#### **COPY OF FORM 990**

(TO BE USED, OR COPIED, FOR)

# \*\*PUBLIC INSPECTION ONLY\*\*

#### **NOTE**

Under Internal Revenue Regulations, tax-exempt charitable organizations generally must provide requesters with <u>COPIES</u> of:

- > Its approved exemption applications, all required attachments and any related correspondence with the IRS, and
- > Its three most recent annual information returns (Form 990), including all schedules and attachments (but not the names and addresses of contributors).

<u>In-person requests:</u> A member of the public may request to inspect the documents at any principal office of the organization. The entity must provide the information requested that same day. However, if the request places an "unreasonable burden" on the organization, the staff must provide copies of the requested information no later than the next business day after the unusual circumstances cease to exist (limited to a maximum of five business days after the request).

<u>Written requests:</u> Written requests made by fax, mail, email, or overnight service, which include the requester's address, must be honored within 30 days of receipt.

Website alternative: Instead of providing copies, an organization may make the documents available on either its own or another organization's website. If it uses this option, it has to: (1) provide an exact replica of the document as was filed with the IRS; (2) advise requesters how to access the forms on the web; (3) the site should charge no access fee and require no special software or hardware to download. Organizations that post this information on the Internet still must honor in-person requests to view the applicable documents.

<u>Permissible charges</u>: Tax-exempt organizations may charge a reasonable copying fee, up to \$1 for the first page and 15 cents for each additional page, plus actual postage costs.

**Penalties:** An organization that fails to comply with the new disclosure requirements may be subject to the following penalties:

- Annual Information Return Form 990 \$20 per day for as long as the failure continues, up to a maximum of \$10,000 for each failure to provide an annual return.
- Exemption Application \$20 per day with no maximum.
- An organization that willfully fails to comply with these public inspection rules can be subject to an additional \$5,000 penalty.

**Private foundation exempt:** The new disclosure rules don't yet apply to private foundations. They must still make a copy of their annual return available for public inspection at their principal office for a period of 180 days after publishing a notice of availability.

**Donor Information:** Please note that donor information is not open to public inspection and has been excluded from this copy.

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>. rtax year beginning OCT 1, 2014 and ending SEP 30, 2015

Open to Public Inspection

Α	For the	2014 calendar year, or tax year beginning OCT 1, 2014 and er	nding SI	EP 30, 2015	
В	Check if applicable	C Name of organization		D Employer identif	ication number
Г	Addres	World Vision Inc			
	Name change			95-192	22279
	Initial return		oom/suite	E Telephone numbe	er
	Final return/	P.O. Box 9716	· ·	15-1000	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,019,278,144.
	Ameno	ed Federal Way, WA 98063-9716	•	H(a) Is this a group r	eturn
	Applic tion	F Name and address of principal officer:Richard E. Stearns		for subordinate	s? Yes X No
	pendir	same as C above		<b>H(b)</b> Are all subordinates	included? Yes No
ī	Tax-exe	empt status: $\boxed{X}$ 501(c)(3) $$ 501(c) ( ) $$ (insert no.) $$ 4947(a)(1) or	527	1	a list. (see instructions)
J	Websit	e: > www.worldvision.org		H(c) Group exemption	on number > 8170
K	Form of	organization: x Corporation Trust Association Other	L Year	of formation: 1950	M State of legal domicile: CA
P	art I	Summary			
•	1	Briefly describe the organization's mission or most significant activities: World Vi	ision is	a Christian	
Governance		humanitarian organization serving children and families global	lly.		
ž.	2	Check this box $lacktriangle$ if the organization discontinued its operations or dispose	ed of more	than 25% of its net a	ssets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	16
م 2	4	Number of independent voting members of the governing body (Part VI, line 1b)			15
es 8		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			1194
ξ		Total number of volunteers (estimate if necessary)			131730
Activities		Total unrelated business revenue from Part VIII, column (C), line 12			408,946.
~		Net unrelated business taxable income from Form 990-T, line 34			0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		1,027,232,242.	998,334,014.
Revenue		Program service revenue (Part VIII, line 2g)		509,597.	534,196.
ě		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		4,790,026.	4,855,501.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,775,158.	1,420,845.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,034,307,023.	1,005,144,556.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		773,286,866.	741,168,150.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ģ	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		100,270,066.	103,095,544.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		14,737,145.	14,612,786.
be	b	Total fundraising expenses (Part IX, column (D), line 25)   96,005,86			
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		137,393,736.	134,250,716.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,025,687,813.	
		Revenue less expenses. Subtract line 18 from line 12		8,619,210.	12,017,360.
<u> </u>		·	Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		241,699,325.	221,203,934.
Net Assets or Find Balances	21	Total liabilities (Part X, line 26)		99,197,969.	100,047,093.
	22	Net assets or fund balances. Subtract line 21 from line 20		142,501,356.	121,156,841.
P	art II	Signature Block			
Und	der pena	ties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of n	ny knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge.	
		<b>\</b>			
Sig	ın	Signature of officer		Date	
Не	re	Lawrence K. Probus, CFO, SVP			
		Type or print name and title			
		Print/Type preparer's name David C. Moja  Preparer's signature	v. 😘	Date Check	PTIN
Pai	d	David C. Moja	1074	4/29/2016 self-emplo	yed ₽007 <b>4</b> 7006
Pre	parer	Firm's name CAPIN CROUSE LLP	,	Firm's EIN ▶	36-3990892
Use	Only	Firm's address > 972 EMERSON PARKWAY			
		GREENWOOD, IN 46143		Phone no.317	7-885-2620
Ma	v the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No

World Vision Inc 95-1922279 Form 990 (2014) Page 2 Part III | Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III X Briefly describe the organization's mission: World Vision, Inc. is a 501(c)(3) Christian humanitarian organization dedicated to working with children, families, and their communities to reach their full potential, in nearly 100 countries, by helping tackle the causes of poverty and injustice. (Cont. on Sch O.) Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 761,230,394. including grants of \$ 732,751,303.) (Revenue \$ 4a ) (Expenses \$ International Programs - The Organization partners with families and communities around the world to find ways to overcome poverty, helping them obtain sustainable access to basic resources and services such as clean water, food assistance, agricultural training, healthcare, economic development, child protection, and other goods and services. One of the Organization's primary funding sources for this work is child sponsorship, through which the Organization's staff in impoverished communities seek to improve children's physical, emotional, and spiritual well-being through a relationship with their sponsorship donor. Additionally, the Organization responds to natural and man-made disasters to save lives and help restore livelihoods. For additional information visit www.worldvision.org/about-us/how-we-work. 8,416,847.) (Revenue\$ 534,196. 73,593,846. including grants of \$ ) (Expenses \$ Domestic Programs - The Organization works with local churches, teachers, business owners, local non-profit organizations, students, and volunteers throughout the United States as they seek to serve distressed communities and neighborhoods in a variety of U.S. locations. This work is carried out in part through the Organization's network of product distribution centers, emergency response efforts, and tutoring and youth development programs. 4,061,986. including grants of \$ ) (Revenue \$ \_ Public Awareness and Education - The Organization seeks to help government officials and the public gain awareness and take action on poverty and justice-related issues. World Vision advocates on behalf of children and the poor to increase understanding of issues, involvement in solutions, and prayer support.

Other program services (Describe in Schedule O.) ) (Revenue \$

including grants of \$

Total program service expenses ▶ 4e

838,886,226.

# Form 990 (2014) World Vision 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	X	
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	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? 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	X	
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
a	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	444	v	
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
•	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	
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
ıza		12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		<del>-</del>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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		

Form 990 (2014) World Vision Inc

Part IV Checklist of Required Schedules (continued) 95-1922279 Page 4

			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	<u> </u>
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	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 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		
	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			l
	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			l
	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,"			.,
07	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	07		х
28	of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
Ŭ	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	
35a	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?			1
	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			1
	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?			1
	Note. All Form 990 filers are required to complete Schedule O	38	Х	Щ_

#### Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	368			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	gaming			
	(gambling) winnings to prize winners?		1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a	1194			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	D. I. I		За	х	
			3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	·····			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	· I	4a	х	l
b	If "Yes," enter the name of the foreign country:   Bermuda				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (	(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 the organization				
	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 contributions or git				
	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 provi	ided to the payor?	7a	Х	l
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 require	ed			
	to file Form 8282?		7c	Х	L
d	If "Yes," indicate the number of Forms 8282 filed during the year	3			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	as required?	7g		<u></u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
	Did the sponsoring organization make any taxable distributions under section 4966?		9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	-	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	ļ	40		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	<b>Note.</b> 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  Interstitute amount of recognice and head				
	Enter the amount of reserves on hand		145		Х
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		_
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		1

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.

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

Sec	tion A. Governing Body and Management								
		_	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	6							
	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 0.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b	5							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
_	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			v					
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X					
6	Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-							
7a		7a		х					
h	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	1 a							
b	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:	75							
а		8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
9									
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х					
b	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	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х						
b	, , , , , , , , , , , , , , , , , , , ,	12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 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	Х						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45	v						
	The organization's CEO, Executive Director, or top management official	15a	X						
O	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	Х						
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
.oa		16a		Х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100							
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶CO, FL, KY, LA, MN, MS, NH, OR, PA, SC, VA, WA								
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 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, ar	ıd finan	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records:								
	Jennifer A. Brenner - 253-815-1000								
	34834 Weyerhaeuser Way S, Federal Way, WA 98001								

# 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 (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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)	l	211120		C)	про	nout	(D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle cer ar	Pos heck ss pe	ition more rson	than is bot	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) Richard E. Stearns	40.00									
President		Х		Х				451,254.	0.	85,501.
(2) Dr. Joan Singleton	1.00									
Chairman		Х		Х				0.	0.	0.
(3) Sandy Grubb	1.00									
Vice Chairman		Х		Х				0.	0.	0.
(4) Gary Duim	1.00									
Secretary/Treasurer		Х		Х				0.	0.	0.
(5) Dr. Leith Anderson	1.00									
Board Member		Х						0.	0.	0.
(6) Dr. Vinh Chung	1.00									
Board Member		Х						0.	0.	0.
(7) Rev. John Crosby	1.00									
Board Member		Х						0.	0.	0.
(8) Lisa Trevino Cummins	1.00									
Board Member		Х						0.	0.	0.
(9) Christin McClave	1.00									
Board Member		Х						0.	0.	0.
(10) Tim Pawlenty	1.00									
Board Member		Х						0.	0.	0.
(11) Deborah Pegues	1.00									
Board Member		х						0.	0.	0.
(12) Dr. Soong-Chan Rah	1.00									
Board Member		Х						0.	0.	0.
(13) Doug Treff	1.00									
Board Member		Х						0.	0.	0.
(14) Roland C. Warren	1.00									
Board Member		х						0.	0.	0.
(15) Dr. Jerry E. White	1.00									
Board Member		х	L	L_		L_	L	0.	0.	0.
(16) Bonnie Wurzbacher	1.00									
Board Member		х						0.	0.	0.
(17) Dr. Steven Hayner (part year)	1.00									
Board Member		х						0.	0.	0.
432007 11-07-14										Form <b>990</b> (2014)

432007 11-07-14 Form **990** (2014)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B) (C)							(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	, unle	ss pe	rson i	is bot or/trus	h an	compensation	compensation	amount of	
	week	_	er an	uau	recio	or/trus	iee)	from	from related	other	
	(list any hours for	irecto						the	organizations	compensation	
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	organizations	ndividual trustee or director	Institutional trustee		ee	mpen		(***-2/1099-141130)		and related	
	below	dualt	utiona	r	nploy	st co	Je.			organizations	
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Form			Ü	
(18) Katie Smith Milway (part year)	1.00										
Board Member		Х						0.	0.	0.	
(19) Lawrence K. Probus	40.00										
CFO, Sr VP Strat Solutions				Х				254,659.	0.	60,586.	
(20) Edgar Sandoval	40.00										
C00				Х				0.	0.	0.	
(21) Joan Mussa	40.00										
Sr VP Mobilization					Х			234,194.	0.	60,584.	
(22) Kent Hill	40.00										
Sr VP Intl Programs					Х			235,260.	0.	30,342.	
(23) Julie Regnier	40.00										
Sr VP HR					Х			194,722.	0.	37,284.	
(24) William Randolph	40.00										
CIO/CAO					Х			196,425.	0.	47,365.	
(25) Christopher Glynn	40.00										
Sr VP Trans Engagement					Х			202,021.	0.	36,014.	
(26) John Daggett	40.00										
Treasury Director					Х			184,753.	0.	56,594.	
1b Sub-total								1,953,288.	0.	414,270.	
c Total from continuation sheets to Part V	I, Section A						<b></b>	904,140.	0.	183,883.	
d Total (add lines 1b and 1c)							<u> </u>	2,857,428.	0.	598,153.	

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

160

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

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B)	(C)
Name and business address	Description of services	Compensation
Russ Reid Company		
2 N Lake Avenue #600, Pasadena, CA 91101	Marketing	7,519,731.
Kaye Smith Business Graphics		
PO Box 956, Renton, WA 98057	Marketing	6,256,845.
Missionary Expediters Inc, 5620		
Tchoupitoulas St, New Orleans, LA 70115	Shipping	3,424,542.
Targetcast LLC		
909 3rd Ave 31st FL, New York, NY 10022	Marketing	3,358,443.
Family Christian Stores Inc, 5300		
Patterson Ave SE, Grand Rapids, MI 49530	Sponsorship	3,124,956.
2 Total number of independent contractors (including but not limited	d to those listed above) who received more than	
\$100,000 of compensation from the organization	103	

Form 990 World Vision Inc 95-1922279

	Inc									9
Part VII Section A. Officers, Directors, Tr		nplo	oyee			ligh	est			
<b>(A)</b> Name and title	(B) Average hours	(c)		Pos	C) ition	ı app	dv)	( <b>D</b> ) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) Lana Reda	40.00									
P Channel/Product Mgmt						Х		195,276.	0.	30,33
28) Steve McFarland	40.00									
TP Chief Legal Officer						Х		185,167.	0.	38,60
29) Cheryl Jereczek	40.00									
P Private Funding						Х		177,378.	0.	37,67
30) Kathleen Evans	40.00									
P Chief Fin and Stra						Х		174,545.	0.	36,40
31) Timothy Sawer	40.00									
P Growth Opportunities						Х		171,774.	0.	40,86
		1								
		1								
	1	J	ı	1	ı	ı	i	1		

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Form 990 (2014) World Vision Inc
Part VIII Statement of Revenue

			Check if Schedule O conta	ains a resp	onse	or note to any lin	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
र छ	1	_	Federated campaigns	1:		1,947,477.		15151135		312 314
uni uni	'		Membership dues		-	1,273,730.				
اع تي					_	1,803,708.				
Ľ¥!			Fundraising events	·····	_	1,005,700.				
]   ja			Related organizations	·····	-	171 050 308				
Siz			Government grants (contributions gifts grant	· -	e	171,950,308.				
眞		Т	All other contributions, gifts, grant	II.	.	001 250 701				
물히			similar amounts not included abov			821,358,791.				
Contributions, Gifts, Grants and Other Similar Amounts		_	Noncash contributions included in lines			306,532,065.	998,334,014.			
0 (0		n	Total. Add lines 1a-1f				990,334,014.			
.	^	a	Other Program Services			Business Code 900099	516,809.	516,809.		
<u>š</u>	2	a b	Merchandise Fees			900099	17,387.	17,387.		
Ser		-	Herchandrae Fees			300033	17,307.	17,307.		
E E		c d								
Real		u								
Program Service Revenue		•	All other program service reve	0110						
			Total. Add lines 2a-2f				534,196.			
	3		Investment income (including				,			
	Ū		other similar amounts)				5,038,574.		<70,759.	5,109,333.
	4		Income from investment of tax				, , -		, -	, , -
	5 Royalties						3,485.			3,485.
	·		, ioyamoo	(i) Rea		(ii) Personal	, -			,
	6	a	Gross rents	1,117,		(ii) i diddinai				
	Ū		Less: rental expenses	366,						
			Rental income or (loss)	750,						
				,		<b>•</b>	750,255.			750,255.
	7		Gross amount from sales of	(i) Secur		(ii) Other	,			,
	·	-	assets other than inventory	12,394,						
		b	Less: cost or other basis	, ,		,				
		_	and sales expenses	12,319,	415.	1,157,164.				
		С	Gain or (loss)		642.	<257,715.	>			
			Net gain or (loss)				<183,073.	>		<183,073.>
.	8		Gross income from fundraising				,			
une	_		· · · · · · · · · · · · · · · · · · ·	,708. of						
eve			contributions reported on line							
Other Reven			Part IV, line 18		а	262,507.				
ţ.		b	Less: direct expenses			290,052.				
0			Net income or (loss) from fund				<27,545.	>		<27,545.>
	9		Gross income from gaming ac							
			Part IV, line 19		a					
		b	Less: direct expenses							
		С	Net income or (loss) from gam	ing activitie	es					
	10	а	Gross sales of inventory, less	returns						
			and allowances		а					
		b	Less: cost of goods sold		b					
ļ		С	Net income or (loss) from sales	s of invent	ory	<b></b>				
ļ			Miscellaneous Revenue	Э		Business Code				
	11	а	Other Revenue			900099	441,533.		226,588.	214,945.
		b	Tour Revenue			711130	253,117.		253,117.	
		С								
		d All other revenue								
			Total. Add lines 11a-11d				694,650.	F24 425	400 045	F 06F 100
	12	:	Total revenue. See instructions.				1,005,144,556.	534,196.	408,946.	5,867,400.

#### 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).

0001	Check if Schedule O contains a respons				
_		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21	8,353,266.	8,353,266.		
2	Grants and other assistance to domestic	0,333,200.	0,333,200.		
2	individuals. See Part IV, line 22	63,581.	63,581.		
2	F	03,301.	03,301.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	732,751,303.	732 751 303		
4	individuals. See Part IV, lines 15 and 16	732,731,303.	732,751,303.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	2 420 240	461 016	1 474 124	404 200
	trustees, and key employees	2,430,348.	461,816.	1,474,134.	494,398.
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	82,251,633.	22,915,528.	23,905,360.	35,430,745.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	3,253,725.	932,075.	877,029.	1,444,621.
9	Other employee benefits	9,261,977.	2,593,169.	2,654,801.	4,014,007.
10	Payroll taxes	5,897,861.	1,632,423.	1,754,311.	2,511,127.
11	Fees for services (non-employees):				
а	Management				
b	Legal	117,099.	24,983.	53,102.	39,014.
С	Accounting	551,076.	35,205.	515,871.	
	Lobbying	90,458.	90,458.		
	Professional fundraising services. See Part IV, line 17	14,612,786.			14,612,786.
	Investment management fees	208,802.		208,802.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	16,934,719.	2,995,835.	5,758,298.	8,180,586.
12	Advertising and promotion	7,467,007.	193,348.	4,789,641.	2,484,018.
13	Office expenses	22,256,390.	3,687,632.	2,443,136.	16,125,622.
14	Information technology	2,726,574.	59,088.	2,148,003.	519,483.
15	Royalties				
16	Occupancy	6,335,819.	1,934,914.	1,727,826.	2,673,079.
17	Travel	6,694,470.	2,091,512.	939,168.	3,663,790.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,340,123.	731,110.	328,296.	1,280,717.
20	Interest	330,515.		330,515.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,914,660.	1,568,548.	2,316,246.	2,029,866.
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25. column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	Domestic GIK Ministry	54,997,490.	54,997,490.		
b	Credit Card & Bank Fees	4,860,945.	278,100.	4,253,592.	329,253.
С	Repairs and Maintenance	1,239,777.	445,610.	679,701.	114,466.
d	Other	1,184,792.	49,232.	1,077,269.	58,291.
	All other expenses	, ,	,		· · · · · · · · · · · · · · · · · · ·
25	Total functional expenses. Add lines 1 through 24e	993,127,196.	838,886,226.	58,235,101.	96,005,869.
26	<b>Joint costs.</b> Complete this line only if the organization	. ,	. ,	• • •	. ,
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X if following SOP 98-2 (ASC 958-720)	4,663,116.	1,219,150.	1,115,769.	2,328,197.
	/				

# Form 990 (2014) Part X | Balance Sheet

		Check if Schedule O contains a response or no	te to anv	line in this Part X			
		ones. Il constant o contains a response of ne	io to uny		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			874,020.	1	945,062.
	2	Savings and temporary cash investments			5,072,036.	2	11,297,205.
	3	Pledges and grants receivable, net			18,004,823.	3	16,099,692.
	4	Accounts receivable, net			10,861,653.	4	10,527,122.
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensations	ated emp	oloyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pers	ons (as defined under			
		section 4958(f)(1)), persons described in section	1 4958(c)	(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501(	c)(9) voluntary			
ठ		employees' beneficiary organizations (see instr). Complete Part II of Sch L				6	
Assets	7	Notes and loans receivable, net			534,312.	7	314,239.
⋖	8	Inventories for sale or use			56,966,177.	8	53,816,539.
	9	Prepaid expenses and deferred charges			14,709,939.	9	11,417,751.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		129,178,441.			
	b	Less: accumulated depreciation	10b	76,363,659.	55,472,602.	10c	52,814,782.
	11	Investments - publicly traded securities			20,177,240.	11	17,696,886.
	12	Investments - other securities. See Part IV, line	11		40,175,775.	12	29,099,290.
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			18,850,748.	15	17,175,366.
	16	Total assets. Add lines 1 through 15 (must equ		241,699,325.	16	221,203,934.	
	17	Accounts payable and accrued expenses		25,263,237.	17	27,942,747.	
	18	Grants payable			48,786,033.	18	10,210,193.
	19	Deferred revenue			5,605,916.	19	9,114,098.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ies	22	Loans and other payables to current and former					
ij		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L			5 500 055	22	20 200 455
	23	Secured mortgages and notes payable to unrela			5,528,077.	23	29,022,177.
	24	Unsecured notes and loans payable to unrelate		_		24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on lines	-	•	14 014 706	0.5	22 757 070
	00	Schedule D		14,014,706. 99,197,969.	25	23,757,878. 100,047,093.	
	26	Total liabilities. Add lines 17 through 25			33,137,303.	26	100,047,093.
"		Organizations that follow SFAS 117 (ASC 958		nere 🚩 🔼 and			
ĕ	27	complete lines 27 through 29, and lines 33 ar			62,967,097.	27	30,456,978.
alan	27 28	Unrestricted net assets Temporarily restricted net assets			71,840,632.	28	82,583,458.
B	29				7,693,627.	29	8,116,405.
Net Assets or Fund Balances	23	Organizations that do not follow SFAS 117 (A		check here	.,.,.,.	23	5,210,100.
F		and complete lines 30 through 34.	330)	, oncor here			
ts c	30	Capital stock or trust principal, or current funds				30	
SSe	31	Paid-in or capital surplus, or land, building, or ed				31	
Ţ	32	Retained earnings, endowment, accumulated in				32	
Š	33	Total net assets or fund balances			142,501,356.	33	121,156,841.
	34	Total liabilities and net assets/fund balances			241,699,325.	34	221,203,934.
					, ,		, , •

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,005	,144,	556.
2	Total expenses (must equal Part IX, column (A), line 25)	2	993	,127,	,196.
3	Revenue less expenses. Subtract line 2 from line 1	3	12	,017,	360.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	142	,501,	356.
5	Net unrealized gains (losses) on investments	5	<14	,200,	497.
6	Donated services and use of facilities	6		171,	530.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<19	,332,	,908.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	121	,156,	841.
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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	-	За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Х	

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

## **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

World Vision Inc.

Employer identification number

95-1922279 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 X 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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. 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						_
	membership fees received. (Do not						
	include any "unusual grants.")						
2	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						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
	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.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	oto (soo instructi	one)			12	
	First five years. If the Form 990 is for	•	,	d fourth or fifth to			
10	organization, check this box and <b>stop</b>						
Sec	etion C. Computation of Publi				• • • • • • • • • • • • • • • • • • • •		
	Public support percentage for 2014 (I		<u> </u>	column (f))		14	%
	Public support percentage from 2013					15	<u> </u>
	33 1/3% support test - 2014. If the o						
	stop here. The organization qualifies	•		•		•	
b	33 1/3% support test - 2013. If the o						
	and stop here. The organization quali	-					
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	_					
	meets the "facts-and-circumstances"			=		-	<b>•</b>
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the	ū				•	
	organization meets the "facts-and-circ		•		•		
18	Private foundation. If the organizatio		-	•			s
	<u> </u>			<u> </u>			

# 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	siew, piedee cerri	piete i dit ii.)				
	endar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and			, ,			,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
·	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	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					•	
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	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) organi	zation,
	check this box and stop here	·····					<b>&gt;</b>
Se	ction C. Computation of Publi	c Support Pe	ercentage				
15	Public support percentage for 2014 (li	ine 8, column (f) c	divided by line 13,	column (f))		15	%
	Public support percentage from 2013					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
19	a 33 1/3% support tests - 2014. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	e organization qua	lifies as a publicly	supported organi	zation	▶□
ł	33 1/3% support tests - 2013. If the	•			•	•	
	line 18 is not more than 33 1/3%, che	ck this box and <b>s</b>	top here. The org	anization qualifies	as a publicly supp	oorted organization	▶∐
20	Private foundation. If the organization	n did not check a	box on line 14 19	a or 19b check t	his box and see in	structions	

## 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 <code>part VI</code>, 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		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	O.L.		
	9b		
	9с		
	10a		
	10b		
. 0		0 E7\	0044

Pa	rt IV Supporting Organizations (continued)			J
	(continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			110
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in part VI.	11c		
	tion B. Type I Supporting Organizations			
		-	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	71 11 3 3		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	<u>).</u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in 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	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	За		
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.	3b		l

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	Ŭ		
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust o	n Nov. 20, 1970. <b>See instru</b>	uctions. All		
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.			
Sect	Section A - Adjusted Net Income  (A) Prior Year  (optional)					
_	Not short term conital gain	1		(ориона)		
1 2	Net short-term capital gain	2				
3	Recoveries of prior-year distributions  Other gross income (see instructions)	3				
	Other gross income (see instructions)	4				
<u>4</u> 5	Add lines 1 through 3	5				
6	Depreciation and depletion  Portion of opporating expanses paid or incurred for production or	+ 3				
O	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)	<del>-                                    </del>				
8_	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		(D) Current Veer		
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):					
a	Average monthly value of securities	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				
е	Discount claimed for blockage or other					
	factors (explain in detail in <b>Part VI</b> ):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
_3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions).	4				
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
_6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	1 1				
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional		ited Type III supporting org	anization (see		
	instructions).			·		

Schedule A (Form 990 or 990-EZ) 2014

Pai	TEV   Type III Non-Function	ally integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	tion D - Distributions				Current Year
1	Amounts paid to supported organiz	ations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity the				
	organizations, in excess of income f				
3	Administrative expenses paid to acc	complish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-us	e assets			
5	Qualified set-aside amounts (prior IF	RS approval required)			
6	Other distributions (describe in Part	VI). See instructions.			
7	Total annual distributions. Add line	es 1 through 6.			
8	Distributions to attentive supported	organizations to which the	ne organization is responsive	Э	
	(provide details in Part VI). See instr	ructions.			
9	Distributable amount for 2014 from	Section C, line 6			
10	Line 8 amount divided by Line 9 am	ount			
			(i)	(ii)	(iii)
Cooti	tion E - Distribution Allocations (see	instructions)	Excess Distributions	Underdistributions	Distributable
Secu	tion E - Distribution Allocations (see	e instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from	Section C, line 6			
2	Underdistributions, if any, for years	prior to 2014			
	(reasonable cause required-see inst	ructions)			
3	Excess distributions carryover, if an	y, to 2014:			
а					
b					
С					
d					
е	From 2013				
f	Total of lines 3a through e				
g	Applied to underdistributions of price	r years			
h	Applied to 2014 distributable amount	nt			
i	Carryover from 2009 not applied (se	e instructions)			
j	Remainder. Subtract lines 3g, 3h, a	nd 3i from 3f.			
4	Distributions for 2014 from Section	D,			
	line 7:				
а	Applied to underdistributions of price	r years			
b	Applied to 2014 distributable amount	nt			
С	Remainder. Subtract lines 4a and 4	o from 4.			
5	Remaining underdistributions for ye	ars prior to 2014, if			
	any. Subtract lines 3g and 4a from I	ine 2 (if amount			
	greater than zero, see instructions).				
6	Remaining underdistributions for 20				
	and 4b from line 1 (if amount greate	r than zero, see			
	instructions).				
7	Excess distributions carryover to	<b>2015.</b> Add lines 3j			
	and 4c.				
8	Breakdown of line 7:				
а					
b					
С					
d	Excess from 2013				
е	Excess from 2014				

Schedule A (Form 990 or 990-EZ) 2014

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

2014

**Employer identification number** 

V	World Vision Inc	95-1922279						
	World Vision Inc 95-1922279  ganization type (check one):							
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation							
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501  General Rule	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru							
~	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor	•						
Special Rules								
sections 509(a)( any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount EZ, line 1. Complete Parts I and II.	or 16b, and that received from						
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ibutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ of cruelty to children or animals. Complete Parts I, II, and III.							
year, contribution is checked, enter purpose. Do not	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from one exclusively for religious, charitable, etc., purposes, but no such contributions totaled metric here the total contributions that were received during the year for an exclusively religious at complete any of the parts unless the <b>General Rule</b> applies to this organization because it able, 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>						
	n that is not covered by the General Rule and/or the Special Rules does not file Schedule E on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo							

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)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

, , , , , , , , , , , , , , , , , , , ,	
Name of organization	Employer identification number
World Vision Inc	95-1922279

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 73,201,287.	Person Payroll Noncash X  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP + 4	\$ 91,221,286.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$5,317,479.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Haine, audiess, and Zif T T	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NO.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Part II

World Vision Inc 95-1922279

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

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Pharmaceuticals		
		\$ 73,201,287.	09/30/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	Food Commodities		
		\$6,173,574.	09/30/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	Food Commodities		
		\$ \$ 35,546,946.	09/30/15
(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
		<b>\$</b>	
20150 11 0		Schodula B / Form (	000 000-E7 or 000-DE\/201

Name of orga	nization		Employer identification number
World Vis	ion Inc		95-1922279
Part III		s, 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
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	nift
	Transferee's name, address, ar		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gi	gift  Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
·			
	Transferee's name, address, ar	(e) Transfer of gi	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-  -		(e) Transfer of gi	jift
-	Transferee's name, address, ar	nd ZIP + 4	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

• 5	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III			
	e of organization	tone. Complete Fait III.		Em	ployer identification number
	World Visio				95-1922279
Pai	rt I-A Complete if the org	ganization is exempt unde	r section 501(c) o	or is a section 527	organization.
2	Provide a description of the organiz Political expenditures Volunteer hours	·		<b>&gt;</b>	\$
Pai	rt I-B Complete if the org	ganization is exempt unde	r section 501(c)(	3).	
1	Enter the amount of any excise tax	•	1 / 1	,	\$
2	Enter the amount of any excise tax	incurred by organization manager	s under section 4955	<b>&gt;</b>	\$
	If the organization incurred a sectio				
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				
Pai	rt I-C Complete if the org	ganization is exempt unde	r section 501(c),	except section 50	1(c)(3).
3 4 5	Enter the amount of the filing organ exempt function activities  Total exempt function expenditures line 17b  Did the filing organization file Form Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	s. Add lines 1 and 2. Enter here an  1120-POL for this year?  mployer identification number (EIN tion listed, enter the amount paid omptly and directly delivered to a	d on Form 1120-POL, of all section 527 pol from the filing organiza	itical organizations to whation's funds. Also enter nization, such as a sepa	\$ Yes No nich the filing organization the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

Schedule C (Form 9	990 or 990-EZ) 2014	World V	ision Inc					Page <b>2</b>
Part II-A Cor	mplete if the org tion 501(h)).	ganizatio	on is exei	npt under sectio	n 501(c)(3) and fil	led Form 5768(	election und	ler
A Check ►	if the filing organiza	tion belon	gs to an affi	liated group (and list ir	n Part IV each affiliated	l group member's nai	me, address, EII	٧,
	expenses, and sha						, ,	,
B Check ▶	. ,		, 0	nd "limited control" pro	ovisions apply.			
	Limi	ts on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated totals	group
1a Total lobbying	g expenditures to infl	uence pub	olic opinion (	grass roots lobbying)				
<b>b</b> Total lobbying	g expenditures to infl	uence a le	gislative boo	dy (direct lobbying)				
c Total lobbying	g expenditures (add I	ines 1a an	d 1b)					
								,
				i)				
				e following table in bot				
	on line 1e, column (a) o			bying nontaxable am				
Not over \$500	, , ,			the amount on line 1e				
· ·	00 but not over \$1,00	0.000		00 plus 15% of the exc				
<u> </u>	000 but not over \$1,5		\$175,000 plus 10% of the excess over \$1,000,000.					
		0 plus 5% of the exce						
Over \$17,000		,,	\$1,000,0	•	***************************************			
	,		+ - , ,					
g Grassroots no	ontaxable amount (er	nter 25% c	of line 1f)					
	1g from line 1a. If zer							
	•	•						
				line 1i, did the organiz			•	
reporting sec	tion 4911 tax for this	vear?		,			Yes	☐ No
		,		eraging Period Under				
(Sc	ome organizations t			01(h) election do not ate instructions for li	have to complete all nes 2a through 2f.)	of the five columns	below.	
		Lob	bying Exper	nditures During 4-Yea	ar Averaging Period			
	dar year r beginning in)	(a)	2011	<b>(b)</b> 2012	(c) 2013	<b>(d)</b> 2014	(e) Tota	ıl
2a Lobbying nor								
<b>b</b> Lobbying ceil (150% of line	ing amount 2a, column(e))							
(.5570 67 11110	,(0))							
c Total lobbying	g expenditures							

Schedule C (Form 990 or 990-EZ) 2014

d Grassroots nontaxable amounte Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

# Schedule C (Form 990 or 990-EZ) 2014 World Vision Inc 95-1922279 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)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(k	<b>)</b>
of the lobbying activity.	Yes	No	Amo	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?	Х			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?	X			24,068.
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X			49,741.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X			8,500.
i Other activities?	X			8,149.
j Total. Add lines 1c through 1i				90,458.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	)(5), or se	ection	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Part 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."	"No," O	R (b) Par		ne 3, is
<ul> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)</li> </ul>				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
<b>b</b> Carryover from last year				
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information		•		
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part I	I-A, lines 1	and 2 (see	
nstructions); and Part II-B, line 1. Also, complete this part for any additional information.	,	·	,	
Part II-B, Line 1, Lobbying Activities:				
la Volunteers - World Vision volunteers are involved in lobbying in				
support of poverty and justice-related issues.				
lb Paid staff - The Advocacy team of World Vision is involved in				
lobbying in support of poverty and justice-related issues.				

Schedule C (Form 990 or 990-EZ) 2014 World Vision Inc	95-1922279	Page 4
Part IV Supplemental Information (continued)		
1d Mailings to members, legislators, or the public - World Vision		
periodically communicates directly to Legislators and the Executive		
Branch or the general public on poverty and justice-related issues.		
1g Direct contact with legislators, their staffs, government officials,		
or a legislative body - World Vision has periodic direct contact with		
these parties in support of poverty and justice-related issues.		
1h Rallies, demonstrations, seminars, conventions, speeches, lectures,		
or any other means - World Vision will periodically publish articles on		
policy regarding poverty and justice-related issues.		
1i Other activities - World Vision pays dues to a variety of		
organizations that engage in lobbying around poverty and		
justice-related issues.		
·		

#### **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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

World Vision Inc

**Employer identification number** 95-1922279

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	103	19
2	Aggregate value of contributions to (during year)	8,160,439.	484,096.
3	Aggregate value of grants from (during year)	12,935,224.	575,401.
4	Aggregate value at end of year	29,963,420.	3,302,255.
5	Did the organization inform all donors and donor advisors in v		d funds
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose co	onferring
	impermissible private benefit?		X Yes No
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990, Par	rt IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a histori	ically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	eased, extinguished, or terminated by the c	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements dur	ing the year ►
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) abov	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes th	e organization's accounting for
Da	conservation easements.	i Ant I lintonical Turnounce on Oth	an Oireilan Assats
Pai	t III Organizations Maintaining Collections of	-	ner Similar Assets.
	Complete if the organization answered "Yes" to Form 9		
1a	If the organization elected, as permitted under SFAS 116 (AS	•	
	historical treasures, or other similar assets held for public exh	,	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ec	ducation, or research in furtherance of publi	ic service, provide the following amounts
	relating to these items:		<b>.</b> .
	(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 trea		gain, provide
	the following amounts required to be reported under SFAS 1		<b>.</b>
а	Revenue included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

	edule D (Form 990) 2014 World Visio				95-19			age <b>2</b>
Pai	rt III   Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Ot	her Similar As	sets(conti	nued)	
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that are a	significant use of	its collectio	n item	IS
	(check all that apply):							
а	Public exhibition d Loan or exchange programs							
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's e	xempt purpose in I	art XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or other sim	ilar assets			
	to be sold to raise funds rather than to be ma	aintained as part of tl	he organization's co	llection?		Yes		_ No
Paı	rt IV Escrow and Custodial Arran	<b>gements.</b> Comple	te if the organizatio	n answered "Yes"	to Form 990, Part I	V, line 9, or		
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	s or other assets n	ot included			
	on Form 990, Part X?					X Yes		No
b	If "Yes," explain the arrangement in Part XIII							
						Amoun	t	
С	Beginning balance				1c	130	,424,	718.
	Additions during the year					6	,450,	000.
	Distributions during the year					21	,152,	551.
	Ending balance				1f	115	,722,	167.
	Did the organization include an amount on Fo				bility?	Yes	Х	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided in Part X	III			]
Paı	rt V Endowment Funds. Complete it	f the organization ans	swered "Yes" to Fo	rm 990, Part IV, line	e 10.			
	·	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba	ck (e) Fou	r years	back
1a	Beginning of year balance	7,964,844.	7,971,680.	7,258,053	. 7,181,74	8. 5	,762,	124.
	Contributions	224,147.	23,922.	331,505	. 153,28	4. 1	,209,	903.
	Net investment earnings, gains, and losses	790,534.	354,819.	746,471	. 235,30	7.	662,	617.
	Grants or scholarships	387,579.	385,577.	364,349			452,	896.
	Other expenditures for facilities		·					
	and programs							
f	Administrative expenses							
	End of year balance	8,591,946.	7,964,844.	7,971,680	. 7,258,05	3. 7	,181,	748.
	Provide the estimated percentage of the curr							
	Board designated or quasi-endowment	3.54	%	,,				
	Permanent endowment   84.41	%	_					
	Temporarily restricted endowment	12.05 %						
	The percentages in lines 2a, 2b, and 2c shou							
За	Are there endowment funds not in the posse		ation that are held a	nd administered fo	r the organization			
	by:	J			3	1	Yes	No
	(i) unrelated organizations					3a(i)	Х	
	(ii) related organizations							Х
h	If "Yes" to 3a(ii), are the related organizations	s listed as required or	n Schedule R?			3b		
4	Describe in Part XIII the intended uses of the							
Pai	rt VI Land, Buildings, and Equipm		one idilus.					
	Complete if the organization answered		. Part IV. line 11a S	ee Form 990 Part	X. line 10.			
	Description of property	(a) Cost or ot			Accumulated	(d) Boo	k valu	
	2000ption of property	basis (investm	, , ,	, ,	depreciation	(4) 500	74141	_
12	Land	` `		,829,540.		6	,829,	540
	Land Buildings			,245,088.	16,411,445.		,833,	
	Lessehold improvements			571 361	1 289 793			568

20,288,926.

49,243,526.

52,814,782. Schedule D (Form 990) 2014

5,679,684.

5,190,347.

14,609,242.

44,053,179.

e Other.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

#### Schedule D (Form 990) 2014 Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) Mortgage Backed Securities	8,148.	End-of-Year Market Value
(B) Real Estate Investment Trusts	2,107,311.	End-of-Year Market Value
(C) Limited Partnerships	6,292,246.	End-of-Year Market Value
(D) Equity Funds	20,509,449.	End-of-Year Market Value
(E) Cash and Cash Equivalents	182,136.	End-of-Year Market Value
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	29,099,290.	

# 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)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

#### Part IX Other Assets.

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

(a) Description	(b) Book value
(1) Accrued Interest Receivable	5,934.
(2) Advances	777,437.
(3) Deposits	156,944.
(4) Limited Partnerships	152,271.
(5) Other Assets	1,190,340.
(6) Assets Held in Trust	12,410,684.
(7) Donated Real Estate	2,481,756.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	17,175,366.

#### 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)	Charitable Gift Annuities	4,910,604.
(3)	Amounts Held for Others	8,956,829.
(4)	Accrued Pension Liability	9,890,445.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	23,757,878.

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

Schedule D (Form 990) 2014 World Vision Inc 95-1922279 Page 4

Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Rev	venue per Return.	ugo -
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a			
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:			
а	Net unrealized gains (losses) on investments	. 2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	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 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
_	Add lines <b>4a</b> and <b>4b</b>			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Pai	rt XII Reconciliation of Expenses per Audited Financial Staten		penses per neturn.	
_	Complete if the organization answered "Yes" to Form 990, 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:  Donated services and use of facilities	2a		
a b	Prior year adjustments			
C	Other losses			
d				
e	Add lines 2a through 2d	•	2e	
3	Subtract line <b>2e</b> from line <b>1</b>			
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.)			
С	Add lines 4a and 4b		4c	
_5	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18.)			
Pai	rt XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par			,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad-	ditional informatio	n.	
Dart	: IV, line 1b:			
rart	z iv, line ib:			
Wor1	d Vision, Inc. and World Vision International have a noncontri	ibutory		
Cash	n Balance Retirement Plan where World Vision, Inc. acts as trus	stee for		
	·			
the	assets of the Plan.			
Part	: V, line 4:			
Enda	we want funds held by the Organization are invested to provide	a atabla		
Enac	owment funds held by the Organization are invested to provide a	stable,		
lone	g-term funding source to supplement strategic funding needs. T	These		
	,			
incl	ude support for our child sponsorship program, children in cri	isis,		
	·	-		
emer	gency relief, Christian commitments, and other priority projec	cts not		
full	y funded from annual giving.			

World Vision Inc 95-1922279 Schedule D (Form 990) 2014 Page 5 Part XIII | Supplemental Information (continued) Part X, Line 2: The Organization follows the guidance of Accounting Standards Codification (ASC) 740, Accounting for Income Taxes (ASC 740), related to uncertainties in income taxes, which prescribes a threshold of more likely than not for recognition and derecognition of tax positions taken or expected to be taken in a tax return. There are no such uncertain tax positions for the Organization for the year ended September 30, 2015. Part VII, Other Investments Assets included in Investments - Other Securities are the Organization's pooled investments. The Organization pools its investments to manage its cash needs and to maximize returns. These pooled investments include those internally or donor-designated for various purposes such as working capital, endowments, donor advised funds, and others. Part XI and Part XII The organization was included in consolidated, independent audited financial statements for the tax year for which it is completing this return. Therefore, the organization is not required to complete Schedule D, Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return nor Schedule D, Part XII Reconciliation of Expense per Audited Financial Statements With Expense per Return. In order to improve readability of Form 990 and allow for easy comparability to the organization's audited financial statements, the organization is voluntarily including the reconciliations below. Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

993,127,196

Total Expenses per Form 990, Part I, Line 18

## SCHEDULE F (Form 990)

Department of the Treasury

World Vision Inc

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.

OMB No. 1545-0047
2014
Open to Public Inspection

Name of the organization

Central America and the Caribbean

North America

**Employer identification number** 

95-1922279

Relief and development

Relief and development

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.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

0

(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
Sub-Saharan Africa	0	4	Program services	Relief and development	57,505,955.
Europe	0	0	Program services	Relief and development	3,550,609.
East Asia and the	0	0	Program services	Relief and development	72.376.
IUCILIC		1 ,	FIGHT DCT ATCED	retief and development	, 2,3/0.

Program services

Program services

					' , ' - ' '
Russia and					
Neighboring States	0	0	Program services	Relief and development	48,015.
Middle East and					
North Africa	0	0	Program services	Relief and development	235,700.
					44.455
South Asia	0	1	Program services	Relief and development	11,455.
3 a Sub-total	0	5			68,241,895.
<b>b</b> Total from continuation					
sheets to Part I	0	0			0.
c Totals (add lines 3a					

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

Schedule F (Form 990) 2014

68,241,895.

6,393,968.

423,817.

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)
								FMV at time of
		South Asia	Development	0.		678,452.	Food Commodities	donation
		Sub-Saharan Africa	Development	0.		557,113.	Food Commodities	FMV at time of donation
		Sub-Saharan Africa	Development	0.		890,176.	Food Commodities	FMV at time of donation
		Sub-Saharan Africa	Development	0.		68,648.	Food Commodities	FMV at time of donation
		Sub-Saharan Africa	Development	0.		5,100,317.	Food Commodities	FMV at time of donation
		Sub-Saharan Africa	Development	0.		1,116,616.	Food Commodities	FMV at time of donation
		Central America and the Caribbean	Development	0.		150,209.	Food Commodities	FMV at time of donation
		Sub-Saharan Africa	Development	0.		2,761,719.	Food Commodities	FMV at time of donation

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

3 Enter total number of other organizations or entities

Schedule F (Form 990) World Vision Inc 95-1922279

Page 2

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
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)
		Sub-Saharan						FMV at time of
		Africa	Development	0.		3,086,680.	Food Commodities	donation
		Sub-Saharan						FMV at time of
		Africa	Development	0.		1,954,342.	Food Commodities	donation
		Sub-Saharan						FMV at time of
		Africa	Development	0.		1,940,665.	Food Commodities	donation
		Sub-Saharan					Food Commodities	FMV at time of
		Africa	Development	0.		821,402.	and Freight	donation
		East Asia and the						FMV at time of
		Pacific	Development	0.		586,878.	Food Commodiites	donation
								FMV at time of
		South Asia	Development	0.		370,246.	Food Commodities	donation
		Central America					Food Commodities	FMV at time of
		and the Caribbean	Development	0.			and Freight	donation
		Sub-Saharan						FMV at time of
		Africa	Development	0.		977,492.	Food Commodiites	donation
		Sub-Saharan						FMV at time of
			    Development	0.		261 <sub>.</sub> 489.	Food Commodities	1

Schedule F (Form 990) World Vision Inc 95-1922279

Page 2

	(1 01111 9 9 0)								r age <b>z</b>
Part II	Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	Schedule F (Form 9	990), Part II, line	1)	-
1 (a) Name	e of organization	<b>(b)</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)
			Sub-Saharan						FMV at time of
			Africa	Development	0.		23,823.	Food Commodities	donation
			Sub-Saharan						FMV at time of
			Africa	    Development	0.		3,533,898.	Food Commodities	
			Sub-Saharan				4 262 000		FMV at time of
			Africa	Development	0.	,	4,363,008.	Food Commodities	donation
			Sub-Saharan						FMV at time of
			Africa	Development	0.		3,764,503.	Food Commodities	donation
			Sub-Saharan				6 000 066		FMV at time of
			Africa	Development	0.	•	6,900,966.	Food Commodities	donation
			Sub-Saharan						FMV at time of
			Africa	Development	0.		3,748,561.	Food Commodities	donation
			North America	Sponsorship	240 701 066	W	0.		
			NOICH AMELICA	Sponsorship	240,791,966.	wire	0.		
			North America	Relief	217,997,185.	Wire	0.		
			North America	Christian	10,000.	Check	0.		
			MOTOH AMELICA	CIII I B C I A II	10,000.	CHECK	U .		1

Part II Continuation	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	1 ago <u>=</u>
1 (a) Name of organization	( <b>b)</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)
		Central America	Promotion of International Understanding	500,000.	Check	0.		
		North America	International Relief	90,000.	Check	0.		
		North America	Christian	6,000.	Check	0.		
		North America	Housing	210,500.	Check	0.		
		North America	Christian	100,000.	Check	0.		
		North America	Human services	10,000.	Check	0.		
		North America	International relief	1,208,000.	Check	0.		
			International Economic Development	200,000.	Check	0.		
		North America	International Development	25,500.	Check	0.		

Part II Contin	uation of Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	. (Schedule F (Form 9	990), Part II, line	1)	i age <u>z</u>
1 (a) Name of orga	<b>(b)</b> IRS code section and EIN (if applicable		<b>(d)</b> 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)
		North America	Christian	10,000.	Check	0.		
		Europe	Christian	9,000.	Check	0.		
		North America	International relief	170,906.	Check	0.		
		North America	Protestant	207,765.	Check	0.		
		Central America						
		and the Caribbean	Educational services	300,000.	Check	0.		
		North America	Research institute	8,000.	Chagk	0.		
		NOICH AMELICA	Research institute	8,000.	Check	0.		
				10.000				
		North America	Christian	10,000.	, Uneck	0.		
		North America	Disater Preparedness and Relief Services	150,000.	Check	0.		
		North America	Christian	274,092.	Check	0.		

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	r age z
1 (a) Name of organization	<b>(b)</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)
			International					
			Economic Development	395,000.	Check	0.		
			International Economic Development	100,000.	Check	0.		
		NOTEL TARGETTE	Decironic Development	100,000.	circox	· ·		
			International	75.000	Oh o e le			
		North America	Development	75,000.	Cneck	0.		+
		North America	Christian	60,000.	Check	0.		-
		North America	International Relief	6,000.	Check	0.		
		North America	Christian	11,000.	Check	0.		+
		North America	Education	256,200.	Check	0.		
		South America	Christian	50,000.	Check	0.		
		North America	Christian	20,000.	Check	0.		

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	
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)
			International					
			Development	10,000.	Check	0.		
				,				
								L
		Central America and the Caribbean	Development	0.		102,850.	Medical	FMV at time of donation
		and the Caribbean	Development	0.	•	102,850.	Medical	donacion
								FMV at time of
		Europe	Development	0.		267,184.	Mixed Shipments	donation
		Central America						FMV at time of
		and the Caribbean	Development	0.		1,115,288.	Mixed Shipments	donation
		Central America						FMV at time of
		and the Caribbean	Development	0.		5,175,829.	Mixed Shipments	donation
		ank askanan						mar -
		Sub-Saharan Africa	    Development	0.		3 084 461.	Medical, assorted	FMV at time of donation
							,	
		Sub-Saharan	David			10 225 762	Missad Chinmants	FMV at time of
		Africa	Development	0.	•	10,325,762.	Mixed Shipments	donation
								FMV at time of
		Europe	Development	0.		3,283,425.	Mixed Shipments	donation
		Sub-Saharan						FMV at time of
		Africa	Development	0.		7,396,349.	Mixed Shipments	donation

Part II Continuation o	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	
l a) Name of organization	<b>(b)</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, FM' appraisal, other)
		Sub-Saharan					· '	FMV at time of
		Africa	Development	0.		5,000,000.	assorted	donation
		Sub-Saharan						FMV at time of
		Africa	Development	0.		4,396,294.	Medical, assorted	donation
		Sub-Saharan						FMV at time of
		Africa	Development	0.		15,245,625.	Mixed Shipments	donation
								FMV at time of
		North America	Development	0.		123,803,535.	Mixed Shipments	donation
						007 504		FMV at time of
		North America	Development	0.		207,534.	Mixed Shipments	donation
		Sub-Saharan Africa	    Development	0.		5 905 145	Books, assorted	FMV at time of donation
		AIIICa	Development	0.		5,805,145.	books, assorted	donacion
								FMV at time of
		North America	Development	0.		41,622.	Medical	donation
		Russia and Neighboring					Clothing,	FMV at time of
		States	    Development	0.		1,610,107.		donation
			-			, ,		
								FMV at time of
		North America	Development	0.		90,570.	Mixed Shipments	donation

Schedule F (Form 990) World Vision Inc 95-1922279

Page 2

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
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, FM appraisal, other)
							Medical, Building	
							· ·	FMV at time of
		North America	Development	0.		1,490,170.	· ·	donation
								FMV at time of
		North America	    Development	0.		5 5/0 3/13		donation
		North America	Development	0.		5,549,303.	Mixed Shipments	donation
								FMV at time of
		North America	Development	0.		528,149.		donation
							Building	
							Supplies,	L
		Central American	_	_			Clothing,	FMV at time of
		and the Caribbean	Development	0.		307,818.	assorted	donation
							Medical, Building	FMV at time of
		North America	Development	0.		145,787.	Supplies	donation
								FMV at time of
		North America	Development	0.		770,688.	Medical, assorted	donation
								FMV at time of
		North America	Development	0.		15,415.	Medical	donation
							Clothing, Books,	FMV at time of
		North America	Development	0.		1,521,728.		donation
							Books, Cleaning	
							Supplies, Fabric,	
		North America	Development	0.		3,984,540.	assorted	donation

Part II	Continuation	f Cranta and Other	Assistance to Overenia	ations or Entities Outside the	United States	(Cabadula E /Farm C	OO) Dort II line	1\	i age z
	Continuation o	Grants and Otner	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9			T
1		(b) IRS code section	(a) Danier	(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
(a) Name	of organization	and EIN (if applicable)	(c) Region	grant	of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
		, , ,		<u> </u>	ŭ		assistance	assistance	appraisal, other)
									FMV at time of
			North America	Development	0.		2,935,142.	Books	donation
				-			, ,		
									FMV at time of
			N & D	D 1			42 502	W-411 01-+1-1	
			North America	Development	0.		42,592.	Medical, Clothing	nonation
								Books, Clothing,	FMV at time of
			North America	Development	0.		812,985.	Fabric, assorted	donation
			Central American						FMV at time of
			and the Caribbean	Development	0.		1 383 355	Medical, Clothing	
			and the carragean	be veropmene	, ·		1,303,333.	rearcar, crocking	donacion
									L
								Clothing,	FMV at time of
			North America	Development	0.		907,163.	assorted	donation
			Sub-Saharan						FMV at time of
			Africa	Development	0.		23,108.	Toys	donation
							,		
			South Asia	    Development	400 010	Mi ma	0.		
			South Asia	Development	480,018.	wire	0.		
			Sub-Saharan						
			Africa	Development	621,315.	Wire	0.		
			Sub-Saharan						
				Development	1,076,323.	Wire	0.		
			<u> </u>	L	, _, _, _,	r·	<u> </u>	I .	<u> </u>

Part II Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	r ago <u>=</u>
1 (a) Name of organization	<b>(b)</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)
		Sub-Saharan						
		Africa	Development	1,214,582.	Wire	0.		
		Sub-Saharan						
		Africa	Development	149,002.	Wire	0.		
		Sub-Saharan						
		Africa	Development	5,069,292.	Wire	0.		
		South Asia	Development	84,290.	Wire	0.		
		Sub-Saharan						
		Africa	Development	137,486.	Wire	0.		
		North America	Development	109,421.	Wire	0.		
		North America	Development	150,879.	Wire	0.		
		Central America						
		and the Caribbean	Development	78,012.	Wire	0.		
		North America	Development	20,900.	Wire	0.		

Part II Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	, ago <u>=</u>
1 (a) Name of organization	<b>(b)</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)
		Sub-Saharan						
		Africa	Development	483,304.	Wire	0.		
		Sub-Saharan						
		Africa	Development	378,800.	Wire	0.		
		East Asia and the						
		Pacific	Development	72,376.	Wire	0.		
		Middle East and						
		North Africa	Development	235,700.	Wire	0.		
		Sub-Saharan		62.200		٥		
		Africa	Development	63,300.	wire	0.		
		South Asia	     Development	19,591.	Wire	0.		
		boden Asia	Development	17,371.	WILE	0.		
		Europe	Development	589,268.	Wire	0.		
						•		
		Europe	Development	128,756.	Wire	0.		
				,				
		South Asia	Development	1,846,244.	Wire	0.		

Part II Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	r ago <u>z</u>
1 (a) Name of organization	<b>(b)</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)
		East Asia and the						
		Pacific	Development	155,083.	Wire	0.		
		Sub-Saharan						
		Africa	Development	266,211.	Wire	0.		
		Sub-Saharan						
		Africa	Development	565,267.	Wire	0.		
		Russia and						
		Neighboring						
		States	Development	48,015.	Wire	0.		
		North America	Development	554,157.	Wire	0.		
		Sub-Saharan						
		Africa	Development	1,668,305.	Wire	0.		
		North America	Development	332,922.	Wire	0.		
		Sub-Saharan						
		Africa	Development	74,019.	Wire	0.		
		Sub-Saharan						
		Africa	Development	68,198.	Wire	0.		

Part II		f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	1 ago <u>2</u>
1 (a) Name	of organization	<b>(b)</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)
			North America	Development	90,895.	Wire	0.		
			Sub-Saharan Africa	Development	76,530.	Wire	0.		
			South Asia	Development	65,058.	Wire	0.		
			Sub-Saharan Africa	Development	6,246.	Wire	0.		

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.

Part III can be duplicated if a	(b) Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> 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 World Vision Inc 95-1922279

Part IV Foreign Forms

ıaıı	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

Page 4

# 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:
World Vision Inc implements its international activities through branch
offices of World Vision International, a related entity under U.S.
generally accepted accounting principles (GAAP) organized in the United
States.
The Organization is committed to strong program and financial management
of grant awards to ensure that donor funds and non-cash assistance are
used for their intended purposes. World Vision promotes solid
comprehension and effective utilization of grant regulations, policies
and resources to successfully execute US government-funded projects
through the following:
Grants Compliance Capacity Building which promote the comprehension of
grant requirements, knowledge of best practices and hands-on experience
with regulations and related policies as prerequisite for effective grant
compliance. Efforts include a comprehensive internally developed
certification program; field desk guides on high priority issues;
start-up workshops; and field visits and coaching.
Grant Performance and Reporting: World Vision actively manages
programmatic and financial performance to ensure that activities managed
directly by World Vision field offices as well as those activities
managed by sub-recipient partners are implemented effectively. World
Vision complies with all program and financial reporting as required by
each donor.
Policies and Manuals: World Vision has established comprehensive and
uniform policies and procedures that promote best business practices to
ensure efficient and effective internal controls.

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.
Internal Audit: World Vision has a strong internal audit function with
auditors based at the headquarters and international partners based in
field offices. These functions routinely conduct audits on grant funded
programs to ensure compliance with regulatory requirement.
External Audit: Grant funded programs are audited annually as part of
the organization's financial statement and government grant Circular A133
audits.
Part I, line 3:
Expenditures are accounted for using the accrual method of accounting.
Schedule F, Part I, Line 3
World Vision Inc makes grants to independently organized World Vision
International offices located in foreign countries. These grants
consist primarily of gifts-in-kind.

#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

Part I

(Form 990 or 990-EZ)

**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 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

required to complete this part.

Employer identification number

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

World Vision Inc 95-1922279

a X Mail solicitations	e X Solic	itation of	non-a	overnment grants		
<b>b</b> X Internet and email solicitation				nment grants		
c X Phone solicitations	g X Spec		•	•		
d X In-person solicitations	<b>3</b> opos	nai rairai	alon ig	0.01110		
2 a Did the organization have a written	or oral agreement with any individ	ual (inclu	dina o	fficers directors tru	stees or	
key employees listed in Form 990, I						No
<b>b</b> If "Yes," list the ten highest paid inc	•	-				
compensated at least \$5,000 by th		ursuarit ti	agie	ements under which	the fulldraiser is to	De
	- Organization.					
(2) Norman and address of individual		(iii) fundi	Did	(iv) Ourse vessints	(v) Amount paid	(vi) Amount paid
<ul><li>(i) Name and address of individual or entity (fundraiser)</li></ul>	(ii) Activity	have c or cor contrib	ustody	(iv) Gross receipts from activity	to (or retained by) fundraiser	to (or retained by)
or entity (fundraiser)		contrib	utions?	I HOITI activity	listed in col. (i)	organization
Donorworx - 219 Dufferin St,	+	Yes	No			
Suite 1B, Toronto, CANADA	Retail Marketing	X	110	129,081.	1,372,236.	<1,243,155.
Public Outreach Fundraising,	1			, -	, , ,	, , ,
LLC - 1511 3rd Ave, #788,	Retail Marketing		x	24,567.	360,975.	<336,408.
SDI Marketing USA - 175					, , , , , , , , , , , , , , , , , , , ,	,
Galaxy Boulevard #202,	Retail Marketing	х		6,954.	85,424.	<78,470.
Archer Malmo - 2901 Via		<del>-   -</del>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	,
Fortuna, Bldg 6, Ste 100,	Consulting		x	0.	673,332.	<673,332.
Assembly - 909 3rd Ave, 31st					,	
Floor, New York, NY 10022	Consulting		x	0.	4,111,383.	<4,111,383.
Bentz Whaley Flessner - 7251					-,,	
Ohms Lane, Minneapolis, MN	Consulting		x	0.	377,923.	<377,923.
Blue North - 123 Woolwich St,					, , , , , , , , , , , , , , , , , , , ,	,
Guelph, CANADA N1H 3V1	Consulting		x	0.	678,482.	<678,482.
Bob Carter Companies, LLC -	†			-	,	, -
400 Madison Drive, Suite 204,	Consulting		x	0.	94,094.	<94,094.
The Cross Agency - 701 San	†			-	,	, -
Marco Blvd, Ste 1603,	Consulting		x	0.	47,152.	<47,152.
Russ Reid Company - 2 N Lake	_				,	,
Ave #600, Pasadena, CA 91101	Consulting		x	0.	6,791,513.	<6,791,513.
	-		I		, ,	, ,
Total				160,602.	14,592,514.	<14,431,912.
3 List all states in which the organizati			outions	· · · · · · · · · · · · · · · · · · ·		
or licensing.	j				•	J
AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, H	II, ID, IL, IN, IA, KS, KY, LA, ME	,MD,MA,	MI,M	N,MS,MO		
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, C						
DC						

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 (add col. (a) through Charlotte WOV Orange County WOV col. (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 443,836 282,653. 1,339,726. 2,066,215. 2 Less: Contributions 404,703 250,383. 1,148,622. 1,803,708. **3** Gross income (line 1 minus line 2) 39,133 32,270. 191,104. 262,507. 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages ..... 8 Entertainment 9 Other direct expenses 36,860. 16,891. 236,301. 290,052. 290,052. 10 Direct expense summary. Add lines 4 through 9 in column (d) <27,545.> 11 Net income summary. Subtract line 10 from line 3, column (d) 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? No **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? \_\_\_\_\_ Yes \_\_\_\_ No **b** If "Yes," explain: \_\_\_

Schedule G (Form 990 or 990-EZ) 2014 World Vision Inc 95-	1922279	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	s 🔲 No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	13a	%
<b>b</b> An outside facility		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Name ▶		
Address		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	s No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount		
of gaming revenue retained by the third party > \$		
c If "Yes," enter name and address 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	s No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year ▶ \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part I	II, lines 9, 9b,	10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).		
Part I, Line 2b, Column (iii)		
Donorworx employees and SDI Marketing USA employees may collect cash		
Ponormorn emproject and the native englished may correct each		
donations. These cash donations are secured in a lock box and sent to		
World Vision at the end of each day.		
Part I, Line 2b, Column (iv)		
Gross receipts from activity represent only the initial gift made	<del></del>	
through the retail marketers. Future monthly sponsorship payments are		
not reflected in this total. As the period of sponsorship commitment is		

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**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

Employer identification number

World Vision	Inc						95-1922279
Part I General Information on Grants a	ınd Assistance						
<ol> <li>Does the organization maintain records criteria used to award the grants or assi</li> <li>Describe in Part IV the organization's pro</li> </ol>	stance?						
Part II Grants and Other Assistance to					anization answered "\	Yes" to Form 990, Part	IV, line 21, for any
recipient that received more than	\$5,000. Part II ca	n be duplicated if addi	tional space is need	ded.			
Name and address of organization or government	( <b>b)</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
PORTERS CALL							
PO Box 871							
Franklin, TN 37065	01-0690242	501(c)(3)	12,000.	0.			Ministry Donation
GOSPEL MUSIC TRUST FUND PO Box 932							
Brentwood, TN 37024	58-1647495	501(c)(3)	9,000.	0.			Ministry Donation
JUBILEE YOUTH RANCH 29 JUBILEE CIR PRESCOTT, WA 99348	51-0505773	501(c)(3)	1,080,000.	0.			Secondary/High School
SOJOURNERS PO BOX 70730 WASHINGTON, DC 20024	23-7380554	501(c)(3)	370,000.	0.			Religious Media
NATIONAL IMMIGRATION FORUM 50 F ST NW STE 300 WASHINGTON, DC 20001	13-1776711	501(c)(3)	350,000.	0.			Advocacy
STEPHENS CHILDREN FOUNDATION INC 3755 36TH ST SE GRAND RAPIDS, MI 49512	58-2219199	501(c)(3)	244,528.	0.			Private Grantmaking Foundations
<ul> <li>Enter total number of section 501(c)(3) a</li> <li>Enter total number of other organization</li> </ul>		4 1 1 1	ne line 1 table				<b>&gt;</b> 65.

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) 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			
COALITION FOR CHRISTIAN OUTREACH										
5912 PENN AVE										
PITTSBURGH, PA 15206-3805	25-1216330	501(c)(3)	103,600.	0.			Religious leadership			
,			, -	<u> </u>						
MANOR BRETHREN IN CHRIST										
530 Central Manor Rd										
LANCASTER, PA 17603	23-1976855	501(c)(3)	100,000.	0.			Christian			
PRESBYTERIAN FRONTIER FELLOWSHIP										
2510 WARREN RD										
INDIANA, PA 15701	94-3142057	501(c)(3)	100,000.	0.			Protestant			
anaganana galagayany guyngu										
CROSSROADS COMMUNITY CHURCH										
445 B ST	68-0264991	E01/a)/3)	00 000	0.			Christian			
YUBA CITY, CA 95991-5026	00-0204991	501(c)(3)	90,000.	0.			CIII ISCIAII			
YOUNG LIFE										
PO BOX 70065										
PRESCOTT, AZ 86304	84-0385934	501(c)(3)	79,500.	0.			Youth Development			
,			, -	<u> </u>			-			
FOOTS CREEK CHAPEL										
913 FOOTS CREEK RD										
GOLD HILL, OR 97525	93-6033165	501(c)(3)	60,000.	0.			Christian			
RUGGED CROSS RANCH MINISTRIES										
23800 NW FLYING M RD										
YAMHILL, OR 97148	20-5773688	501(c)(3)	60,000.	0.			Christian			
THE NAVIGATORS										
PO BOX 6079	04 6007006	E01/-)/2)	F0 000	•			Chui atian			
ALBERT LEE, MN 56007	84-6007896	501(c)(3)	52,000.	0.			Christian			
GORDON COLLEGE										
255 GRAPEVINE RD										
	1	1	1			I	i			

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LANGHAM PARTNERSHIP USA							
PO BOX 189							
CAVE CREEK, AZ 85327	23-7417198	501(c)(3)	50,000.	0.			Christian
UCB USA INC							
2070 MULLIGAN WAY	00 0000010	F01 / \ \ / 2 \	50.000				
MEDFORD, OR 97504	02-0706812	501(c)(3)	50,000.	0.			Health Support
PITTSBURGH OPERA INC							
2425 LIBERTY AVE							
PITSBURGH, PA 15222	25-1073139	501(c)(3)	46,200.	0.			Performing arts center
·			,				
INTERVARSITY CHRISTIAN FELLOWSHIP							
PO BOX 7895							
MADISON, WI 53707	36-2171714	501(c)(3)	58,500.	0.			Christian
SAINT MARTINS UNIVERSITY							
5300 PACIFIC AVE SE	01 0564003	F01/-\/2\	41 000	0			TT
LACEY, WA 98503-1297	91-0564993	501(c)(3)	41,000.	0.			University
MESSIANIC JEWISH THEOLOGICAL							
INSTITUTE - PO BOX 928004 - SAN							 Graduate, Professional
DIEGO, CA 92192	61-1450335	501(c)(3)	40,000.	0.			school
·			,				
THE CHURCH OF LIVING WATER							
1615 CHAMBERS ST SE							
OLYMPIA, WA 98501	91-1074612	501(c)(3)	38,000.	0.			Protestant
PREGNANCY CARE CENTER							
714 SE 8TH ST	02 1025665	F01/-\/2\	35 000	0			3114 /3
GRTS PASS, PR 97526	93-1025665	501(c)(3)	35,000.	0.			Alliance/Advocacy
REID SAUNDERS EVANGELISTIC ASSN							
PO BOX 4275							
SALEM, OR 97302	43-1964291	501(c)(3)	35,000.	0.			Protestant
	1		, ,		1	1	0 1 1 1 1 (7 200)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) 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			
CARTER MEMORIAL UNITED METHODIST										
CHURCH - 800 HIGHLAND AVE -										
NEEDHAM, MA 02494	04-2133250	501(c)(3)	26,500.	0.			Christian			
CENTRAL OREGON COMMUNITY COLLEGE										
FOUNDATION - 2600 NEW COLLEGE WAY										
- BEND, OR 97701	936041247	501(c)(3)	25,000.	0.			Educational Institutions			
WESTERN STATES FELLOWSHIP										
10496 ALTA SIERRA DR										
GRASS VALLEY, CA 95949	94-2674989	501(c)(3)	25,000.	0.			Christian			
enable vindilli, on ses is	31 20,1303	301(0)(3)	23,000.							
EVANGELICAL LUTHERAN CHURCH IN										
AMERICA - PO BOX 5023 -										
HAGERSTOWN, MD 21741	41-1568278	501(c)(3)	25,000.	0.			Protestant			
OLIVE CREST										
515 116TH AVE NE STE 174										
BELLEVUE, WA 98004	95-2877102	501(c)(3)	23,000.	0.			Foster Care			
EASTSIDE ACADEMY										
1717 BELLEVUE WAY NE										
BELLEVUE, WA 98004	60-2157596	501(c)(3)	22,000.	0.			Secondary/High School			
PHILLION, MIL 90001	00 2137330	301(0)(3)	22,000.				becondary, might beneet			
ALDERSGATE RENEWAL MINISTRIES										
121 EAST AVENUE										
GOODLETTSVILLE, TN 37072	58-1322015	501(c)(3)	19,250.	0.			Christian			
YOUTH FOR CHRIST										
400 CRATER LAKE										
MEDFORD, OR 97501-6808	93-0509269	501(c)(3)	18,000.	0.			Christian			
GUTENBERG COLLEGE INC										
1883 UNIVERSITY ST										
EUGENE, OR 97403	93-0726917	501/a)/3)	15,000.	0.			Research institute			

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) 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			
TOUCHSTONE YOUTH										
P O BOX 159231										
NASHVILLE, TN 37215-9231	62-1316818	501(c)(3)	15,000.	0.			Protestant			
			,							
BROOKLAKE CHRISTIAN SCHOOL										
PO BOX 116543										
ATLANTA, GA 30368	91-1007178	501(c)(3)	15,000.	0.			Christian			
PRISON FELLOWSHIP MINISTRIES										
P O BOX 1550										
MERRIFIELD, VA 22116-1550	62-0988294	501(c)(3)	14,000.	0.			Service to Prisoners			
CITY THEATRE										
1300 BINGHAM ST										
PITTSBURGH, PA 15203	25-1554580	501(c)(3)	13,000.	0.			Theater			
	23 1334300	501(0)(3)	13,000.				Ineacei			
FIRST PRESBYTERIAN CHURCH OF										
BELLEVUE - 1717 Bellevue Way NE -										
BELLEVUE, WA 98004	91-0690267	501(c)(3)	12,000.	0.			Christian			
	1 22 3333237		12,000.	•						
INDIANA ALLIANCE										
2510 WARREN RD										
INDIANA, PA 15701	25-1361157	501(c)(3)	10,500.	0.			Protestant			
·			·							
CASCADE CHRISTIAN HIGH SCHOOL										
815 21st Street SE										
PUYALLUP, WA 98372	93-0817076	501(c)(3)	10,000.	0.			Christian			
DESCHUTES BASIN LAND TRUST										
P O BOX 628222										
ORLANDO, FL 32832-8222	93-1186407	501(c)(3)	10,000.	0.			Environmental Quality			
FOCUS ON THE FAMILY										
P O BOX 628200	05 04 004 50	504 ( ) (2)	40.000							
ORLANDO, FL 32862-8200	95-3188150	pu1(c)(3)	10,000.	0.			Christian			

Part II Continuation of Grants and Otl	her Assistance to Go	vernments and Orga	nizations in the U	<b>nited States</b> (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW DAY INC							
11311 JAMES ST							
HOLLAND, MI 49424	25-6319941	501(c)(3)	10,000.	0.			Religion related
·			·				
POCKET TESTAMENT LEAGUE							
11 Toll Gate Rd							
LITITZ, PA 17543	22-1616250	501(c)(3)	10,000.	0.			Christian
SISTERS SCHOOLS FOUNDATION							
PO BOX 2155							Private Grantmaking
SISTERS, OR 97759	93-1223422	501(c)(3)	10,000.	0.			Foundations
SISIERS, OR 37733	95-1225422	501(0/(3/	10,000.	0.			roundacions
ST EDWARDS CATHOLIC CHURCH							
PO BOX 489							
SISTERS, OR 97759	30-0126619	501(c)(3)	10,000.	0.			Christian
				-			
PRAISEALUJAH DISCIPLESHIP							
PO BOX 928004							
SAN DIEGO, CA 92192	01-0964541	501(c)(3)	10,000.	0.			Christian
WILDERNESS TRAILS							
1600 Sky Park Dr # 216							
MEDFORD, OR 97504	23-7030922	501(c)(3)	10,000.	0.			Children & Youth Service
SALVATION ARMY							
2626 PENNSYLVANIA AVE NW				_			
WASHINGTON, DC 20037	58-0660607	501(c)(3)	9,750.	0.			Salvation Army
UNION GOSPEL MISSION							
PO BOX 7668							Human Service
	91_1680749	501(c)(3)	9,000.	0.			
OLYMPIA, WA 98507	91-1680748	501(0)(3)	9,000.	٠.		+	Organizations
CROSSWALK COMMUNITY CHURCH							
2600 NEW COLLEGE WAY							
BEND, OR 97701	54-2040324	501(c)(3)	8,000.	0.			Christian

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(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			
TEAMWORK CITY OF HOPE										
PO BOX 4001										
MARTINSVILLE, VA 24115	58-1821149	501(c)(3)	8,000.	0.			Christian			
RUACH ISRAEL										
754 GREENDALE AVE										
NEEDHAM, MA 02492	04-2713477	501(c)(3)	7,400.	0.			Religion related			
UNIVERSITY PRESBYTERIAN CHURCH										
4540 15th Ave NE										
SEATTLE, WA 98105	91-0564756	501(c)(3)	7,000.	0.			Protestant			
			,							
NATIONAL CHRISTIAN FOUNDATION										
2025 FIRST AVE PH A										
SEATTLE, WA 98121	91-0595029	501(c)(3)	7,000.	0.			Christian			
NORTH AMERICAN MISSION BOARD										
PO BOX 116543										
ATLANTA, GA 30368	58-2379481	501(c)(3)	6,000.	0.			Christian			
INSIGHT FOR LIVING										
5912 PENN AVE										
PITTSBURGH, PA 15206-3805	95-3392299	501(c)(3)	6,000.	0.			Christian			
	75 5552255		,,,,,,	-						
JONI AND FRIENDS										
340 HIGHLAND DR STE 200										
MOUNTVILLE, PA 17554	95-3402002	501(c)(3)	6,000.	0.			Christian			
WATERMARK COMMUNITY CHURCH										
7540 LBJ Freeway										
DALLAS, TX 75251	75-2830999	501(c)(3)	43,250.	0.			Protestant			
Window Aminting T 12							abulation a li			
Mission Aviation Fellowship							Christian; Community			
P.O. Box 47	05 1020002	E01/~\/3\	40.000	_			Improvement, Capacity			
Nampa, ID 83653	95-1920983	501(c)(3)	40,000.	0.			Building N.E.C.			

(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
Green Valley Christian Church 390 Ridge Vista Ave.							
San Jose, CA 95127	94-6092059	501(c)(3)	7,500.	0.			Christian
Mountain Re-Source Center HC 73 Box 18C Rosedale, WV 26636	84-1178699	501(c)(3)	0.	16 170	FMV at time of donation	Building Supplies	<b>Development</b>
OPERATION SHARING - CHRISTIAN 6550 S. Ky Route 321	04-1170099	501(0)(3)	0.	10,170.	FMV at time of	Books, Building Supplies, House Furnishings,	peveropment
Hagerhill, KY 41222	61-0661137	501(c)(3)	0.	3,698,565.	donation	Cleaning	Development
The Community Warehouse 3969 NE Martin Luther King Jr. Blv Portland, OR 97212		501(c)(3)	0.	129,315.	FMV at time of donation	Building Supplies, Assorted	Development
The Education Partnership 281 Corliss St.					FMV at time of		
Pittsburgh, PA 15220	90-0438744	501(c)(3)	0.	529,499.	donation	Mixed Shipments	Development

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are		cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehense effective utilization of grant regulations, policies and resources to				
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehense effective utilization of grant regulations, policies and resources to	4,145.	0.		
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehense effective utilization of grant regulations, policies and resources to				
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehense effective utilization of grant regulations, policies and resources to	9,436.	0.		
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehense effective utilization of grant regulations, policies and resources to				
Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehens effective utilization of grant regulations, policies and resources to	50,000.	0.		
Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehens effective utilization of grant regulations, policies and resources to				
Part I, Line 2:  World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehens effective utilization of grant regulations, policies and resources to				
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World Vision Inc is committed to strong program and financial manage grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehens effective utilization of grant regulations, policies and resources to	rt III, column (	(b), and any other a	dditional information.	
grant awards to ensure that donor funds and non-cash assistance are for their intended purposes. World Vision promotes solid comprehens effective utilization of grant regulations, policies and resources to				
for their intended purposes. World Vision promotes solid comprehens	aent of			
effective utilization of grant regulations, policies and resources t	ısed			
·	ion and			
·				
successfully execute US government-funded projects through the folio				
	/ing:			
Grants Compliance Capacity Building which promote the comprehension	of			
grant requirements, knowledge of best practices and hands-on experie	ıce			

# Part IV | Supplemental Information compliance. Efforts include a comprehensive internally developed certification program; field desk guides on high priority issues; web-based tools; start-up workshops; and field visits and coaching. Grant Performance and Reporting: World Vision actively manages programmatic and financial performance to ensure that activities managed directly by World Vision field offices as well as those activities managed by sub-recipient partners are implemented effectively. World Vision complies with all program and financial reporting as required by each donor. Policies and Manuals: World Vision has established comprehensive and uniform policies and procedures that promote best business practices to ensure efficient and effective internal controls. Internal Audit: World Vision has a strong internal audit function with auditors based at the headquarters and international partners based in field offices. These functions routinely conduct audits on grant funded programs to ensure compliance with regulatory requirement. External Audit: Grant funded programs are audited annually as part of the organization's financial statement and government grant Circular A133 audits. World Vision primarily donates cash to other organizations through Donor-Advised Funds (DAFs) and sub-grants. Additionally, there are a few donations to other organizations. Part II, line 1, Column (g): Name of Organization or Government: OPERATION SHARING - CHRISTIAN (g) Description of Non-cash Assistance: Books, Building Supplies, House

Furnishings, Cleaning Supplies, Assorted

## **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

World Vision Inc

**Employer identification number** 95-1922279

Pa	art I Questions Regarding Compensation			
	<u> </u>		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	Х	
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	Х	
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.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	X 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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

LHA For 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.

		(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)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(6)(1)-(0)	reported as deferred in prior Form 990	
(1) Richard E. Stearns	(i)	435,791.	0.	15,463.	69,016.	16,485.	536,755.	0.	
President	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) Lawrence K. Probus	(i)	246,559.	0.	8,100.	37,858.	22,728.	315,245.	0.	
CFO, Sr VP Strat Solutions	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) Joan Mussa	(i)	209,868.	0.	24,326.	37,955.	22,629.	294,778.	0.	
Sr VP Mobilization	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) Kent Hill	(i)	211,119.	0.	24,141.	26,079.	4,263.	265,602.	0.	
Sr VP Intl Programs	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) Julie Regnier	(i)	187,912.	0.	6,810.	29,556.	7,728.	232,006.	0.	
Sr VP HR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) William Randolph	(i)	188,615.	0.	7,810.	24,843.	22,522.	243,790.	0.	
CIO/CAO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) Christopher Glynn	(i)	179,870.	0.	22,151.	16,814.	19,200.	238,035.	0.	
Sr VP Trans Engagement	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) John Daggett	(i)	174,443.	0.	10,310.	40,857.	15,737.	241,347.	0.	
Treasury Director	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) Lana Reda	(i)	182,367.	0.	12,909.	29,390.	944.	225,610.	0.	
VP Channel/Product Mgmt	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) Steve McFarland	(i)	176,257.	0.	8,910.	23,302.	15,300.	223,769.	0.	
VP Chief Legal Officer	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) Cheryl Jereczek	(i)	170,568.	0.	6,810.	20,398.	17,277.	215,053.	0.	
VP Private Funding	(ii)	0.	0.	0.	0.	0.	0.	0.	
(12) Kathleen Evans	(i)	167,735.	0.	6,810.	28,759.	7,649.	210,953.	0.	
VP Chief Fin and Stra	(ii)	0.	0.	0.	0.	0.	0.	0.	
(13) Timothy Sawer	(i)	164,964.	0.	6,810.	19,227.	21,637.	212,638.	0.	
VP Growth Opportunities	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

## **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

**Open To Public** Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization

Employer identification number

95-1922279 World Vision Inc Part I Types of Property (a) (b) (c) (d) Noncash contribution Check if Number of Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art 1 Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 21,621,631. FMV at time of donation 4 Х 71,808,033. FMV at time of donation 5 Clothing and household goods Cars and other vehicles ..... 6 Boats and planes 7 Intellectual property 8 X 462 5,795,080. FMV at time of donation Securities - Publicly traded ..... 9 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures 14 Qualified conservation contribution - Other Real estate - Residential Х 800,000. FMV at time of donation 15 16 Real estate - Commercial Real estate - Other 17 18 Collectibles Х 374 46,858,259. FMV at time of donation Food inventory 19 Drugs and medical supplies ..... Х 152 112,845,769. FMV at time of donation 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 Other > ( Building Supp Х 141 24,053,746. FMV at time of donat 25 26 Other > ( Miscellaneous Х 238 15,903,571. FMV at time of donat ( Office Supp Х 105 4,451,497. FMV at time of donat 27 Other ( School Supp Х 54 2,394,479. FMV at time of donat Other > 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

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

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

Schedule M (Form 990) (2014)

Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Schedule	e M, Part I, Column (b):
The numb	per of contributors represents the number of contributions
received	1.
Schedule	e M, Line 32b:
	anization uses real estate brokers to sell gifts of real estate.

#### **SCHEDULE 0**

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

## 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.

2014

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

World Vision Inc

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

Employer identification number 95-1922279

Form 990, Part III, Line 1, Description of Organization Mission: Motivated by our faith in Jesus Christ, we serve alongside the poor and oppressed as a demonstration of God's unconditional love for all people. World Vision serves all people, regardless of religion, race ethnicity, or gender. Form 990, Part VI, Section A, line 1: The Organization has an executive committee with authority to act on behalf of the governing body. The committee includes the board chair, vice chair and standing committee chairs. The committee is chaired by the board chair. It may act on behalf of the board between meetings. In addition to responsibilities and limitations on its authority outlined in the bylaws the committee may not change the bylaws nor appoint/terminate or accept a resignation from the president. The committee serves the board by overseeing relationships with other organizations (including any subsidiary or supporting corporations), public affairs, and the board's annual evaluation of the president and his compensation, Form 990, Part VI, Section B, line 11: Form 990 is prepared by an independent CPA firm. It is provided to the entire Board of Directors by internal audit after it is reviewed by management. The Board of Directors reviews Form 990 and raises any questions to management for resolution. Form 990 is then filed electronically with the IRS and posted to World Vision's web site.

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization World Vision Inc	Employer identification number 95-1922279
World Vision has a written Conflict of Interest Policy. Annually all	
employees complete a disclosure form identifying transactions and	
relationships which may be a conflict of interest. Management reviews all	
disclosed conflicts and determines whether any conflict exists. Any	
conflicts are raised for review to a committee which includes the CFO,	
Internal Audit and Legal. Whatever action deemed necessary by this	
committee is taken, sometimes in consultation with the President. Internal	
Audit provides a summary report to the Board of Directors via the Audit	
Committee. There is a similar process for the Board of Directors to submit	
a conflict of interest disclosure form annually. The Board of Directors	
disclosures are reviewed by management. Any issues are taken to the Board	
of Directors for resolution, excluding the Board member for whom the	
conflict exists.	
Form 990, Part VI, Section B, Line 15:	
The Board of Directors mandates the compensation philosophy for the entire	
organization.	
The President's salary is reviewed on an annual basis. The Board's	
Executive Committee will formally evaluate the president based on	
performance and organizational goals after seeking documented input from	
each member of the Board, as well as the WVUS Senior Leadership team. The	
Board also determines and documents any compensation adjustments. In	
addition, the Compensation Committee, a sub-group of the Board of	
Directors, utilizes several for-profit and non-profit salary surveys to	
establish and validate the CEO's salary on an annual basis. Once the data	
is gathered and analyzed by the committee, the recommended compensation	
package for the President is presented to the full Board for approval.	
08-27-14	Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization World Vision Inc	Employer identification number 95-1922279
WOLIG VISION THE	33-1322273
The process for determining the compensation grade levels for Senior Vice	
Presidents and the Chief Operating Officer (COO) of World Vision is managed	
and documented by the World Vision US' Compensation Manager. All Senior	
Vice President positions and the COO's position are evaluated and matched	
to market data of both for-profit and nonprofit organizations where similar	
positions exist. The President approves the specific salary of each Senior	
Vice President and the COO within the appropriate grade level and within	
WVUS salary administration guidelines based upon recommendation of the	
Compensation Manager and Compensation Grading Committee. In addition,	
periodic audits and reviews are conducted utilizing an outside consultant	
to validate the compensation levels of the Senior Vice Presidents and the	
COO are consistent with our compensation philosophy and current market	
data.	
In January 2014, the Board requested a compensation review company to	
conduct a thorough market competitive executive compensation analysis to	
determine where World Vision's executives' salaries are positioned compared	
to the market. The positions reviewed included the President, Sr VP	
Strategic Solutions- CFO, Sr VP Mobilization, Sr VP International Programs,	
Sr VP Transformational Engagement, CIO/CAO, and the Sr VP Human Resources.	
Form 990, Part VI, Line 17, List of States receiving copy of Form 990:	
CO,FL,KY,LA,MN,MS,NH,OR,PA,SC,VA,WA,WI	
Form 990, Part VI, Section C, Line 19:	
World Vision posts the audited financial statements on its website. If the	
requestor does not have access to the internet the organization will mail a	

Name of the organization World Vision Inc	Employer identification number 95-1922279
copy. The governing documents and the conflict of interest policy are	
available upon request.	
Form 990, Part XI, line 9, Changes in Net Assets:	
Pension Actuarial Loss -18,840,0	29.
Change in Value of Split Interest Agreements -492,8	79.
Total to Form 990, Part XI, Line 9 -19,332,9	08.
Form 990, Part XII, Line 2c	
The organization's Board assumes responsibility for oversight of the	
audit of its financial statements and selection of its independent	
accountant. This process has not changed since the prior year.	

#### SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

## **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

World Vision Inc

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable)	<b>(b)</b> Primary activity	(c) Legal domicile (state or	(d) Total income	(e) End-of-year assets	
of disregarded entity		foreign country)			entity
World Vision Properties LLC - 26-0002063					
34834 Weyerhaeuser Way South	Holds building located in				
Federal Way, WA 98001	Washington D.C.	District of Columbia	0.	5,773,383.	World Vision Inc
World Vision Real Properties LLC -					
26-0831189, 34834 Weyerhaeuser Way South,	Receive donated real				
Federal Way, WA 98001	property	Nevada	800,000.	4,720,331.	World Vision Inc
	$\dashv$				
	1				

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr enti	
				501(c)(3))		Yes	No
World Vision Foundation - 48-1265565							
34834 Weyerhaeuser Way South							
Federal Way, WA 98001	Receive S-Corp Donations	California	501 (c)(3)	Line 11a, I	World Vision Inc		X
							_
	-						
	1						

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

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

	organization is accorded by participating and tax years											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	General	Percentage	
of related organization		(state or foreign	entity	excluded from tax under	Predominant income (related, unrelated, excluded from tax under sections 512-514)	(related, unrelated, income excluded from tax under	end-of-year assets	alloca	tions?	amount in box 20 of Schedule	partner	ownersnip
		country)		sections 512-514)		465515	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes N	<u> </u>	
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i Sec	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(b	b)(13) rolled ity?
		country)		or tracty		400010		Yes	No
	Charitable Remainder		World Vision						
Charitable Remainder Trust (1)	Trust	AZ	Inc	TRUST					Х
	Charitable Remainder		World Vision						
Charitable Remainder Trust (45)	Trust	CA	Inc	TRUST					х
	Charitable Remainder		World Vision						
Charitable Remainder Trust (1)	Trust	OR	Inc	TRUST					Х
			World Vision						
Pooled Income Fund (1)	Pooled Income Fund	WA	Inc	TRUST					Х
	Charitable Remainder		World Vision						
Charitable Remainder Trust (1)	Trust	WA	Inc	TRUST					Х

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

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No				
1	During the tax year, did the organization engage in any of the following transactions	s with one or more r	elated organizations listed	in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	<i>'</i>			1a		Х				
	<b>b</b> Gift, grant, or capital contribution to related organization(s)										
	c Gift, grant, or capital contribution from related organization(s)										
	d Loans or loan guarantees to or for related organization(s)										
	e Loans or loan guarantees by related organization(s)										
f	Dividends from related organization(s)				1f		Х				
g	Sale of assets to related organization(s)				1g		Х				
h	Purchase of assets from related organization(s)				1h		Х				
i	Exchange of assets with related organization(s)						Х				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х				
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		х				
- 1	Performance of services or membership or fundraising solicitations for related orga	ınization(s)			11		Х				
	Performance of services or membership or fundraising solicitations by related orga						Х				
	Sharing of facilities, equipment, mailing lists, or other assets with related organizati						Х				
	Sharing of paid employees with related organization(s)				10		Х				
р	Reimbursement paid to related organization(s) for expenses				1p		Х				
a q	Reimbursement paid by related organization(s) for expenses				1q		Х				
•	, , , , , , , , , , , , , , , , , , , ,				•						
r	Other transfer of cash or property to related organization(s)				1r		Х				
	Other transfer of cash or property from related organization(s)				1s		Х				
	If the answer to any of the above is "Yes," see the instructions for information on w				•						
	(a)	(b)	(c)	(d)							
	<b>(a)</b> Name of related organization	Transaction	Amount involved	Method of determining amount in	volved						
		type (a-s)									
(1)											
(2)											
(3)											
(4)	4)										
(5)											
(6)											

<u>Schedule R (Form 990) 2014</u> World Vision Inc 95-1922279 Page **4** 

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

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

(a)	(b)	(c)	(d)	(e) Are a	)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are a partners	ıll 3 sec.	Share of	Share of	Disp	ropor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	(related, unrelated,	partners 501(c) orgs.	)(3)	total	end-of-year	alloca	nate ations?	amount in box 20	managır	ownership
•		country)	sections 512-514)	Yes I		income	assets	Vac	No	(Form 1065)	Yes N	
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Schedule R	(Form 990) 2014	World Vision Inc	95-1922279	Page <b>5</b>
Part VII	(Form 990) 2014  Supplemental Info	ormation		
	Provide additional infor	mation for responses to questions on Schedule R (see instructions).		

## Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

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

OMB No. 1545-1709

• If you a	are filing for an Automatic 3-Month Extension, complete	te only Pa	art I and check this box			X	
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of t	this form).			
Electron required	complete Part II unless you have already been granted a ic filing (e-file). You can electronically file Form 8868 if y to file Form 990-T), or an additional (not automatic) 3-more file any of the forms listed in Part I or Part II with the exception.	ou need anth extens	a 3-month automatic extension of tin sion of time. You can electronically fi	ne to file (6 le Form 88	6 months for a corp 368 to request an e	extension	
		•	•				
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details of	on the elec	etronic filing of this	form,	
	v.irs.gov/efile and click on e-file for Charities & Nonprofits		understate and advantage of the contract of th	- al a al\			
Part I			<del> </del>				
•	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and o	complete	_		
Part I onl						• 🔲	
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and t	rusts must use Form /004 to reques				
En					nter filer's identifying number		
Type or print	r Name of exempt organization or other filer, see instructions.				mployer identification number (EIN) or		
File by the	World Vision Inc				95-1922279		
File by the due date for filing your	for Number, street, and room or suite no. If a P.O. box, see instructions.  Solution P.O. Box 9716			Social se	ocial security number (SSN)		
return. See instructions.							
	Federal Way, WA 98063-9716						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			01	
Application			Application			Return	
ls For		Code	Is For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720 (other than individual)			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
	Jennifer A. Brenner						
• The be	boks are in the care of $ ightharpoonup$ 34834 Weyerhaeuser Way	s - Fe	deral Way, WA 98001				
Teleph	none No. > 253-815-1000		Fax No. > 253-815-3343				
	organization does not have an office or place of business					· 🔲	
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this							
box 🕨 🔲 . If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all members the extension is for.							
<b>1</b> I re	1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until						
	May 15, 2016 , to file the exempt organization return for the organization named above. The extension						
is f	or the organization's return for:						
	calendar year or						
	X tax year beginning OCT 1, 2014	, an	d ending SEP 30, 2015		_ •		
2 If ti	ne tax year entered in line 1 is for less than 12 months, c  Change in accounting period	heck reas	on: Initial return I	Final retur	n		
3a If the	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
nor	nonrefundable credits. See instructions.			3a	\$	0.	
b If the	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
<u>e</u> st	imated tax payments made. Include any prior year overp	ayment a	llowed as a credit.	3b	\$	0.	
c Ba	lance due. Subtract line 3b from line 3a. Include your pa	yment wit	th this form, if required,				
by	using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3с	\$	0.	
Caution.	If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	453-EO ar	nd Form 8879-EO fo	or payment	

instructions.