,112.	1,335.	2,624.
	Total functional expenses. Add lines 1 through 24e	23,309,446.	21,125,211.	178,815.	2,005,420.
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2014) Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			434.	1	269.
	2	Savings and temporary cash investments			17,377,807.	2	13,833,727.
	3	Pledges and grants receivable, net		2,615,953.	3	5,913,099.	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
ş		employers and sponsoring organizations of sect	tion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			47,879.	9	93,912.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	602,832.			
	b	Less: accumulated depreciation		186,459.	448,661.	10c	416,373.
	11	Investments - publicly traded securities	996,661.	11	1,029,184.		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		14,442.	15	0.	
	16	Total assets. Add lines 1 through 15 (must equ	21,501,837.	16	21,286,564.		
	17	Accounts payable and accrued expenses		210,371.	17	250,167.	
	18	Grants payable	15,508,265.	18	13,143,566.		
	19	Deferred revenue			24,357.	19	230,987.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D	571,368.	21	574,607.
es	22	Loans and other payables to current and former	officer	s, directors, trustees,			
∄		key employees, highest compensated employee	-				
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela	ated thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D			640,912.	25	625,395.
	26	Total liabilities. Add lines 17 through 25			16,955,273.	26	14,824,722.
		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🗓 and			
Ses		complete lines 27 through 29, and lines 33 an					
auc	27	Unrestricted net assets			2,965,537.	27	4,767,238.
Fund Balances	28	Temporarily restricted net assets	1,581,027.	28	1,694,604.		
pu	29					29	
		Organizations that do not follow SFAS 117 (A	3), check here 🕨 📖				
Ä		and complete lines 30 through 34.					
sets	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or	32	Retained earnings, endowment, accumulated in		_		32	
_	33	Total net assets or fund balances			4,546,564.	33	6,461,842.
	34	Total liabilities and net assets/fund balances			21,501,837.	34	21,286,564.

Form **990** (2014)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		25	,211	,556.
2	Total expenses (must equal Part IX, column (A), line 25)	2		23	,309	,446.
3	Revenue less expenses. Subtract line 2 from line 1	3		1	,902	,110.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4	,546	,564.
5	Net unrealized gains (losses) on investments	5			13	,168.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10		6	,461	,842.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					Х
			_		Yes	No
1	Accounting method used to prepare the Form 990: Lash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	lit			
	Act and OMB Circular A-133?		L	За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	it			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2014)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

FRIENDS OF THE WORLD FOOD PROGRAM, INC.

Employer identification number

13-3843435 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) 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). 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Let Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your organization (described on lines 1-9 support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	39,799,869.	39,724,498.	24,435,947.	22,569,157.	25,718,472.	152,247,943.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	39,799,869.	39,724,498.	24,435,947.	22,569,157.	25,718,472.	152,247,943.
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)						24,554,117.
6	Public support. Subtract line 5 from line 4.						127,693,826.
	tion B. Total Support	1	· · · · · · · · · · · · · · · · · · ·			-	
	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	39,799,869.	39,724,498.	24,435,947.	22,569,157.	25,718,472.	152,247,943.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	29,818.	43,776.	21,279.	148,244.	148,486.	391,603.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		0.005				0.005
	assets (Explain in Part VI.)		2,296.				2,296.
11	Total support. Add lines 7 through 10		,				152,641,842.
12	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	-	s first, second, third	d, fourth, or fifth ta	ıx year as a sectio	n 501(c)(3)	
Sec	organization, check this box and storetion C. Computation of Publ		rcentage				P
				al (f))		44	83.66 %
	Public support percentage for 2014 (15	, ,
15	Public support percentage from 2013 33 1/3% support test - 2014. If the discounting the support test - 2014 is the discounting test - 2014.						
10a							x and x
h	stop here. The organization qualifies 33 1/3% support test - 2013. If the o						
L.	and stop here. The organization qual	•		•		•	
170	10% -facts-and-circumstances tes						
17 a		_					
	and if the organization meets the "fact meets the "facts-and-circumstances"			-	•	-	
h	10% -facts-and-circumstances tes						
Ď.	more, and if the organization meets the	_					
	organization meets the "facts-and-circ		ŕ		•		·
18	Private foundation. If the organization		-	•			s •

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.)

Se	ction A. Public Support	siow, produce corri	piete i dit ii.)				
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and		, ,	, ,	` ,		,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
Ĭ	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	A Amounts included on lines 1, 2, and						
•	3 received from disqualified persons						
I	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						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support						<u> </u>
Cal	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6			` ′		, ,	
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
_	check this box and stop here						>
Se	ction C. Computation of Publ	c Support Pe	ercentage				
15	Public support percentage for 2014 (I	ine 8, column (f) c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2013	Schedule A, Parl	t III, line 15			16	%
Se	ction D. Computation of Inves	stment Incom	ne Percentage	1			
17	Investment income percentage for 20	14 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from 2	2013 Schedule A,	Part III, line 17			18	%
	a 33 1/3% support tests - 2014. If the					33 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar	-					
ı	33 1/3% support tests - 2013. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organizatio						

Page 4

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
- Ga		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
Ioa		
10b		

Sche	edule A (Form 990 or 990-EZ) 2014 FRIENDS OF THE WORLD FOOD PROGRAM, INC.	13-3843435	Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	110		
<u> </u>	ation B. Type roupporting Organizations		Vaa	Na
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
800	tion D. Type III Supporting Organizations			
360	ation b. Type in Supporting Organizations		V	NI.
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see ins	tructions):		
а	The organization satisfied the Activities Test. Complete line 2 below.	a doubling.		
b	The organization is the parent of each of its supported organizations. <i>Complete line 3</i> below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	v (see instructions	3)	
2		y (See manacheme	Yes	No
	Activities Test. Answer (a) and (b) below.		163	140
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Type III Non-Functionally Integrated 509(a)(3) Supporting					
1	— ····································					
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	(5) 6		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
	Fair market value of other non-exempt-use assets	1c				
	Total (add lines 1a, 1b, and 1c)	1d				
	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
-	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional		ed Type III supportina ord	anization (see		
	instructions).	, 5), ii 9	•		

Schedule A (Form 990 or 990-EZ) 2014

Par	rt V Type III Non-Functionally Integrat	ed 509	(a)(3) Supporting Organic	anizations _(continued)	
Secti	tion D - Distributions			,	Current Year
1	Amounts paid to supported organizations to accom				
2	Amounts paid to perform activity that directly furthe	rs exem	ot purposes of supported		
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exemp	t purpos	es of supported organizatior	ns	
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval requ	uired)			
6	Other distributions (describe in Part VI). See instruc	tions.			
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to	which t	he organization is responsive	9	
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2014 from Section C, line 6	6			
10	Line 8 amount divided by Line 9 amount				
Secti	tion E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6	 S			
2	Underdistributions, if any, for years prior to 2014				
	(reasonable cause required-see instructions)				
3	Excess distributions carryover, if any, to 2014:				
а					
b					
С					
d					
е	From 2013				
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
h	Applied to 2014 distributable amount				
i	Carryover from 2009 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2014 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2014 distributable amount				
С	Remainder. Subtract lines 4a and 4b from 4.				
5	Remaining underdistributions for years prior to 2014	1, if			
	any. Subtract lines 3g and 4a from line 2 (if amount				
	greater than zero, see instructions).				
6	Remaining underdistributions for 2014. Subtract line	es 3h			
	and 4b from line 1 (if amount greater than zero, see				
	instructions).				
7	Excess distributions carryover to 2015. Add lines	3j			
	and 4c.				
8	Breakdown of line 7:				
a					
b					
C					
	Excess from 2013				
е	Excess from 2014				

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 FRIENDS OF THE WORLD FOOD PROGRAM, INC.	13-3843435	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a	or 17b; and Part III, lir	
Also complete this part for any additional information. (See instructions).		
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
OTHER INCOME FROM EXEMPT ACTIVITY		
2011 AMOUNT: \$ 2,296.		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

FRI	ENDS OF THE WORLD FOOD PROGRAM, INC.	13-3843435				
Organization type (check on	ne):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour line 1. Complete Parts I and II.	or 16b, and that received from				
year, total contribut	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
year, contributions of schecked, enter he purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from exclusively for religious, charitable, etc., purposes, but no such contributions totaled meere the total contributions that were received during the year for an exclusively religious mplete any of the parts unless the General Rule applies to this organization because it etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., t received <i>nonexclusively</i>				
but it must answer "No" on F	at is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	, , , , , , , , , , , , , , , , , , , ,				

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

Name of organization	Employer identification number
FRIENDS OF THE WORLD FOOD PROGRAM, INC.	13-3843435

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		- \$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. <u>4</u>	Name, address, and ZIP + 4	* 1,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		- \$ 1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 6	Name, address, and ZIP + 4	Total contributions - \$ 750,000.	Person X Payroll

Name of organization

Employer identification number

FRIENDS OF THE WORLD FOOD PROGRAM, INC.

13-3843435

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

me of orgar	IIIZAUOII		Employer identification numbe
IENDS OF	THE WORLD FOOD PROGRAM, INC. Exclusively religious, charitable, etc., contri the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona	charitable, etc., contributions of \$1,000 c	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 lowing line entry. For organizations or less for the year. (Enter this info. once.)
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- - -		(e) Transfer of gi	jift
 - -	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
n) No. From Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- - -	Transferee's name, address, and	(e) Transfer of gi	gift Relationship of transferor to transferee
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ <u>-</u>	Tunnafarra la manua addusa a m	(e) Transfer of gi	gift Relationship of transferor to transferee
- - -	Transferee's name, address, and	U ZIF + 4	netationship of transferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_	Transferee's name, address, and	gift Relationship of transferor to transferee	
-			

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

OMB No. 1545-0047 **2014**

Open to Public Inspection

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

-	0 - + i 504 (-)(4) (5) (6) i	tion of October 111			
	Section 501(c)(4), (5), or (6) organizane of organization	tions: Complete Part III.		Emn	loyer identification number
Ivali	•	THE WORLD FOOD PROGRAM,	TNC	Linp	13-3843435
Pa		anization is exempt und		or is a section 527 o	
	it i A complete ii ale ele	Jameadon 10 oxompt and	0. 0001.01. 00 1(0)	0.10 0.0001011 027 0	n gamzationi
4	Provide a description of the organiz	zation's direct and indirect politics	al campaign activities i	in Part IV	
	Political expenditures	•			
	Volunteer hours				
Ŭ	Volunteed floure				
Pa	art I-B Complete if the org	ganization is exempt und	er section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	er section 4955	> \$	S
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	5 ▶ \$	S
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.		== ./ `		() ()
		ganization is exempt und			
	Enter the amount directly expended				S
2	Enter the amount of the filing organ	ization's funds contributed to oth	ner organizations for se		
	exempt function activities				S
3	Total exempt function expenditures			'	
	line 17b			▶\$	
4	Did the filing organization file Form	•			*****
5	Enter the names, addresses and er			•	0 0
	made payments. For each organiza	•			•
	contributions received that were pr political action committee (PAC). If			•	ate segregated fund or a
	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·			1
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate
					political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 Part II-A Complete if the org	FRIENDS OF THE V	WORLD FOOD PROGRAM	i, INC. n 501(c)(3) and fil	13-384 ed Form 5768 (e	
section 501(h)).	jameation io ox	mpt under cootie	00 1(0)(0) and	04 1 01111 07 00 (0	
A Check ▶ ☐ if the filing organiza	ation belongs to an at	filiated group (and list in	n Part IV each affiliated	group member's nam	e, address, EIN,
	re of excess lobbying				
B Check ▶ ☐ if the filing organiza	ation checked box A	and "limited control" pro	ovisions apply.		
	its on Lobbying Exp ditures" means amo	enditures ounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion	(grass roots lobbying)		63,994.	
b Total lobbying expenditures to infl	uence a legislative be	ody (direct lobbying)		56,113.	
c Total lobbying expenditures (add	ines 1a and 1b)			120,107.	
d Other exempt purpose expenditur				23,834,616.	
e Total exempt purpose expenditure	es (add lines 1c and	d)		23,954,723.	
f Lobbying nontaxable amount. Ent				1,000,000.	
If the amount on line 1e, column (a)	or (b) is: The lo	bbying nontaxable am	ount is:		
Not over \$500,000	20% c	f the amount on line 1e			
Over \$500,000 but not over \$1,00	0,000 \$100,0	000 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,0	000 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,0	000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000),000.			
g Grassroots nontaxable amount (el	nter 25% of line 1f)			250,000.	
h Subtract line 1g from line 1a. If ze	ro or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zer	o or less, enter -0- \dots			0.	
j If there is an amount other than ze	ero on either line 1h o	r line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	year?			L	Yes No
(Some organizations t	hat made a section See the sepa	rate instructions for li	have to complete all nes 2a through 2f.)	of the five columns b	elow.
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	78,415	. 75,398.	124,263.	120,107.	398,183.
d Grassroots nontaxable amount	250,000	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.

Schedule C (Form 990 or 990-EZ) 2014

238,825.

63,994.

f Grassroots lobbying expenditures

53,524.

84,903.

36,404.

Schedule C (Form 990 or 990-EZ) 2014 FRIENDS OF THE WORLD FOOD PROGRAM, INC. 13-3843435 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)).

he lobbying activity.				
	Yes	No	Am	ount
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?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
n Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities?				
j Total. Add lines 1c through 1i				
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
If "Yes," enter the amount of any tax incurred under section 4912				
If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
a in the initing organization into an execution to the tank, and it into the initing for this year in	tion 501(c)(5), or s	ection	
rt III-A Complete if the organization is exempt under section 501(c)(4), sec	•			
rt III-A Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).				
rt III-A Complete if the organization is exempt under section 501(c)(4), sec			Yes	N
rt III-A Complete if the organization is exempt under section 501(c)(4), sec		1	Yes	N
rt III-A Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).			Yes	N
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	tion 501(c	2 3)(5), or s	ection	
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."	tion 501(c ed "No," O	2 3)(5), or s R (b) Pa	ection	
THII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? IT III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	tion 501(c d "No," O	2 3)(5), or s R (b) Pa	ection	
rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	tion 501(c d "No," O	2 3)(5), or s R (b) Pa	ection	
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TILLA Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the edoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?	tion 501(c d "No," O	2 3)(5), or s R (b) Pa 1 2a 2b 2c 3	ection	
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were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of policital expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the edoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?	tion 501(c d "No," O	2 3 (5), or s R (b) Pa 2a 2b 2c 3	ection rt III-A, li	ne 3,

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

PRIENDS OF THE WORLD FOOD DROCDAM THE

Employer identification number

FRIENDS OF THE WORLD FOOD PROGRAM, INC. 13-3843435 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) **2**c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located 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 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

\$ \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue 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 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

13-3843435 Page 2

Par	t III	Organizations Maintaining C	ollections of A	t, Historical Tr	easures, or C)ther	Simila	ar Asse	ts (conti	nued)	
3	Using	g the organization's acquisition, accessi	on, and other record	s, check any of the	following that are	a sign	ificant ι	use of its	collectio	n item	าร
	(chec	ck all that apply):									
а		Public exhibition	d	Loan or excl	hange programs						
b		Scholarly research	е	Other							
С		Preservation for future generations									
4	Prov	ide a description of the organization's co	ollections and explain	n how they further th	ne organization's	exemp	t purpo	se in Par	XIII.		
5		ng the year, did the organization solicit o						_	-		_
_		sold to raise funds rather than to be ma						L	Yes		No
Par	t IV	Escrow and Custodial Arran		ete if the organizatio	n answered "Yes	" to Fo	rm 990,	Part IV, I	ine 9, or		
		reported an amount on Form 990, Par									
1a		e organization an agent, trustee, custodi		-					7		7
		orm 990, Part X?							Yes	X	No
b	If "Y€	es," explain the arrangement in Part XIII	and complete the fo	llowing table:							
							\vdash		Amoun	ıt	
С	-	nning balance					1c				
d		tions during the year					1d				
е		ibutions during the year					1e				
f		ng balance					1f		1		
		he organization include an amount on Fo				-	?	<u>X</u>	Yes		∐ No
		es," explain the arrangement in Part XIII.								Х	
Par	ιν	Endowment Funds. Complete in					Th		F		la a a la
			(a) Current year	(b) Prior year	(c) Two years ba			ears back	(e) F0u		
		nning of year balance	968,826.	968,826.	968,82	20.	9	68,826.		900	,826.
b		ributions									
C		nvestment earnings, gains, and losses				+					
d		its or scholarships				+					
е		er expenditures for facilities									
		programs				+					
		inistrative expenses	968,826.	968,826.	968,82	26	9	68,826.		968	,826.
g		of year balance		,	,			00,020.		500	,020.
2		rd designated or quasi-endowment	100.00	e (iirie 1g, columii (a %	i)) Held as.						
a b		nanent endowment	%								
C		porarily restricted endowment									
·		percentages in lines 2a, 2b, and 2c shou									
За	-	here endowment funds not in the posse	•	ation that are held a	nd administered	for the	organiz	ation			
-	by:	incre chaetiment fanas net in the peece	colori or tire organiza	anor triat are from a	ina damininotoroa	101 1110	or garniz	ation		Yes	No
	-	unrelated organizations							3a(i)		Х
									· ` `		Х
b	` '	es" to 3a(ii), are the related organizations							3b		
4		cribe in Part XIII the intended uses of the									
Par		Land, Buildings, and Equipm									
		Complete if the organization answered	d "Yes" to Form 990	, Part IV, line 11a. S	ee Form 990, Pai	rt X, line	e 10.				
		Description of property	(a) Cost or o	ther (b) Cost	or other (c) Accı	ımulate	d	(d) Boo	k valu	e
			basis (investn	nent) basis	(other)	depre	ciation				
1a	Land	l									
b	Build	lings									
		ehold improvements			294,956.		71,	051.		223	,905.
d		pment			165,012.		63,	254.		101	,758.
	Othe	r			142,864.		52,	154.		90	,710.
Total	. Add	lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0c.)			>		416	,373.
							9	Schedule	D (Forr	n 990	2014

Part VII	Investments -	Other	Securities.

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

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.

(5) (6) (7) (8) (9)

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED LEASE BENEFIT	391,029.
(3)	CAPITAL LEASE OBLIGATION	5,712.
(4)	TENANT IMPROVEMENT	228,654.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	625,395.

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

Schedule D (Form 990) 2014

Pai	t XI Reconciliation of Revenue per Audited Financial State		Revenue per R	eturn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12				25 070 001
1	Total revenue, gains, and other support per audited financial statements			1	25,870,001.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	اما	12 160		
a	Net unrealized gains (losses) on investments		13,168.		
b	Donated services and use of facilities				
	Recoveries of prior year grants		645,277.		
d	Other (Describe in Part XIII.)		,	0-	658,445.
e	Add lines 2a through 2d			2e 3	25,211,556.
3 4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				23,211,330.
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a b	Other (Describe in Part XIII.)			•	
	A LLP A LAN			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	25,211,556.
	t XII Reconciliation of Expenses per Audited Financial State			_	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12				
1	Total expenses and losses per audited financial statements			1	23,954,723.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)		645,277.		
е	Add lines 2a through 2d			2e	645,277.
3	Subtract line 2e from line 1			3	23,309,446.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	23,309,446.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F			4; Part X,	line 2; Part XI,
iines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	additional inform	ation.		
-					
PART	IV, LINE 2B:				
	11, 2112 25.				
THE	PURPOSE OF THE FUND SHALL BE TO MAKE GRANTS TO SUPPORT EDUCA	TION AND			
EDUC	ATIONAL OPPORTUNITIES FOR NEEDY AND WORTHY GIRLS AND WOMEN I	N			
DEVE	LOPING NATIONS.				
CATH	ERINE BERTINI SHALL SERVE AS ADVISOR TO THE FUND. SHE SHALL	MAKE			
RECO	MMENDATIONS TO THE BOARD OF DIRECTORS OF WFP USA. THE BOARD	OF WFP			
USA	SHALL CONSIDER SUCH RECOMMENDATIONS AND, IN ITS SOLE DISCRET	ION, SHALL			
MAKE	SUCH DECISIONS AS THE BOARD DEEMS APPROPRIATE. THE BOARD (OR ITS			
DESI	GNATED FINANCIAL ADVISOR) SHALL MAKE DECISIONS AS TO INVESTM	ENT OF THE			
FUNI					

Schedule D (Form 990) 2014 Part XIII | Supplemental Information (continued)

PART V, LINE 4:

THE BOARD OF DIRECTORS OF WFP USA ADOPTED A RESERVE POLICY THAT REQUIRES

THE ORGANIZATION TO MAINTAIN UNRESTRICTED NET ASSETS IN AN AMOUNT EQUAL TO

AT LEAST SIX (6) MONTHS OF ITS OPERATING BUDGET. THIS RESERVE IS ADJUSTED

ANNUALLY TO TAKE INTO ACCOUNT CHANGES IN THE OPERATING BUDGET.

PART X, LINE 2:

WFP USA HAS ADOPTED THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY

IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS

CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN

THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, WFP USA MAY RECOGNIZE THE

TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS

MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED UPON

EXAMINATION BY TAXING AUTHORITIES, BASED UPON THE TECHNICAL MERITS OF THE

POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM

SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A

GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE

SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES

ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON

INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT HAS EVALUATED

WFP USA'S TAX POSITIONS AND HAS CONCLUDED THAT WFP USA HAS TAKEN NO

UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL

STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE.

WFP USA WOULD BE LIABLE FOR INCOME TAXES IN THE U.S. FEDERAL JURISDICTION.

GENERALLY, WFP USA IS NO LONGER SUBJECT TO U.S. FEDERAL TAX EXAMINATIONS

BY TAX AUTHORITIES BEFORE 2011.

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

FRIENDS OF THE WORLD FOOD PROGRAM, INC.

Employer identification number

13-3843435

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? _____X Yes ____ No
- **2** For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

United States. 3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is ne	eeded.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM GRANTS TO UNWFP		355,678.
EAST ASIA AND THE	0	0	PROGRAM GRANTS TO UNWFP		3,212,362.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM GRANTS TO UNWFP		406,489.
MIDDLE EAST AND					
NORTH AFRICA	0	0	PROGRAM GRANTS TO UNWFP		3,807,132.
SUB-SAHARAN AFRICA	0	0	PROGRAM GRANTS TO UNWFP		10,442,819.
3 a Sub-total b Total from continuation sheets to Part I	0	-			18,224,480.
c Totals (add lines 3a and 3b)	0	0			18,224,480.

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

Schedule F (Form 990) 2014

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ASSIST IN ALLEVIATING					
		AND THE CARIBBEAN	HUNGER	355,678.	WIRE TRANSFER	0.		
		EAST ASIA AND THE	ASSIST IN ALLEVIATING					
		PACIFIC	HUNGER	3,212,362.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND AND	ASSIST IN ALLEVIATING					
		GREENLAND)	HUNGER	406,489.	WIRE TRANSFER	0.		
		MIDDLE EAST AND	ASSIST IN ALLEVIATING					
		NORTH AFRICA	HUNGER	3,807,132.	WIRE TRANSFER	0.		
		SUB-SAHARAN	ASSIST IN ALLEVIATING					
		AFRICA	HUNGER	10 442 819.	WIRE TRANSFER	0.		
2 Enter total number of	recipient organization	une listed above that are	recognized as charities by the	foreign country	recognized as tay o	vemnt by		
			n 501(c)(3) equivalency letter		, recognized as tax-e			1

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.												
Part III can be duplicated if additional space is needed.												
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)					

Schedule F (Form 990) 2014 F 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, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? 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	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	X Yes	☐ No

Schedule F (Form 990) 2014

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)

(estimated number of recipients), as applicable. Also complete this part to provide any additional information.
PART I, LINE 2:
WFP USA MONITORS GRANTS MADE BY IT TO UNWFP THROUGH THE REVIEW OF
NARRATIVE AND FINANCIAL REPORTS PROVIDED TO IT BY THE UNWFP. SUCH REPORTS
ARE PROVIDED BOTH BY THE HEADQUARTERS OFFICE (LOCATED IN ROME) OF UNWFP
AND BY THE COUNTRY FIELD OFFICES OF THE UNWFP. THESE REPORTS DESCRIBE HOW
THE GRANTED FUNDS WERE SPENT, ACTIVITIES CONDUCTED, PROGRESS ACHIEVED,
AND GOALS TO BE MET. IN ADDITION TO SUCH REPORTS, THE WEB SITE OF UNWFP
PROVIDES DETAILED INFORMATION IN REGARD TO ITS GLOBAL HUNGER RELIEF
ACTIVITIES, INCLUDING THE DISCLOSURE OF FUNDS SPENT ON A PER COUNTRY
BASIS AND THE PROJECTED RESULTS AND IMPACT IN EACH SUCH COUNTRY WHERE
HUNGER RELIEF EFFORTS ARE CONDUCTED BY UNWFP AND ITS PARTNERS.
PART I, LINE 3:
THE ORGANIZATION USES GAAP TO REPORT EXPENDITURES IN A FOREIGN REGION.
SCHEDULE F, PART I AND II:
RESOURCES EXPENDED ARE USED FOR FOOD ASSISTANCE NEEDS PRIMARILY IN
AFRICA, ASIA, CENTRAL AMERICA AND EUROPE.
SCHEDULE F, PART IV, LINE 6:
THE ORGANIZATION HAS FILED FORM 5713 UNDER SEPARATE COVER TO THE IRS.
THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 990-T.

SCHEDULE G

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form.99

OMB No. 1545-0047

2014

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Name of the organization	bout Schedule a (Form 390 of 390-LZ)	and its	ilistiu	ictions is at www.irs.g	IOV/IC		ntification number	
FRIENDS OF THE WORLD FOOD PROGRAM, INC. 13-3843435								
Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
Indicate whether the organization rais	e Solicitat f Solicitat g Special or oral agreement with any individual cart VII) or entity in connection with p ividuals or entities (fundraisers) purs	ion of ion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees	Yes		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have con contribu	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	to (Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No					
Total								
3 List all states in which the organization or licensing.	on is registered or licensed to solicit (contrib	outions	s or has been notified	d it is	exempt from re	egistration	

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events NONE (add col. (a) through AWARD CEREMONY col. (c)) (event type) (total number) (event type) Revenue 147,000 1 Gross receipts 147,000. 2 Less: Contributions 147,000 147,000. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 73,303. 73,303. 9 Other direct expenses 73,303. 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) -73,303. 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** 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: ___

Sch	nedule G (Form 990 or 990-EZ) 2014 FRIENDS OF THE WORLD FOOD PROGRAM, INC. 13-38	43435	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
	a The organization's facility	13a	%
	o An outside facility	1 1	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		,,,
	Name ▶		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
ŀ	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \$\bigs\\$		
	of "Yes," enter name and address of the third party:		
	· · · · · · · · · · · · · · · · · · ·		
	Name		
	Address		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation > \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
•	retain the state gaming license?	Yes	□ No
ŀ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, I	ines 9. 9b. 1	0b. 15b.
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).		

Schedule 6	G (Form 990 or 990-EZ)	FRIENDS OF THE WORLD FOOD PRO	OGRAM, INC.	13-3843435	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (continued)			
		,			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

➤ Attach to Form 990.

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

OMB No. 1545-0047
2014

Open to Public Inspection

Name of the organization FRIENDS OF THE	WORLD FOOD I	PROGRAM INC.					Employer identification number
Part I General Information on Grants a		, -					
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro 	stance?						
Part II Grants and Other Assistance to I					anization answered "\	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$	5,000. Part II car	be duplicated if addit	ional space is need	led.	(8.1	_	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGRESSIONAL HUNGER CENTER 400 NORTH CAPITOL ST NW WASHINGTON, DC 20001	52-1842738	501(C)(3)	10,000.	0.			GRANTS TO SUPPORT HUNGER PROGRAMS
CHICUCHAS WASI SCHOOL FOR GIRLS P.O. BOX 2031 SONOMA, CA 95476	68-0188327	501(C)(3)	10,750.	0.			GRANTS FOR GIRLS' AND WOMEN'S EDUCATION
CHANCE FOR CHANGE 5 ARCARDI COURT BLOOMFIELD, NJ 07003	45-2430783	501(C)(3)	9,534.	0.			GRANTS FOR GIRLS' AND WOMEN'S EDUCATION
GLOBAL CHILD NUITRITION FOUNDATION 120 WATERFRONT STREE, SUITE 300 NATIONAL HARBOR, MD 20745	20-5094658	501(C)(3)	10,000.	0.			GRANTS TO SUPPORT SCHOOL FEEDING EFFORTS
ADVANCING GIRLS' EDUCATION IN AFRICA - 921 PENNSYLVANIA AVE SE #308 - WASHINGTON, DC 20003	27-0143166	501(C)(3)	14,350.	0.			GRANTS FOR GIRLS' AND WOMEN'S EDUCATION
2 Enter total number of section 501(c)(3) a	nd government o	rganizations listed in th	ne line 1 table				> 5.
3 Enter total number of other organizations							> 0.

ART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:					
PART I, LINE 2:	ired in Part I, lin	e 2, Part III, columr	n (b), and any other a	dditional information.	
WFP USA MONITORS FUNDS GRANTED DOMESTICALLY BY REQUI	RING THAT G	RANTEES			
PROVIDE AN OFFICIAL ACKNOWLEDGEMENT OUTLINING KEY EL	LEMENTS OF T	HE GRANT,			
INCLUDING AMOUNT, DESIGNATION AND DATE. ADDITIONALLY	GRANTEES M	AY BE			
REQUIRED TO SUBMIT A FINAL REPORT ON WHEN AND HOW FU	UNDS WERE US	ED,			
ACTIVITIES AND RESULTS ACHIEVED AS WELL AS IMPACT ON	N BENEFICIAR	IES /			
COMMUNITIES.					

SCHEDULE J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

FRIENDS OF THE WORLD FOOD PROGRAM, INC.

Employer identification number 13-3843435

Pa	art 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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Z Compensation survey or study			
	Form 990 of other organizations X 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:			
	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the revenues of:			₩
	The organization?	5a		Х
D	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
6	contingent on the net earnings of:			
_		6a		х
d h	The organization? Any related organization?		-	Х
Ŋ	Any related organization?	6b		-
7	If "Yes" to line 6a or 6b, describe in Part III.			
′	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	7		х
Q	not described in lines 5 and 6? If "Yes," describe in Part III			_ ^\
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	8		х
c	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	P		_ ^\
9	Regulations section 53 4958-6(c)?	۵		

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

Schedule J (Form 990) 2014

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(5)(1)-(0)	reported as deferred in prior Form 990
(1) RICHARD LEACH	(i)	300,917.	0.	414.	2,070.	27,931.	331,332.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARIANNE BERNER	(i)	176,751.	0.	318.	0.	876.	177,945.	0.
VP FOR DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SHANNON HISKEY	(i)	154,406.	0.	276.	6,288.	16,612.	177,582.	0.
VP FOR OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDS OF THE WORLD FOOD PROGRAM, INC.

Employer identification number

13-3843435

,,
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
HUNGER.
FORM 990, PART VI, SECTION B, LINE 11:
THE FORM 990 IS COMPLETED ANNUALLY AND COPIES ARE PROVIDED TO THE ENTIRE
GOVERNING BOARD AS WELL AS TO THE PRESIDENT/CEO OF THE ORGANIZATION. THE
PRESIDENT/CEO REVIEWS THE FORM 990 WITH THE AUDIT COMMITTEE AND CHIEF
FINANCIAL OFFICER. AFTER THOROUGH REVIEW BY THE PRESIDENT/CEO, AUDIT
COMMITTEE & CHIEF FINANCIAL OFFICER AND ONCE ALL ARE IN AGREEMENT THE 990
IS SUBMITTED FOR FINAL EDITS. A COPY OF THE APPROVED FORM 990 IS PROVIDED
TO ALL OF THE OFFICERS AND BOARD MEMBERS BEFORE THE RETURN IS FILED. ONCE
DISTRIBUTED TO ALL INVOLVED, THE FINAL FORM 990 IS SIGNED BY THE
PRESIDENT/CEO, DATED AND SUBMITTED BY THE FILING DEADLINE.
FORM 990, PART VI, SECTION B, LINE 12C:
WFP USA HAS SET FORTH A PROCEDURE TO RESOLVE CONFLICTS OF INTEREST AS THEY
MAY ARISE AS OUTLINED IN OUR CONFLICT OF INTEREST POLICY. EVERY NEW OFFICER
OR DIRECTOR IS ADVISED ON THIS POLICY AND ACKNOWLEDGES THAT HE OR SHE
UNDERSTANDS THE POLICY. A CONFLICT OF INTEREST DISCLOSURE STATEMENT IS
FURNISHED ANNUALLY TO EACH OFFICER AND DIRECTOR WHICH AFFIRMS THAT THE
BOARD MEMBER:
1. HAS RECEIVED A COPY OF THE POLICY,
2. HAS READ AND UNDERSTANDS THE POLICY,
3. HAS AGREED TO COMPLY WITH THE POLICY, AND
4. UNDERSTANDS THE CORPORATION IS A CHARITABLE ORGANIZATION, THAT TO

Name of the organization FRIENDS OF THE WORLD FOOD PROGRAM, INC.	Employer identification number
501(C)(3), THE CORPORATION MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH	
ACCOMPLISH ITS TAX-EXEMPT PURPOSES AND THE CORPORATION'S DIRECTORS,	
OFFICERS, AND BOARD MEMBERS ARE RESPONSIBLE FOR ENSURING THE CORPORATION IS	
FAITHFUL TO ITS CHARITABLE MISSION.	
AT THE TIME OF TERM, EVERY BOARD MEMBER OF THE ORGANIZATION SIGNS	
"ACKNOWLEDGEMENT OF CONFLICT OF INTEREST STATEMENT" THAT ACKNOWLEDGES THAT	
THEY HAVE READ AND UNDERSTAND WHAT IS REQUIRED OF THEM AS PERTAINS TO THE	
CONFLICT OF INTEREST.	
THE PROVISION OF THE POLICY WHICH PERTAIN TO A DUTY TO DISCLOSE A CONFLICT	
OF INTEREST ALSO APPLIES TO ALL BOARD MEMBERS OF THE CORPORATION. FOR THIS	
PURPOSE, EACH REFERENCE TO "OFFICER" IN THE POLICY IS DEEMED TO REFER ALSO	
TO "BOARD MEMBER".	
FORM 990, PART VI, SECTION B, LINE 15:	
GENERAL PROCEDURES	
THE PRESIDENT/CEO IS GIVEN AN ANNUAL PERFORMANCE EVALUATION BY THE	
EXECUTIVE COMMITTEE MEMBERS ON BEHALF OF THE BOARD OF DIRECTORS AT THE	
CONCLUSION OF EACH PERFORMANCE PERIOD. THE EXECUTIVE COMMITTEE IS	
COMPRISED OF THE CHAIRMAN, VICE-CHAIRMAN, SECRETARY/TREASURER & IMMEDIATE	
PAST CHAIR. AT THAT TIME, THE EXECUTIVE COMMITTEE DETERMINES THE MERIT	
INCREASE IN TERMS OF BASE SALARY AND BONUS. IN CONJUNCTION WITH THE	
PRESIDENT/CEO, THEY ALSO ESTABLISH GOALS AND OBJECTIVES FOR THE COMING	
YEAR.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AK,AL,AR,AZ,CA,CO,CT,FL,GA,HI,IL,KS,KY,MA,MD,ME,MI,MS,MN,NC,ND,NJ,NH,NM,NY	
OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV,DC	

Name of the organization FRIENDS OF THE WORLD FOOD PROGRAM, INC.	Employer identification number 13-3843435
FORM 990, PART VI, SECTION C, LINE 19:	
WFP USA REDESIGNED ITS WEBSITE AND EXAMINED BEST PRACTICES IMPLEMENTED BY	
OTHER NGOS TO DETERMINE HOW BEST TO MAKE ITS FINANCIAL INFORMATION	
AVAILABLE TO THE GENERAL PUBLIC.	
OUR WEBSITE, INCLUDES A FOOTER AREA IN EVERY WEBPAGE FEATURING THE	
ORGANIZATION'S EXPENDITURE PIE CHART. THIS FOOTER AREA LINKS TO A WEBPAGE	
WITH DETAILED FINANCIAL INFORMATION, SUCH AS THE LATEST 990 FORM AND LINKS	
TO REVIEWS BY SEVERAL WATCHDOG AGENCIES, INCLUDING THE BETTER BUSINESS	
BUREAU'S WISE GIVING ALLIANCE.	
WFP USA SUPPORTERS CAN ALSO DOWNLOAD THE ORGANIZATION'S 2014 ANNUAL REPORT	
DIRECTLY FROM OUR WEBSITE. THE CURRENT ANNUAL REPORT CONTAINS A STATEMENT	
OF ACTIVITIES FOR THE YEAR ENDED DECEMBER 31, 2014. THE STATEMENT OF	
ACTIVITIES INCLUDES COMPARATIVE TOTALS FOR 2013. THE ANNUAL REPORT IS ALSO	
MAILED EVERY YEAR TO 2,000 STAKEHOLDERS THROUGHOUT THE UNITED STATES,	
DISTRIBUTED AT VARIOUS EVENTS AND GIVEN TO ANYONE WHO REQUESTS A COPY.	
THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY HAVE	
BEEN DISCUSSED AT LENGTH INTERNALLY, WITH THE BOARD OF DIRECTORS, SENIOR	
MANAGEMENT TEAM AND ALL STAFF MEMBERS. THE CONFLICT OF INTEREST POLICY,	
SPECIFICALLY, IS REVIEWED AND SIGNED BY BOARD AND STAFF MEMBERS.	
GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST	
FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D).	
FORM 990, PART XII, LINE 2C	

THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND

Schedule O (Form 990 or 990-EZ) (2014)	
Name of the organization FRIENDS OF THE WORLD FOOD PROGRAM, INC.	Employer identification number 13-3843435
SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL	
STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.	