Form **990**

R	ëturn	of Or	ganization	Exempt Fro	m Income	Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

	reent of the Tite Revenue Sen				ial security numbers on this at Form 990 and its instructi			103	Open to Public	
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	pok if applicable	_	of organization		, uno snam,			D Employer	Identification number	
_	idress change	*	WOR	LD PARR	ot trust usa, in	c.			•	
\equiv	me change	Doing b	tusiness es					62-1561595		
=	-		r and street (or P.O. box if ma	il is not delivered	to street address)		Room/side	E Telephon	number 956-4347	
	Mad returns). BOX 935 town, state or province, count	iv and 200 or for	reitza postal carda			003-	730-4347	
╝	nei returni reninaled	1	E ALFRED	-	FL 33850			G Gross reco	chi 632,187	
* 🗌	mendad retuin		and address of principal office				T			
	pplication pendi	M JAN	MES GILARDI				H(a) to this a gro	up redum for si	condinates? Yes X No.	
_			5 PEACH PLA	CE			H(b) Are all sub	ordinates incl	uded? Yes No	
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1 7	assessmot stat	tes. X	501(c)(3) 501(c)	(·) 4 e	nsert no.) 4947(a)(1) or	527	7			
3 Y	Yetzika: 🕨		ARROTS.ORG			, U	H(c) Group exe	ngtion numbe		
K F	oma of organiza	etoric X o	corporation Trust	Association	Other •	L Y	ear of formations 1	994	14 State of legal domicile: File	
P		Summar				,*				
	1 Briefly	y describe ti	ne organization's missi	ion or most s	ignificant activities:	4 ***** ***			,	
8	*****	*********			ARROTS AND THEIR	HABITATS	AND ADVA	ICE	************	
£	AM	areness	BY PROGRAMS	AND EDU	CATION		*	,	***********	
Activities & Governance	* *****		• • • • • • • • • • • • • • • • • • •					,,,,,,,,,,,	**************	
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3 ,	9 Progr	am service	revenue (Part VIII, line	29)	****************				0	
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- 1			or for members (Part L		A), lines 1–3)			0	0	
اير					Part IX, column (A), lines 5-	101	9	8,875	104,396	
8					ine 11e)			0	0	
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ā	17 Other	r expenses	expenses (Part IX, co (Part IX, column (A), t	nes 1 2 13	CE-WED		4	6,468	28,997	
			Add lines 13–17 (mus					0,544		
	19 Rave	nue less ex	penses. Subtract line	12 tron Hind	129 0 2018 9			<u>6,971</u>	73,958	
sph or	· · · · · · ·		£14.64.48	M	~ 		Beginning of Cu		End of Year	
	20 Total		rt X, line 16)	~~	DEN. UT			2,974 3,642	1,002,002	
38			Part X, line 26) nd balances. Subtract					9,332		
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J56	- 1		P.O. Box		TYT 22045		į	_	863-646-3858	
 14		ecuse this n	 Highland aburn with the prepare 					Phone no.	X Yes No	
			eurn with the prepare lot Notice, see the sape					<u></u>	Form 990 (2016)	
044		,							· 4 11 4 4 4 (4010)	

Pairt		m 990 (2016) WORLD PARROT TRUST USA, INC. 62-1361393	Page 2
18 Briefly describe the organization's mission: TO RESTORE AND PROTECT WILD PARROTS AND THEIR HABITATS AND ADVANCE AWARENESS BY PROGRAMS AND EDUCATION 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27 If "Yes," describe these new services on Schedule C. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services. 9 If "Yes," describe these changes on Schedule C. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(4) and 501(c)(4) organizations are required to report the amount of grants and abconditions to others, the full expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 418,303) (Revenue \$) RESTORATION AND PROTECTION OF WILD PARROTS \$ THEIR HABITATS, AWARENESS 44b (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4d (Cheer program services (Describe in Schedule C.) (Revenue \$)) 4d (Cheer program services (Describe in Schedule C.) (Revenue \$)) 4d (Cheer program services (Describe in Schedule C.) (Revenue \$))	171	·	
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Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $\overline{\mathbf{x}}$ 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 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X election in effect during the tax year? If "Yes," complete Schedule C, Part II 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 98-197 if "Yes," complete Schedule C, X 5 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 X "Yes," complete Schedule D, Part I 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 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 X debt negotiation services? If "Yes," complete Schedule D. Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted X 10 endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X. line 10? If "Yes," complete Schedule D, Part VI 11a 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 X 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 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 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on X Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X If "Yes," complete Schedule G, Part III

Form 990 (2016)

0-	Did the experient energy and or many hospital familians? If Weet Property Colonials 11	20-	Yes	No.
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_^
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	X	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	امما		•
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_}
1	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		
a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	}		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		ı	
	through 24d and complete Schedule K. If "No," go to line 25a	24a	-	Ŀ
)	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		L
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Г
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			Г
	transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	25a		
3	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			H
	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		
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			۲
	current or former officers, directors, trustees, key employees, highest compensated employees, or		•	l
	disqualified persons? If "Yes," complete Schedule L, Part II	26		
		20		┝
	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		┝
	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		۱ ،	1
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	10		
1	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		L
)	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		L
;	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			l
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	L
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		L
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		•	
	conservation contributions? If "Yes," complete Schedule M	30		L
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1	ĺ	
	Part !	31	<u> </u>	L
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	1	}	l
	complete Schedule N, Part II	32		L
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ļ
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			Ţ
	or IV, and Part V, line 1	34		
3	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		T
)	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			Γ
	controlled entity within the meaning of section 512(b)(13)? If 'Yes," complete Schedule R, Part V, line 2	35b		Ì
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		1	T
	related empiration? If "Voc." complete Schedule D. Bort V. line 2	36		١
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1 30		t
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	
	Port VI	27	Į.	
1	44444 44 444 4 44 44 447 4414 4 4 4 4 4 4 4 4 4 4 4 4 4	37	┼	╀
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		\ v	l
	19? Note, All Form 990 filers are required to complete Schedule O.	38	X	T.

Pa	rt VI: Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se			
Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			_X
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7	- 1		
	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	1	٠, '	l
	committee, explain in Schedule O		· .	
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 7	\		ŀ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		3	· ·
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	- -		
ia	one or more members of the governing body?	70	1	X
_		7a		-
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	-		X
	stockholders, or persons other than the governing body?	7b_		 ^
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	 	ا ت	
a	The governing body?	8a	X	├
0	Each committee with authority to act on behalf of the governing body?	8b	X	├──
y	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	١.	}	x
800	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	100.)		T
		C:-	Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,]]	Ì
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	-	1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	ļ	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1		. ~
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	├
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	 -
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		3.0	
	describe in Schedule O how this was done	12c	X	├
13	Did the organization have a written whistleblower policy?	13	X	├ ──
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	1, 1	'	ľ
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	\ \ \ \ \ \ \ \		1
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	ļ	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1 -	,	· . · '
16a	, , , , , , , , , , , , , , , , , , , ,]: '	·	
	with a taxable entity dunng the year?	16a	ļ	X
p	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100	,	١.
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	١		}`
	organization's exempt status with respect to such arrangements?	16b	<u> </u>	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ FL			
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)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	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			
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
_	LENN REYNOLDS 690 S. LAKE SHORE WAY			
		3-95	6-4	134

Form 990 (2016) WORLD PA	RROT TRU	ST	US	Α,	I	NC		62-156	1595	Page 7
		Dire	cto	rs,	Tru	ıste	es,	Key Employees, Hig	hest Compensated	Employees, and
Independent C							٠. ١	lime in this Dort	. <i>n</i> u	П
								o any line in this Part ' Compensated Employee		
1a Complete this table for all perso organization's tax year.										
List all of the organization's c									s), regardless of amount of	
 compensation. Enter -0- in columns List all of the organization's c 				-			-		nlovee "	
 List the organization's five cu who received reportable compensation organization and any related organization 	rrent highest contion (Box 5 of Fo	npen	sate	d en	plo	yees	(oth	er than an officer, director,	trustee, or key employee)	
 List all of the organization's fe 	ormer officers, k	ey en	nplo	yees	ano	d high	nest	compensated employees	who received more than	
\$100,000 of reportable compensat List all of the organization's for									director or trustee of the	
organization, more than \$10,000 of	reportable comp	ensa	tion	from	the	orga	nıza	ition and any related organi	zations.	
List persons in the following order: compensated employees; and form			direc	tors;	ınst	ututio	nal 1	trustees; officers; key empl	oyees; highest	
Check this box if neither the org	ganization nor an	y rela	ated	orga	nıza	tion o	com	pensated any current office	r, director, or trustee.	
(A)	(B)	T			C)			(D)	(E)	(F)
Name and Title	Average hours per	,		check		than o		Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any					is bota or/truste		from the	related organizations	other compensation
	hours for related	Q Indiv	insti	Officer	Χeγ	를	Farmer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
4	organizations below dotted	Individual I or director	nstitutional	۳ ا	Кеу етыоуев	Highest compensated employee	er.			and related organizations
	(ine)	trustee	bustee		yee	npens		i		
			8			ated				
(1) JAMES GILARDI	0.00	ļ								
EXECUTIVE DIRECTOR	0.00	x		X	1			60,000	, ο	0
(2) GLENN REYNOLDS		 	1	1				03/333		<u></u>
	0.00					'		20.044		
SECRETARY (3) ALISON HAYLES	0.00	X	-	X	-	┼		36,944	0	0
(0)	0.00			1						
TRUSTEE, CHAIRMAN	0.00	X		X	_	<u> </u>	_	0	0	0
(4) NICK REYNOLDS	0.00									
TRUSTEE	0.00	X						0	o	0
(5) DAVID WOOLCOCK										
TRUSTEE	0.00	x						0	o	o
(6) RUUD VONK	0.00	┼^	+-	 	\vdash	+-	-			
* *** ***** *** *** ***	0.00									
TRUSTEE MARTIN	0.00	X	-	 	▙	┼-	-	0	0	0
(1) STEVE MARTIN	0.00									
TRUSTEE	0.00	x		1				0	o	0
(8) CHRISTIANA SENN										
TRUSTEE	0.00	x					١	0	o	o
(9)	0.00	1	 -	1	t	t^-	-	1		
(10)		+	-	+-	-	+	\vdash			
· · · · · · · · · · · · · · · · · · ·										
(11)	 	+	╄	┼	+	 	├-		ļ	<u> </u>
V**/	ι		1	ı.			1	I	1	i

	(A) Name and title	(B) Average hours per week (list any	bo	K, unic	55 PR	tion more i	than or s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
		hours for related organizations below dotted (rne)	Individual trustee or director	Institutional trustee	Officer	Key employue	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1089-MISC)	from the organization and related organizations	
								,	,			
								-				
	<u></u>											
				-	_						-	
			-					_				
1b c d	Sub-total	ets to Part VII,		ion .		•		* * *	96,944			
2	Total number of individuals (in reportable compensation from				thos	se lis	ted a	abo		\$100,000 of	<u> </u>	
3 4 5	Did the organization list any f employee on line 1a? If "Yes, For any individual listed on lir organization and related orga individual Did any person listed on line for services rendered to the or	ormer officer, di "complete Sche ne 1a, is the sum inizations greate	rectondule of nor that	or, or J for eport n \$1: com	r sud table 50,00	con 00?	dividi npen: If "Ye n froi	ual sati ss," m a	tion and other compensation "complete Schedule J for suc any unrelated organization or	from the	3 3	X X
	tion B. Independent Contract	ors								# \$400.000 -f		
1	Complete this table for your f compensation from the organ	nization. Report	comp	ateo ens	ation	for	the c	con alei	endar year ending with or with	nin the organization's tax		
	Name an	(A) d business address						╀	Descrip	(B) ition of services	(C) Compensation	1
_							-	+				
2	Total number of independent	contractors (inc	ludin	ig bu	t not	limi	ted to	o th	hose listed above) who	0	4	, -

		Check if Sc	hedule O	conta	ins a response	or note to any line	in this Part VIII		П
1						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants mounts	1a	Federated campaign	is _	<u>1a</u>		通過數數後間停止	CHANCE CONTRACTOR		
200	Ь	Membership dues	. L	1b	18,550			经验证证	
S.A	c	Fundraising events	. L	1c				la, el Control	
E	d	Related organization	s	1d		To the same with	E Barrell St.		
ωE	e	Government grants (contribut		1e					
<u>SS</u>	f	All other contributions, gifts, o		_		The state of the state of	3. "		
E E		and similar amounts not inclu		16	591,326				.
Ĕρ	g	Noncesh contributions includ	<u>-</u>	\$					1.
Contributions, Giffs and Other Similar A	h	Total. Add lines 1a-		Ψ		609,876			
9					Busn. Code	W WER 15 15	- 32 - 35	(1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3
Program Service Revenue	2a				Busin Code	15		4.	
Re l	ь	•• • • • • • • • • • • • • • • • • • • •			•				
8	۔ ا								
ē	ے ا				.			<u> </u>	
S	u			•					
a a	e		<i>:</i>						<u> </u>
Š		All other program se		e	• •				
	9			<u></u>	<u></u>		1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11 2 2 1 2 2 1 2 1 2 1	,1 ×,
	3	Investment income (-	/idends	i, interest,	ļ			
		and other similar am				10,272	10,272		·
	4	Income from investm	ent of tax-e	xempt	bond proceeds				
	5	Royalties		 , .	<u> </u>				
			(i) Real		(li) Personal	が語れたできる。			3600 NOV
	6a	Gross rents					the or him was		
	þ.					自己的 医乳管			
	С	Rental inc. or (loss)					[2007]美洲美国		The state of the s
·	d	d Net rental income or (loss)		<u>,</u> <u>></u>					
				(ii) Other			X. 19 19 19 19 19 19 19 19 19 19 19 19 19		
		other than inventory							1
	þ	Less' cost or other				The complete of the control			
		basis & sales exps							State of the state
	C				·····	· 所谓、为学品的	的复数 经收款		y the training
	ď	Net gain or (loss) .		••• <u>••</u> •	<u></u> 👺	i 			
g	8a		raising events	,			· · · · · · · · · · · · · · · · · · ·		
Revenue		(not including \$.					
. ≥		of contributions reported							2
		See Part IV, line 18		a					
Other	b	Less: direct expense		ь		医艾克氏管 學	N - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	1-, 1- 11-19-1	
٦	C			isıng ev	vents >	<u> </u>			
	9a	Gross income from gam	ıng activities			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	The Straight Prince	大小大学文式のデ	1000
		See Part IV, line 19		a					
	b	Less: direct expense	s .	ь[新期门中位"加	Jan	14 1.00 10 1 20 1	
	C	Net income or (loss)	from gaming	g activi	ties		, - ", - ",	" AV - 1 - 1	, ,,, ,, , , , , ,
1	10a	Gross sales of invent	tory, less			William Clark	CE COLLEGE COLLEGE	Sin English and D	1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	•	returns and allowance	es	a	12,039		ではなった。 ですで、より、ことが、第二人	The sale of the sa	
l	þ	Less: cost of goods s	sold	b	6,533				to the state of
Ì	С	Net income or (loss)	from sales of	of inver		5,506	5,506	1 - 2 - 1 det and decode but	P 2 4 - S
ļ		Miscellaneou	is Revenue		Busn. Code	的可以自然的	The second of th	在基本企业	Construction .
1	11a							The second second second second second	
	b								
}	C								
	d	All other revenue .			. [
- }		Total. Add lines 11a-	-11d		•			经经济经济	的特別的經濟法
	12	Total revenue. See	instructions.		<u> </u>	625,654	15,778	0	0

Form 990 (2016) WORLD PARROT TRUST USA, INC. 62-1561595
Part X: Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must contains a responsible.			npiete column (A).	
	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				7 · `
	and domestic governments. See Part IV, line 21	53,387	53,387	, , , , , , , , , , , , , , , , , , , ,	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign			The State of the state of	30 m x =
	organizations, foreign governments, and foreign				` (-) - ·
	individuals. See Part IV, lines 15 and 16	364,916	364,916		
4	Benefits paid to or for members			7	3
5	Compensation of current officers, directors,		_		
	trustees, and key employees	96,944	64,187	10,043	22,714
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
٠,	section 401(k) and 403(b) employer contributions)		<u>.</u>		
9	Other employee benefits	7 450	4 664		174
10	Payroll taxes	7,452	4,934	772	1,746
11	Fees for services (non-employees):				
	Management				
. с р	Legal	6,281		6,281	<u></u>
4	Accounting	0,201		0,201	
e	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees			Marie Times	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
, 3	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	2,708		2,708	
14	Information technology				
15	Royalties				
16	Occupancy	6,461		6,461	
17	Travel	6,502	6,502		
18	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials		· · · · · · · · · · · · · · · · · · ·		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	600			
22	Depreciation, depletion, and amortization	609	609		
23	Other expenses Harris expenses not covered	(A) 11 (人) 11 (A)	1885 1885 1882 1	Control of the Control	TELL TO THE TOTAL TO THE
24	Other expenses, itemize expenses not covered	際優先生激	行的模型。可是一种	[李] [[] [] [] [] [] [] [] [] [国籍的基础的
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column		是不是不是	(本意思多点是一个)	· · · · · · · · · · · · · · · · · · ·
	(A) amount, list line 24e expenses on Schedule O.)			できる。自然的などで	
а	CREDIT CARD FEES	3,026	- 71 S	3,026	
b	TELEPHONE & INTERNT	2,744		2,744	
c	OTHER EXPENSES	666		666	
d					
9	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	551,696	494,535	32,701	24,460
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)			į	1
DAA		<u> </u>		<u> </u>	Form 990 (2016)

4.64	Check if Schedule O contains a response or note to any line in this Part X			
	Crisck if Screenie C Contains a response of flore to any line in this Part A	(A) Beginning of year	\top	(B) End of year
1	Cash—non-interest bearing	91,138	1	20,271
2	Savings and temporary cash investments	782,503	2	916,801
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,199	4	1,169
5	Loans and other receivables from current and former officers, directors,	**************************************		401711
•	trustees, key employees, and highest compensated employees		با رد	1, 1
	Consulate Doct II of Calculula I	1 1 1 1 1	5	
6	Loans and other receivables from other disqualified persons (as defined under section	THE FRANCE OF THE	5-51	
"	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers an			B. B. Carrie
1	sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		y	100
	organizations (see instructions) Complete Part II of Schedule L		ا`ء	,
7	Notes and loans receivable, net	.	7	
8	Inventoriae for cale or use	7,225	8	8,134
9	Prepaid expenses and deferred charges	,,223	9	0,15
1 -	a Land, buildings, and equipment: cost or		, •	
'0		12		
١.		4,933	100	1 32
- 1		35,976	10c	51.303
11		33,970	12	
12	*** ** ** **		13	
13			14	
15	-		15	
16	******* * * * * * * * * * * * * * * * *	922,974	16	1,002,002
17		1,777	17	1,57
18			18	
19			19	
20	* ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		20	
21			21	
1	• • • • • • • • • • • • • • • • • • • •	2 25-27 38-61	,	5
	trustees, key employees, highest compensated employees, and			
22	disqualified persons. Complete Part II of Schedule L	"	22	, , , , ,
23			23	
24			24	·
25	•			
1	parties, and other liabilities not included on lines 17-24). Complete Part X	1		
	of Schedule D	1,865	25	7,136
26		3,642	26	8,712
T	Organizations that follow SFAS 117 (ASC 958), check here ▶ and	1000 3. 3.3	Ĩ.,	
	complete lines 27 through 29, and lines 33 and 34.	The state of the state of	ا المرز الرزائع	
27	Unrestricted net assets		27	
27 28			28	
29	Permanently restricted net assets		29	
!	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ X and	的是不可以是最近的一种。		Light Control of the second
[]	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31			31	
30 31 32	Retained earnings, endowment, accumulated income, or other funds	919,332	32	993,290
33		919,332	33	993,290
34	Total liabilities and net assets/fund balances	922,974	34	1,002,002

Form	1990 (2016) WORLD PARROT TRUST USA, INC. 62-1561595			Pag	ge 12
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	62	25,	654
2	Total expenses (must equal Part IX, column (A), line 25)	2	5	51,	696
3	Revenue less expenses. Subtract line 2 from line 1	3		73,	958
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	91	9,:	332
5	Net unrealized gains (losses) on investments	5			
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	99	93,	<u> 290</u>
Pa	irt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual X Other MODIFIED C	ASH			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			`	İ
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.			- 3' \ '	3.
	Separate basis Consolidated basis Both consolidated and separate basis		4020		4.
þ	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		1		
	separate basis, consolidated basis, or both:				1 4
	Separate basis Consolidated basis Both consolidated and separate basis				 -
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				5.
•	Schedule O.		7.0	,	<i>2</i> '
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?	_	3a		<u> </u>
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>
				901	10040

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

OMB No 1545-0047

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Internal Revenue Service

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

inspection .

Name of th	ne organization	WORLD PARROT	TRUST USA, INC	•		Employer ident	ification number
Part	Reas		Status (All organizations		omplete		
			e it is: (For lines 1 through 12,				
1 🗂	1.	•	ociation of churches described		•	•	αa
2	1	· ·	A)(ii). (Attach Schedule E (For			N 117	
3	ī		ce organization described in se			ii).	
4	•		d in conjunction with a hospital			•	lospital's name.
L	city, and stat		•				
5	An organizat	ion operated for the benefit of	of a college or university owned	or opera	ed by a g	overnmental unit described in	
_	section 170	(b)(1)(A)(iv). (Complete Part	:11)				
6	1		overnmental unit described in			~ •	
7		ion that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fi complete Part II.)	rom a gov	emmental	unit or from the general public	C
8	A community	y trust described in section '	170(b)(1)(A)(vi). (Complete Par	rt II.)			
9			scribed in section 170(b)(1)(A)				ge
		or a non-land grant college of	of agriculture (see instructions)	. Enter the	name, ci	y, and state of the college or	
10 X	university:	name that manually assatises to	111 4) man Han 90 4/00/ -2-4			i i i i i i i i i i i i i i i i i i i	
10 X			 more than 33 1/3% of its sup npt functions—subject to certain 				
	support from	gross investment income ai	nd unrelated business taxable i	ncome (le	ss section	511 tax) from businesses	
	acquired by	the organization after June 3	0, 1975. See section 509(a)(2). (Comple	ete Part III)	
11.	1		exclusively to test for public sa	-			
12			exclusively for the benefit of, to				
			zations described in section 50 hat describes the type of suppo				• •
. а			erated, supervised, or controlle				_
· -			wer to regularly appoint or elect				9
			omplete Part IV, Sections A		•		
, p			pervised or controlled in conne				
			rting organization vested in the	same per	sons that	control or manage the support	ted
c			 Part IV, Sections A and C. supporting organization operate 	d in conn	nation with	and functionally integrated u	ath
	its suppo	orted organization(s) (see ins	structions). You must complet	e Part IV,	Sections	A, D, and E.	noi,
d	Type III	non-functionally integrated	d. A supporting organization op	erated in	connection	with its supported organization	on(s)
			e organization generally must s	•		•	ess
	· ·		must complete Part IV, Section		-		
• 0			eived a written determination f n-functionally integrated suppo			salypel, lypell, lypelll	
, t		mber of supported organizat	• • • • • • • • • • • • • • • • • • • •	rang organ	nzaucij.		
g			ne supported organization(s).				, , , L
(i) Nes	me of supported	(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of
0	rganization		(described on lines 1–10	1 -	ur governing	support (see	other support (see
			above (see instructions))	Yes	ment?	instructions)	(nstructions)
(A)		 	 	1	1 10		
17-9	-			-			
(B)						·- 	†
` '	•			1	<u>'</u>		1
(C)							
	<u> </u>						
(D)							
				_	<u> </u>		
(E)							
		ANT THE RESTRECT OF THE RESTRECT OF THE ABOVE OF THE	Let be the more than the	 	1		
 .					传统社会		
Total	onund Dod41	TAMES TO A STATE OF THE STATE O	1 数2件。	Official C	13 72-7		A (F 200 - 200 57) 224
ror PED	BI WOLK KEGUCU	UII ACT NOTICE, SEE THE INSTITUC	tions for Form 990 or 990-EZ.			Schedule	A (Form 990 or 990-EZ) 2010

Sched	ule A (Form 990 or 990-EZ) 2016 WOI	RLD PARROT	TRUST US	A, INC.	62	-15 6 1595	Page 2			
Part 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.)									
Sect	ion A. Public Support						1			
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	; (f) Total			
							,			
1	Grits, grants, contributions, and membership fees received. (Do not include any "unusual grants")						·			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3									
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)	1 1 1 1 1 1 1 1 1 1 1	المرازين أوالمؤلم مروية	4,4	1 Tan Year may Jack	<u> </u>				
6	Public support. Subtract line 5 from line 4.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S 5.61 # 25	いの名が	(四三公司基督)	Salar Salar				
	tion B. Total Support									
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total			
7	Amounts from line 4				<u> </u>					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources									
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)		/			h, et				
11	Total support. Add lines 7 through 10			<u> </u>	<u> </u>	1				
12	Gross receipts from related activities, etc	•	**	2 2	···········	12				
13	First five years. If the Form 990 is for the	-	it, second, third, fo	urth, or tifth tax ye	aras a section 50	1(c)(3)	. □			
600	organization, check this box and stop he tion C. Computation of Public S		tano							
14	Public support percentage for 2016 (line			(6)		14	<u> </u>			
15	Public support percentage from 2015 Sci			ın (1))		15	%			
16a	33 1/3% support test—2016. If the orga	•	•	12. and line 14 is	23 1/29/ or more					
IVa	box and stop here. The organization qua					\	▶ □			
ь	33 1/3% support test—2015. If the orga	• •	.,	• • • • •	15 is 33 1/3% or m	nore check	, , 🏲 🗀			
•	this box and stop here. The organization						▶ □			
17a	10%-facts-and-circumstances test—20						🗀			
114	10% or more, and if the organization me						-			
	Part VI how the organization meets the "			-	•	\				
	organization	iaca-ane-circumste	ances test, the Ut	genization qualille	a da a publiciy Sul	porteu	▶ □			
ь	10%-facts-and-circumstances test—20	 115. If the organizat	hon did not check :	a hox on line 13 1	6a 16h or 17a a		🗀			
•	15 is 10% or more, and if the organization	_								
	Explain in Part VI how the organization n				-					
	aumorated amoraination			_	•	-	▶ □			
18	Private foundation. If the organization of	did not check a box	on line 13, 16a, 16	Sh 17a or 17h ch	eck this box and s		🗀			
	Instructions				· · · · · · · · · · · · · · · · · · ·		▶□			

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	400my 41.00m II.	io tooto notou p	olott, plocade es			
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Grits, grants, contributions, and membership			3-7		1-7	10) . 0.0.
	fees received. (Do not include any "unusual grants")	303,961	418,327	658,727	484,177	609,876	2,475,068
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	26,188	15,756	23,724	13,325	22,311	101,304
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	330,149	434,083	682,451	497,502	632,187	2,576,372
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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	(7 m² 5 m² 2 2					
8	Public support. (Subtract line 7c from						
800	tion B. Total Support	5 1 5 See . 2	1 1 1 1 1 1 1 1	1 - 1/21, 255	بسب بالوادي		2,576,372
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(2) 204 4	(4) 0045	(2) 2046	(f) Total
9	Amounts from line 6	330,149	· · · · · · · · · · · · · · · · · · ·	(c) 2014 682 , 451	(d) 2015 497,502	(e) 2016 632,187	(f) Total 2,576,372
	• • • • • •	330,149	434,063	682,431	497,302	632,187	2,516,312
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	477	552	684	724	1,371	3,808
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	477	552	684	724	1,371	3,808
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		_				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13.	Total support. (Add lines 9, 10c, 11, and 12.)	330,626	434,635	683,135	498,226	633,558	2,580,180
14	First five years. If the Form 990 is for the						
	organization, check this box and stop her					,	▶ 🗌
Sec	tion C. Computation of Public St	ipport Percen	tage				
15	Public support percentage for 2016 (line 8	, column (f) divide	d by line 13, colum	n (f))		15	99.85%
16	Public support percentage from 2015 Sch				·····	16	99.88%
Sec	tion D. Computation of investme	nt Income Pe	rcentage				
17	investment income percentage for 2016 (I	ine 10c, column (f	divided by line 13	, column (f))		17	%
18	Investment income percentage from 2015					18	%
19a	33 1/3% support tests-2016. If the orga		•		more than 33 1/3	%, and line	
	17 is not more than 33 1/3%, check this b						> X
þ	33 1/3% support tests—2015. If the orga						,
	line 18 is not more than 33 1/3%, check the	nis box and stop h	ere. The organizat	ion qualifies as a p	ublicly supported	organization	▶ ∐
20	Private foundation. If the organization di	d not check a box	on line 14, 19a, or	19b, check this bo	x and see instruct	ions	▶ 🖺

Schedule A (Form 990 or 990-EZ) 2016

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

S	ection	A. Al	Support	ina O	rganizations	:

- 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.
- 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)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- 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.
- 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)
- 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 or 990-EZ)
- 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.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - 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
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10b		,
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	le A (Form 990 or 990-EZ) 2016 WORLD PARROT TRUST USA, INC. 62-15615	<u> 15</u>		Page 5
Par	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	•	- ′	
a	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		
	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		
Sect	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		, 5,	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		1	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1.	.	
	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	11		
2	Did the organization operate for the benefit of any supported organization other than the supported	1: 1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1:1		•
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	ļ,		-
<u> </u>	supervised, or controlled the supporting organization.	2		
Sect	on 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	1,4		
	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		44	•
04	the supported organization(s).	1		
Sect	on D. All Type III Supporting Organizations			
			Yes	<u>No</u>
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		51	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	[***	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	· ' 1	· • •	
_	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	7.7	
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1. 1.1		-
	significant voice in the organization's investment policies and in directing the use of the organization's	1.		
	income or assets at all times dunng the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	7.	
Sect	lon E. Type III Functionally-Integrated Supporting Organizations		L	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions			
a	The organization satisfied the Activities Test. Complete line 2 below	<i>,.</i>		
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	rtions)		
_	The diguillation dupped and diguidant leading. Bedeine in that the first year supported diguidant charge too mount	uona,.		
2	Activities Test. Answer (a) and (b) below.		Yes	No
·a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		3 3	7
	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	[
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2.0h	3. 1. 3	- J
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		200	
	reasons for the organization's position that its supported organization(s) would have engaged in these	13.7		· '₹ '- '
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations.'Answer (a) and (b) below.	1.5.2.5	12 1	· .
, a			2) · ;
-	trustees of each of the supported organizations? Provide details in Part VI.	3a	' ' ' ']
b		14.	100	
_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b]	

Schedul	e A (Form 990 or 990-EZ) 2016 WORLD PARROT TRUST USA, INC		62-1561	595 Page 6
Part	Y Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No			10
	instructions. All other Type III non-functionally integrated supporting organizations mus			
Secti	on 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			
coll	ection of gross income or for management, conservation, or			
	intenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Secti	on B - Minimum Asset Amount	1	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	1.		· .
insi	ructions for short tax year or assets held for part of year)			
	a Average monthly value of secunties	1a		
	b Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
-	e Discount claimed for blockage or other			
,	factors (explain in detail in Part VI):	1. 1		
_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,	1		
. See	s 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		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	TO ALL PARTY	
2	Enter 85% of line 1.	2	The Carm Control of Miles and & Sec.	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	1. ないのでは、一次によう	
4	Enter greater of line 2 or line 3.	4	The second second	
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		The state of the state of the	
em	ergency temporary reduction (see instructions).	6	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
7	Check here if the current year is the organization's first as a non-functionally integrated	Type I		see

instructions).

chedul Part	e A (Form 990 or 990-EZ) 2016 WORLD PARROT TRUST Type III Non-Functionally Integrated 509(a)(3) S		62-1561	595 Page 7
	on D - Distributions	tions (continued)	Current Year	
1	Amounts paid to supported organizations to accomplish exempt purpos			Cuitail Tear
2	Amounts paid to perform activity that directly furthers exempt purposes			
-	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppo	eted organizations		
4	Amounts paid to acquire exempt-use assets	iteo organizationa		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organiza	tion is reconneive		
•	(provide details in Part VI) See instructions.	don la reaponaive		
9	Distributable amount for 2016 from Section C. line 6			
10	Line 8 amount divided by Line 9 amount			······
	ENIO O MINOSIN GIVIGOD BY LINE O GITIOUTE	(1)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	(III) Distributable
	Cachon F - Managon Miorations (264 Managonis)	excess Distributions	· · · · ·	
1	Distributable amount for 2016 from Section C, line 6	() -1 () () () () () () () () () (Pre-2016	Amount for 2016
<u> </u>	Underdistributions, if any, for years prior to 2016		73 3 - 64	
2	(reasonable cause required-explain in Part VI). See			7
2	instructions.			West of the state
3	Excess distributions carryover, if any, to 2016:		The thirt was the server	\$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a	TO A STATE OF THE PARTY OF THE	大学 医院 はない いまいべん	建筑建筑设置	
b	三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、三、	The state of the state of	· · · · · · · · · · · · · · · · · · ·	A William Control
	From 2013	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	केर स्टिनियरी के	1
d	From 2014		· " " " " " " " " " " " " " " " " " " "	
e	From 2015	医一种一次数 小鸡	The state of the state of	Mary State of the
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			1
	Applied to 2016 distributable amount	The state of the s	· · · · · · · · · · · · · · · · · · ·	
Ī	Carryover from 2011 not applied (see instructions)	的一种应答的对象的 它	がから となる これ とうないがく 出	Anna de la
L	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		भी । इके अली अली भी	4. 8. 4. A.
4	Distributions for 2016 from			```
	Section D, line 7.			<u> </u>
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount	S. Spirit Learning	1 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
<u> </u>	Remainder. Subtract lines 4a and 4b from 4.		いっぱんだすの場合	A STATE OF THE STA
5	Remaining underdistributions for years prior to 2016, if			The state of the s
	any Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions	The transfer of the		
6	Remaining underdistributions for 2016 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions	14-15-16-16-16-16-16-16-16-16-16-16-16-16-16-	att military to the	
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	蒙古 1
8	Breakdown of line 7:		述的主义是否定义的	5-7-2 - 3 11 - 3 " " " " " " " " " " " " " " " " " "
a	The state of the s	に動きている。	· 一方の大学の大学の大学	the moderate of the state of th
_	Excess from 2013	心思。實施可能於	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	* 32 x "\" ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
С	Excess from 2014		かいないという アングライ	
	Excess from 2015	学的最高级 体系	をおきまた。 これにお	To have the
<u>ė</u>	Excess from 2016	新疆,西部沿海,海	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
			Schedule .	A (Form 990 or 990-EZ) 2016

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete If the organization answered "Yes" on 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 © (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047 2016 Open to Public Inspection

W	ORLD PARROT TRUST USA, INC.		62-1561595				
Pa	Part Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.						
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)		7				
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised					
_	funds are the organization's property, subject to the organization's exclu		Yes No				
6	Did the organization inform all grantees, donors, and donor advisors in						
•	only for chantable purposes and not for the benefit of the donor or dono						
	conferring Impermissible private benefit?	advisor, or for any other purpose	Yes No				
Pa	urt II Conservation Easements.						
	Complete if the organization answered "Yes" on F						
1	Purpose(s) of conservation easements held by the organization (check						
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically imp					
	Protection of natural habitat	Preservation of a certified histori	c structure				
-	Preservation of open space	and a second the state of the s	41				
2	Complete lines 2a through 2d if the organization held a qualified conser easement on the last day of the tax year.	valion contribution in the form of a conse	Held at the End of the Tax Year				
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
c			2c 2c				
đ			. 44				
·	historic structure listed in the National Register	oo, and not on a	2d				
. 3	Number of conservation easements modified, transferred, released, ex	tinguiched, or terminated by the organize					
•	tax year	anguished, or terminated by the organize	nor damy tre				
4	Number of states where property subject to conservation easement is	ncated >					
5	Does the organization have a written policy regarding the periodic moni	• •					
-	violations, and enforcement of the conservation easements it holds?	g, mopeonen, nenemag et	Yes No				
6	Staff and volunteer hours devoted to monitoring, inspecting, handling o	f violations, and enforcing conservation e	easements during the year				
	•						
7	Amount of expenses incurred in monitoring, inspecting, handling of viol	ations, and enforcing conservation ease	ments during the year				
	▶\$,,					
8	Does each conservation easement reported on line 2(d) above satisfy t	he requirements of section 170(h)(4)(B)(i)				
	and section 170(h)(4)(B)(ii)?		Yes No				
9	in Part XIII, describe how the organization reports conservation easeme	ents in its revenue and expense stateme	nt, and				
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that o	describes the				
	organization's accounting for conservation easements.						
Pa	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" on I		Similar Assets.				
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n	· · · · · · · · · · · · · · · · · · ·	balance sheet				
	works of art, historical treasures, or other similar assets held for public	•					
	public service, provide, in Part XIII, the text of the footnote to its financi	-					
ь							
	works of art, historical treasures, or other similar assets held for public	•					
	public service, provide the following amounts relating to these items:	<u>.</u>					
	(i) Revenue included on 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, pi	rovide the				
	following amounts required to be reported under SFAS 116 (ASC 958)	• • • •					
а	Revenue included on Form 000, Part VIII, line 1		▶ \$				
<u>b</u>	Assets included in Form 990, Part X		<u>,</u> ▶ \$				
For	Paperwork Reduction Act Notice, see the Instructions for Form 990.	· · · · · · · · · · · · · · · · · · ·	Schedule D (Form 990) 2016				

3che	dule D (Form 990) 2016 WORLD PA	RROT	TRUST	USA,	INC.		62-1561	595	Page :
Pa	rt III 🤄 Organizations Maintainin	g Colle	ections o	f Art, His	storical T	reasures,	or Other Sim	ilar Ass	
3	Using the organization's acquisition, access collection items (check all that apply):								
а	Public exhibition		d 🗍	Loan or e	exchange pro	ograms			
b	Scholarly research		e	Other	J - F				•
C	Preservation for future generations		—					• ••	
4	Provide a description of the organization's	collection	s and explai	n how the	v further the	organization'	's exempt purpos	e in Part	
	XIII.				,		o onempt parpos		
5	During the year, did the organization solicit	or receiv	e donations	of art. hist	torical treas	ures, or other	simılar		
	assets to be sold to raise funds rather than								Yes No
Pa	rt IV: Escrow and Custodial Ar			<u> </u>					
	Complete if the organization 990, Part X, line 21.	n answ	rered "Yes	s" on For	m 990, P	art IV, line s	9, or reported	an amo	unt on Form
1a	Is the organization an agent, trustee, custo			-		or other asse			☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part XI	II and co	molete the f	ollowing ta	ble:				[] 144 [] 14
_	.,			g ta					Amount
c	Beginning balance			•				1c	
	Additions during the year	••• •• •	• •		•			1d	
	Distributions during the year						• • • • • • • • • • • • • • • • • • • •	1e	
f	Ending balance			•			• • •	15	
	Did the organization include an amount on	Form 99	0 Part X lin	e 21 for e	BOLOM OF CIT	 stodial accolu	ot liability?		Yes No
	If "Yes," explain the arrangement in Part XI								
	Tt'V Endowment Funds.	ii Olicca	HOTE II WIE C	Apierration	Thas been	provided on 1	art Ain .		
-	Complete if the organization	n answ	ered "Yes	s" on For	m 990 P	art IV line	10.		
			urrent year		Prior year	(c) Two yes		Three years b	ack (e) Four years back
1a	Beginning of year balance	7-7-		(-7.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0):	(4)	, , , , , , , , , , , , , , , , , , ,	(0)1021/05102001
h	Contributions			 		-			
	Net investment earnings, gains, and					-			
•	losses			1					
d	Grants or scholarships			 		1			
	Other expenditures for facilities and			 					
•	programs								
f	Administrative expenses			†		 			
	End of year balance								
2	Provide the estimated percentage of the cu	irrent vea	er end balan	ce (line 1a	. column (a))) held as:			
а	Board designated or quasi-endowment ▶		.,		,, (-,	,,			
	Permanent endowment ▶ %								
c	Temporarily restricted endowment ▶		%						
	The percentages on lines 2a, 2b, and 2c st	nould equ	ual 100%						
3a	Are there endowment funds not in the poss			ation that	are held an	d administered	d for the		
	organization by:		•						Yes No
	(i) unrelated organizations	•							3a(i)
	(ii) related organizations				•			••	3a(ii)
b	If "Yes" on line 3a(ii), are the related organi	izations I	isted as requ	ured on So	chedule R?				3b
	Describe in Part XIII the intended uses of t								
	rt VI Land, Buildings, and Eq								
	Complete if the organization			s" on Fo	m 990. P	art IV. line	1 1a. See For	m 990. P	Part X. line 10.
	Description of property		(a) Cost or other			r other basis	(c) Accumut		(d) Book value
	·	_	(investmen	1		ther)	depreciati		
1a	Land						<i>म</i> ुद्धार्ग्हर, चु	7.497	· · · · · · · · · · · · · · · · · · ·
	Buildings						-		
	Leasehold improvements								
	Equipment				· · · · · ·	26,234	2	2,981	3,25
	Other .					9,869		8,798	
	I. Add lines 1a through 1e. (Column (d) mus	t equal F	orm 990 Pa	art X. colur	nn (B) line			<u> </u>	4.32

Part VI Investments—Other Securities.		14h Can Farm 000 Part V Kan 40
Complete if the organization answered "Yes" on F		
(a) Description of security or category	(b) Book value	(c) Method of valuation:
(Including name of security)		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. (Column (b) must equal Form 990, Part X, col. (B) line 12) ▶		
Part VIII Investments—Program Related.		
• • • • • • • • • • • • • • • • • • •	Same COO Bart IV lim	on 14a Can Farm 000 Part V line 42
Complete if the organization answered "Yes" on I		
(a) Description of investment	(b) Book value	(c) Method of valuation
	<u></u>	Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		and the transfer of the property of
Part IX Other Assets.		
Complete if the organization answered "Yes" on	Form 990, Part IV, lir	ne 11d. See Form 990, Part X, line 15.
(a) Description		(b) Book value
(1)		
(2)	······································	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Tatal (Calumn (b) must asked Form 2000 Part V and (D) line 45)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Raft X Other Liabilities.		
10 gam 41%	E 000 E 11 / 15:	- 44 446 C F 000 D-4 V
Complete if the organization answered "Yes" on	roim 990, Part IV, III	ne Tie or Till. See Form 990, Part X,
line 25.	τ	TO THE PROPERTY OF THE STATE OF
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		The state of the s
(2) UNREALIZED GAIN ON STOCKS	7,130	
- (3)	ļ	A file for the state of the sta
(4)	<u> </u>	
(5)		The state of the s
- (6)		
- (7)		
(8)		The state of the s
(9)		一种的特殊的。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶	7,130	6123年,例如中国大学的大学的工作。
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foot		
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Cl		
DAA	TELEVISION DI GIO	Schedule D (Form 990) 201

Schedule D (Form 990) 2016 WORLD PARROT TRUST USA, INC.	62-156159	5 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per Re	
Complete if the organization answered "Yes" on Form 990, F	•	
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		र प्र
a Net unrealized gains (losses) on investments	2a	1.5
b Donated services and use of facilities	2b	35.4
c Recovenes of prior year grants	2c	() () () () () () () () () ()
d Other (Describe in Part XIII.)	2d	\
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1	र् १
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	5 • 2
b Other (Describe in Part XIII.)	4b]
c Add lines 4a and 4b		4c
E		5
Part XII Reconciliation of Expenses per Audited Financial States	nents With Expenses per	Return.
Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.	
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		F-1
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	<u>ब</u> ्द
d Other (Describe in Part XIII.)	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b] * [4]
c Add lines 4a and 4b		4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)] 5]
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part I		Part X, line
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	any additional information.	
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•	•	
· · · · · · · · · · · · · · · · · · ·	,	

Schedule D (Form 990) 2016 WORLD PARROT TRUST USA, INC.	62-1561595 Page 5
Part XIII Supplemental Information (continued)	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
'	

SCHEDULE F (Form 990)

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 Schedula F (Form 990) and its instructions is at www.irs,gov/form990.

2016
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WORLD PARROT TRUST USA, INC.

Employer identification number 62-1561595

Pa		eneral Information rm 990, Part IV, line		tside the l	Jnited States. C	omplete if th	ne organization answe	ered "Yes" on
1	For grantma	kers. Does the organiz	ation maintain records			•		
	assistance, t grants or ass	he grantees' eligibility fo	or the grants or assista	nce, and the	selection criteria use	d to award the	9	X Yes No
2		, ,						, <u></u> 163 NO
2	_	ikers. Describe in Part ' utside the United States	-	ocenures for t	nonitoring the use of	rits grants an	a otner	
3	Activities per	Region. (The following	Part I, line 3 table can	be duplicated	l if additional space i	s needed.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors	(d) Activiti region () fundraising investments	es conducted in the by type) (such as,), program services, s, grants to recipients d in the region)	(e) If a desc	activity listed in (d) is program service, ribe specific type of ace(s) in the region	(f) Total expenditures for and investments in the region
S	OUTH AME	RICA	in the region					
(1)		<u> </u>		PROGRAM	SERVICES	PARROT	CONSERVATION	114,150
	ENTRAL A	ERICA AND THE	CARIBBEAN	DDOCDAM	CEDUTORO	DADDOM	COMCEDIAMION	E2 02E
(2) N	ORTH AME	RICA		PROGRAM	SERVICES	PARROT	CONSERVATION	52,835
(3)				PROGRAM	SERVICES	PARROT	CONSERVATION	7,300
. (4)		AND THE PACIF	IC	PROGRAM	SERVICES	PARROT	CONSERVATION	20,250
(5)	JB-SAHAR	AN AFRICA		PROGRAM	SERVICES	PARROT	CONSERVATION	6,050
	JROPE							
(6)				PROGRAM	SERVICES	PARROT	CONSERVATION	164,331
(7)								
<u>(8)</u>				ļ				
<u>(9)</u>				<u> </u>				
<u>(10)</u>	,							
<u>(11)</u>						<u> </u>		
(12)			ļ					
<u>(13)</u>				ļ				
(14)	<u> </u>			<u> </u>				<u>.</u>
(15)								
<u>(16)</u>		<u> </u>						
(17)				144,36 337	<u> </u>	10141 - 77	-,	
	Sub-total lotal from continuat		1	L PAT (2) - 可以 (4) - 1	Francisky transfer	14/20/25 14/20/25	The state of the s	364,916
	heets to Part I			and the same	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
- C]	Fotals (add ines 3a and 3i			1 2 3 4 3		1000000000000000000000000000000000000		364,916

Page 2

1 (a) Name of organization	(b) IRS code section and EiN (if applicable)	(c) Region	me of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (g) Amount of (g) Amount of (g) Amount of cash grent cash grent cash grent section (if applicable)	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash essistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisel, other)
			PARROT CONSERVATION	12,100	WIRE TRANSFER			
			PARROT CONSERVATION	47,265	WIRE TRANSFER	SFER		
			PARROT CONSERVATION	96,650	PAYPAL			
			PARROT CONSERVATION	20,250	WIRE TRANSFER	SFER		:
			PARROT CONSERVATION	5,200	WIRE TRANSFER	SFER		
			PARROT CONSERVATION	164,331	WIRE TRANSFER	SFER		
AND THE PARTY OF T								
	A second							
(42) The state of	· 如下的一种							
								!
	はは、							
165 The Control of th								
		···· <u> </u>						

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2016

Enter total number of other organizations or entities

~

⋖
\$
₽
4201
₹
2
06543
8

(a) Type of grant or essistance (b) Region (c) Number of	(b) Region	(c) Number of	(d) Amount of	(e) Manner of	(1) Amount of	(g) Description	(h) Method of
		racipients	. cash grant	cash disbursement	noncash assistanoe	of noncash assistance	valuation (book, FMV, appreisal, other)
€							
(2)							
(2)							
(4)							
(5)							
(9)				All and a second			
6							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)				·			
(16)							
(21)						, v denner	
						_	

che	adule F (Form 990) 2016 WORLD PARROT TRUST USA, INC. 62-1561595	Page 4
Pa	irt N 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)	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 separately 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)	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)	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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) Yes	X No
_	Schedule F (Fo	rm 990) 2016

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. See instructions.

Part I, Line 3 - Activities per Region	
Region	Expenditures Investments
SOUTH AMERICA	\$ 114,150 \$ 0
CENTRAL AMERICA AND THE CARIBBEAN	\$ 52,835 \$ 0
NORTH AMERICA	\$ 7,300 \$ 0
EAST ASIA AND THE PACIFIC	\$ 20,250 \$ 0
SUB-SAHARAN AFRICA	\$ 6,050 \$
EUROPE	\$ 164,331 \$ 0
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SCHEDULE ! (Form 990)

Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 950, Part IV, line 21 or 22. Grants and Other Assistance to Organizations,

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OMB No 1545-0047

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

INC.

General Information on Grants and Assistance

Paril

WORLD PARROT TRUST USA,

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number 62-1561595

(a) Name and address of organization or government or government or government of government or gove	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form on Dart IV line 21 for any racipient that received more than \$5,000. Part II can be dublicated if additional space is needed.	emplete if the organization an if additional space is needed	swered "Yas" on Form
23,387	ress of organization (b) EIN (c) IRC (d) Amount of cash (e) Amount of no section (fi applicable) grant cash assistance	(f) Method of valuation (g) Description of (book, FMV, appraisal, noncash assistance other)	(h) Purpose of grant
	53,387		PARROT CONSERVATION
	:		
	:		
(8)			
(6)			
ł	ions listed in the line 1 table		A
3 Enter total number of other organizations listed in the line 1 table			•

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

Schedule I (Form 990) (2016) WORLD PARROT TRUST USA, INC. 62-1561595 [Part III] Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22	TRUST USA, I	INC. 6	62-1561595 organization answere	"Yes" on Form 990 Part	V line 22
	al space is needed.		שלמיוובמונטון מיויזאיפוס	1 ce on on on eou, rain	.v,
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
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7					
Part IV, Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	le the information rec	quired in Part I, line	2; Part III, column (b)	and any other additional i	nformation.
Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds	for Monitori	ng the Use o	f Grant Funds		
WORLD PARROT TRUST USA, INC. RELIES ON SEVERAL METHODS TO MONITOR THE USE	RELIES ON SI	EVERAL METHO	DS TO MONITOR	THE USE	
OF GRANT FUNDS INCLUDING: IN-PERSON V	-PERSON VISI	TS TO LOCATIO	ISITS TO LOCATIONS WHERE THE WORK IS	WORK IS	: : : : : : : : : : : : : : : : : : : :
TAKING PLACE AS WELL AS RECEIVING WRITTEN AND VERBAL REPORTS DURING AND AT	IVING WRITTE	N AND VERBAL	REPORTS DURI	NG AND AT	
THE END OF RELATED PROJECTS. REPORTS		CLUDE STATUS	INCLUDE STATUS UPDATES ON WORK	ORK	
PROGRESS AND REPORTING ON HOW FUNDS ARE BEING ALLOCATED.	W FUNDS ARE	BEING ALLOCA	red.		
	:	: : : : : : : : : : : : : : : : : : : :	:	: : : : : : : : : : : : : : : : : : : :	
	: : : : : : : : : : : : : : : : : : : :	: : : : : : : : : : : : : : : : : : : :	: : : : : : : : : : : : : : : : : : : :		

Schedule I (Form 990) (2016)

: : : :

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.

Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

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

Open to Public

OMB No. 1545-0047

2016

Name of the organization Employer identification number 62-1561595 WORLD PARROT TRUST USA, INC. Form 990, Part VI, Line 6 - Classes of Members or Stockholders THE ORGANIZATION HAS MEMBERS WHO HAVE NO DECISION MAKING POWER OR AUTHORITY Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 THE 990 IS SENT TO THE EXECUTIVE DIRECTOR FOR APPROVAL PRIOR TO FILING THE EXECUTIVE DIRECTOR IS RESPONSIBLE FOR THE DISTRIBUTION FORM 990 TO THE REMAINDER OF THE BOARD. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy THIS IS MONITORED AND ADDRESSED BY THE BOARD OF DIRECTORS AT THEIR MEETINGS Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation THESE DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.