Form 8879-TF

IRS e-file Signature Authorization for a Tax Exempt En

ndar year 2021, or fiscal year beginning	2021, and ending	20

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filer

Do not send to the IRS. Keep for your records.

For cale

Go to www.irs.gov/Form8879TE for the latest information.

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

71-0603560

EIN or SSN

Name and title of officer or person subject to tax

MIKE MYERS SENIOR VP - CFO AND TREASURER

Part I	Type of	Return and	Return	Information
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Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here X	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b99,120,433
2a	Form 990-EZ check here		Total revenue, if any (Form 990-EZ, line 9)	
За	Form 1120-POL check here		Total tax (Form 1120-POL, line 22)	
4a	Form 990-PF check here >		Tax based on investment income (Form 990-PF, Part V, line 5)	
5a	Form 8868 check here	b	Balance due (Form 8868, line 3c)	5b
6a	Form 990-T check here >		Total tax (Form 990-T, Part III, line 4)	
7a	Form 4720 check here		Total tax (Form 4720, Part III, line 1)	
8a	Form 5227 check here	b	FMV of assets at end of tax year (Form 5227, Item D)	8b
9a	Form 5330 check here	b	Tax due (Form 5330, Part II, line 19)	9b
10a	Form 8038-CP check here	b	Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b
Part	II Declaration and Signat	ure	Authorization of Officer or Person Subject to Tax	
Jnder p	penalties of perjury, I declare that	l aı	n an officer of the above entity or 🔲 I am a person subject to tax with re	espect to (name
of entity	y)		, (EIN) and that I ha	ive examined a copy of the
2021 6	ectronic return and accompanying sch	odu	les and statements, and to the host of my knowledge and helief they are	true correct and

complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

P	IN:	che	ck	one	box	only
		CITO	UN	UIIC		~,,,,

			ERO firm name		Enter five number	s, bı
X I authorize	HOGANTAYLOR,	LLP		to enter my PIN	03560	

do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Certification and Authentication Part III

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

73766711300

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ HOGANTAYLOR, LLP

Date > 10/17/22

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form 8879-TE (2021)

PUBLIC DISCLOSURE COPY

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

<u>A I</u>	ror tri	e 2021 calendar year, or tax year beginning and	enaing		
В	Check if	C Name of organization		D Employer identifi	cation number
	Addre	WINKOCK INTERNATIONAL INSTITUTE			
F	Name chan			71-06035	60
F	Initial	/ 501 / 2 11 11 11 11 1	Room/suite	E Telephone numbe	
	Final	204 ድልደጥ 4ጥዝ ደጥይድድጥ	110011,,04110	501-280-	
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	104,422,236.
	Amer return	NORTH LITTLE ROCK, AR 72114		H(a) Is this a group re	
	Appli tion pend	F Name and address of principal officer: MIKE MIEKS		for subordinates	? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: X 501(c)(3)	or 527	1	list. See instructions
		te: ► WWW.WINROCK.ORG	<u> </u>	H(c) Group exemptio	
	orm o	f organization: X Corporation Trust Association Other	L Year	of formation: 1984 N	M State of legal domicile: AR
F	_	Summary	OCK IN	TO NIA TO NIA T	TNCMTMIME
ė	1	Briefly describe the organization's mission or most significant activities: <u>WINR</u> FOR AGRICULTURAL DEVELOPMENT IS A RECOGNI			
Activities & Governance	2	Check this box if the organization discontinued its operations or dispose			
/err	3			3	20
ő	4	Number of independent voting members of the governing body (Part VI, line 1b)			19
∞	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			718
i <u>t</u> ië	6	Total number of volunteers (estimate if necessary)			130
ξį	7 a	` ************************************		7a	1,640.
Ă	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
		· · ·		Prior Year	Current Year
ø.	8	Contributions and grants (Part VIII, line 1h)		91,784,576.	87,296,495.
Revenue	9	Program service revenue (Part VIII, line 2g)		3,787,462.	4,843,698.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,314,927.	7,384,419.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	-404,179.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		96,886,965.	99,120,433.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		7,115,377.	8,270,890.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		49,066,236.	50,018,853.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.	0.
ж	. b	Total fundraising expenses (Part IX, column (D), line 25)	0.	25 222 221	22 762 266
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		35,889,921.	33,762,866.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		92,071,534.	92,052,609.
	19	Revenue less expenses. Subtract line 18 from line 12		4,815,431.	7,067,824.
Net Assets or				ginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		32,378,293.	132,106,340.
et A	21	Total liabilities (Part X, line 26)		60,530,228. 71,848,065.	49,361,784. 82,744,556.
P	22 art II	Net assets or fund balances. Subtract line 21 from line 20		71,040,003.	02,744,330.
		alties of perjury, I declare that I have examined this return, including accompanying schedule:	e and etatem	ante and to the heet of my	/ knowledge and helief it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of wl			r knowledge and belief, it is
truo	, 00110	and complete. Books and of property (other than officer) to be odd on an information of the	mon proparor	nao any knowleago.	
Sig	n	Signature of officer		Date	
Her		MIKE MYERS, SENIOR VP - CFO AND TREASU	JRER		
	_	Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	d	MICHELLE MANN MICHELLE MANN	1	.0/27/22 if self-employ	P01064483
Pre	parer	Firm's name HOGANTAYLOR, LLP			73-1413977
Use	Only	Firm's address 11300 CANTRELL ROAD, SUITE 301			
		LITTLE ROCK, AR 72212		Phone no. 50	1-227-5800
Ma	y the I	RS discuss this return with the preparer shown above? See instructions			X Yes No

Form 990 (2021)

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Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	WINROCK'S MISSION IS TO EMPOWER THE DISADVANTAGED, INCREASE ECONOMIC
	OPPORTUNITY AND SUSTAIN NATURAL RESOURCES.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
2	'
3	
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by 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.
4a	$(\text{Code: } \underline{\hspace{1cm}}) \text{ (Expenses \$} \underline{\hspace{1cm}} 13,636,737. \text{ including grants of \$} \underline{\hspace{1cm}} 811,466. \text{) (Revenue \$} \underline{\hspace{1cm}} 4,843,698. \text{)}$
	ENVIRONMENT AND ENERGY: SUSTAINABLE ECONOMIC GROWTH DEPENDS ON A
	HEALTHY PLANET. WINROCK USES SCIENCE-DRIVEN, EVIDENCE-BASED SOLUTIONS
	TO ADDRESS THE MYRIAD WAYS HUMANS USE NATURAL RESOURCES. FROM
	NATURE-BASED SOLUTIONS TO CLIMATE CHANGE, TO COMMUNITY-BASED NATURAL
	RESOURCE MANAGEMENT, TO MARKET-DRIVEN INNOVATIONS IN CLEAN ENERGY AND
	PROMOTING ECOSYSTEM SERVICES, WINROCK DEVELOPS SOLUTIONS TO PROTECT
	NATURAL RESOURCES, ADDRESS CLIMATE CHANGE AND PROMOTE LONG-TERM
	ECONOMIC WELL-BEING AND HEALTH. OUR APPROACH EMPOWERS LOCAL
	COMMUNITIES, GOVERNMENTS, CIVIL SOCIETY AND THE PRIVATE SECTOR,
	PROVIDING THEM WITH THE INFORMATION NEEDED TO DEVELOP SUSTAINABLE,
	WIN-WIN SOLUTIONS.
4b	(Code:) (Expenses \$ 34,735,873. including grants of \$ 1,978,725.) (Revenue \$
710	AGRICULTURE, RESILIENCE AND WATER (ARW): ARW'S PURPOSE IS TO CATALYZE
	TRANSFORMATIONAL AND SUSTAINABLE DEVELOPMENT GAINS FOR THE COMMUNITIES
	THAT WE SERVE. ARW MANAGES AWARDS FOR A VARIETY OF CLIENTS, INCLUDING
	USAID AND USDA IN THE AREAS OF FOOD SECURITY, MARKET SYSTEMS, WATER
	SYSTEMS, AND RESILIENCE. ARW PARTNERS WITH COMMUNITIES AROUND THE
	WORLD TO ADDRESS SOME OF THE ROOT CAUSES OF FOOD, WATER AND ECONOMIC
	INSECURITY BY CO-CREATING INNOVATIVE SOLUTIONS WITH FARMERS,
	COMMUNITIES, AGRICULTURAL BUSINESSES, COOPERATIVES AND OTHER
	STAKEHOLDERS ACROSS AFRICA, ASIA, AND LATIN AMERICA.
	WALLACE CENTED THE WALLACE CENTED DELICE TOCHTUD DELICE DECEL AND
	WALLACE CENTER: THE WALLACE CENTER BRINGS TOGETHER DIVERSE PEOPLE AND
	IDEAS TO CO-CREATE SOLUTIONS THAT BUILD HEALTHY FARMS, EQUITABLE
4c	(Code:) (Expenses \$ 24,054,758. including grants of \$ 4,216,247.) (Revenue \$)
	HUMAN RIGHTS, EDUCATION, AND EMPOWERMENT GROUP (HREE): HREE DELIVERS
	INTERNATIONAL DEVELOPMENT SOLUTIONS IN THE FOLLOWING TECHNICAL AREAS:
	COUNTERING TRAFFICKING IN PERSONS, SAFE MIGRATION, CHILD LABOR, GENDER
	EQUALITY AND SOCIAL INCLUSION, EDUCATION AND YOUTH.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 5,080,389 • including grants of \$ 1,264,452 •) (Revenue \$)
4e	Total program service expenses ► 77,507,757.
	Form 990 (2021)

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WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Form 990 (2021)

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		7.7	
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
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_		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		7.7	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
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,		7.7	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		37	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		х
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	Х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Λ_	x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Λ	_
D	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			
		14b	Х	
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	21	
15		15	Х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	21	
10		16		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
''		17		х
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		
10		18		х
19	1c and 8a? If "Yes," complete Schedule G, Part II	10		<u> </u>
19	•	19		х
20-2	complete Schedule G, Part III	20a		X
		20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
- '	domestic government on Part IX. column (A), line 1? If "Ves " complete Schedule I, Parts I and II	21	х	

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Form **990** (2021)

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Form 990 (2021)

Part IV Checklist of Required Schedules (continued)

			Yes	No
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	<u> </u>	
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			1
	Part V, line 1	34	X	L
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		37	
Pa	Note: All Form 990 filers are required to complete Schedule 0	38	X	Щ
Par				77
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
_			Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 204			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	X	Щ_

132004 12-09-21

Form **990** (2021)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
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 265			
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	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country ► SEE SCHEDULE O			
	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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	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 solicit			
	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 gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file 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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	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 11a			
a b	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against			
D	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	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.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

2021.04030 WINROCK INTERNATIONAL INS WIN021_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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
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 20			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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		<u> </u>
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_ <u>X</u> _	<u> </u>
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		37	
	on Schedule O how this was done	12c	X	<u> </u>
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		37	
	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b	X	
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		-25
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶AR, CA, FL, GA, HI, IL, KS, KY, ME	MD,	MA	MI
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s			
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	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			
	CHARLES MICHAEL MYERS - (501)280-3000			
	204 EAST 4TH STREET, NORTH LITTLE ROCK, AR 72114			
132006	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2021)

Form 990 (2021)

FOR AGRICULTURAL DEVELOPMENT

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Posi		l than d	nne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	son is	s both	an an	compensation	compensation	amount of
	week		cer an	id a di	recto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	or di	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the
	organizations	ruste	l trus		ee	ubeu		1099-NEC)	1099-1450)	organization and related
	below	dual t	ntio na	_	nploy	st cor	Ji.	1000 (100)		organizations
	line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			9
(1) RODNEY FERGUSON	40.00									
PRESIDENT AND CEO	1.00	Х		Х				620,356.	0.	52,053
(2) JOYJIT DEB ROY	40.00									-
EXECUTIVE VP	2.00			Х				346,685.	0.	43,193
(3) MIKE MYERS	40.00									
SENIOR VP - CFO & TREASURE	1.00			Х	L	L	L	319,814.	0.	50,145
(4) BRAULIO OLIVEIRA	40.00									
CHIEF INFORMATION OFFICER						Х		297,719.	0.	47,258
(5) PATRICIA J. MCCALL	40.00									
VP CORP AFFAIRS					Х			295,125.	0.	45,908
(6) MALIKA MAGAGULA	40.00									
VP AND COO					Х			301,472.	0.	35,399
(7) CHARLOTTE YOUNG	40.00									
VP GC AND CRCO	1.00				Х			288,658.	0.	47,231
(8) BRIAN BEAN	40.00									
CHIEF OF PARTY						X		285,393.	0.	39,378
(9) MARY GRADY	40.00									
CEO OF ERT						X		279,438.	0.	40,069
(10) AMANDA HILLIGAS	40.00									
ASSOCIATE VP						X		263,184.	0.	49,280
(11) ALEXIS ELLICOTT	40.00									
CHIEF OF PARTY						X		259,925.	0.	36,914
(12) EDNA CRUZ	40.00									
CHRO					Х			252,881.	0.	38,637
(13) ELISABETH WHITBECK	40.00									
BOARD SECRETARY				Х				150,974.	0.	21,491
(14) PALOMA ADAMS ALLEN	1.00									
BOARD MEMBER		Х						0.	0.	0
(15) JERRY B. ADAMS	1.00									
BOARD MEMBER		Х						0.	0.	0
(16) SAMAR S. ALI	1.00									
BOARD MEMBER		Х						0.	0.	0
(17) JASON BORDOFF	1.00									
BOARD MEMBER		Х	l					0.	0.	0

Form **990** (2021)

71-0603560 Page **8**

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hi	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(do	not c	Pos heck i	itior	l than d	nne	Reportable	Reportable		Es	stimate	ed :
	hours per	box	, unle	ss per	rson i	s both	an	compensation	compensation	۱	an	nount (of
	week	_	cer ar	nd a di	irecto	r/trus	tee)	from	from related			other	
	(list any	director						the	organizations			pensa	
	hours for related	or di	96			ated		organization	(W-2/1099-MIS	C/		om the	
	organizations	ustee	trust		e e	Suedic		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		•	anizati d relate	
	below	lual tr	tional		ploye	st con	_	1099-1120)				anizatio	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme				orga	arnzan	7113
(18) DAVID BRAMAN	1.00												
BOARD MEMBER		Х						0.		0.			0.
(19) WILLIAM BUMPERS	1.00												
BOARD MEMBER		Х						0.		0.			0.
(20) EARL DEVANEY	1.00												
BOARD MEMBER		Х						0.		0.			0.
(21) THOMAS GREEN	1.00												_
BOARD MEMBER	1 00	Х						0.		0.			0.
(22) JUDE KEARNEY	1.00	х		v						ا ۸			0
CHAIR (23) RICHARD LEACH	1.00	Λ		Х				0.		0.			0.
BOARD MEMBER	1.00	Х						0.		0.			0.
(24) NANETTE MEDVED-PO	1.00	25						1		•			<u> </u>
BOARD MEMBER	1,00	Х						0.		0.			0.
(25) LISA MILTON	1.00												
BOARD MEMBER		Х						0.		0.			0.
(26) JOHN M. NEES	1.00												
BOARD MEMBER		X						0.		0.			0.
1b Subtotal								3,961,624.		0.	54	6,9	
c Total from continuation sheets to Part VI								0.		0.	Г 1	<u> </u>	0.
d Total (add lines 1b and 1c)								3,961,624.		0.	54	6,9	26.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed ab	ove) wh	o re	eceived more than \$100,	000 of reportable				95
compensation from the organization												Yes	No.
3 Did the organization list any former officer,	director trust	ا مد	(A)/ (mnl	OVE	e or	hic	thest compensated emp	lovee on	Г		103	140
line 1a? If "Yes," complete Schedule J for s	Ť		•	•	•		_		•	- 1	3		Х
4 For any individual listed on line 1a, is the su										···			
and related organizations greater than \$150										[4	Х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	plete Schedule	e J f	or su	ıch r	oers	on .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	•	•							•	ensati	ion fro	om	
the organization. Report compensation for	ne calendar ye	ear e	endir	ng w	ith c	or wi	thir		ear.		,,	•	
(A) Name and business	address							(B) Description of s	ervices	Co)) edmoe	;) nsatior	n
CECC DARK TWO LLC								ADI.TNOTON W			p o		-

PO BOX 644762, PITTSBURGH, PA 15264 OFFICE SPACE 1,565,041. APX, INC, 2150 NORTH FIRST ST STE 200, SAN MANAGEMENT SERVICES JOSE, CA 95131 OF ACR 811,308. WIPFLI LLP ERP IMPLEMENTATION/ <u>11 SCOTT ST, WAUSAU, WI 54402</u> CONSULTATION 219,975. ROCKEFELLER CAPITAL MANAGEMENT, 900 17TH INVESTMENT ST NW STE 603, WASHINGTON, DC 20006 MANAGEMENT SERVICES 168,545. DELTEK, INC 2291 WOOD OAK DRIVE, HERNDON, VA 20171 ERP IMPLEMENTATION 166,546.

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2021)

132008 12-09-21

Form 990

Form 990 FOR AGRIC	CULTURAL	, D)EV	EL	iOP	ME	NT 71-0603560				
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, aı	nd F	ligh	est (Compensated Employe	ees (continued)		
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average				ition	1		Reportable	Reportable	Estimated	
	hours	(cl			that		ly)	compensation	compensation	amount of	
	per week					ıyee		from the	from related organizations	other compensation	
	(list any	Individual trustee or director				Highest compensated employee		organization	(W-2/1099-MISC)	from the	
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related	
	organizations	rustee	Institutional trustee		/ee	m pen				organizations	
	below	dualt	ution	<u></u>	Key employee	est co	er			organizatione	
	line)	Indivi	Instit	Officer	Key e	High	Former				
(27) TUAN NGUYEN	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(28) PETER O'NEILL	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(29) RUTH ONIANG'O	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(30) WILLIAM ROCKEFELLER	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(31) SUZANNE E. SISKEL	1.00										
VICE CHAIR		Х		Х				0.	0.	0.	
(32) SAUD SIDDIQUE	1.00								_	_	
BOARD MEMBER		Х						0.	0.	0.	
(33) JOHN TYSON	1.00									_	
BOARD MEMBER		Х						0.	0.	0.	
			_								
	+		\vdash								
		-									
			_								
		-									
			<u> </u>	_		_					
		l									
				<u> </u>		<u> </u>					
T. I. B. 11/11 0											
Total to Part VII, Section A, line 1c											

Form 990 (2021) FOR AGR
Part VIII Statement of Revenue

			Check if Schedule O contain	s a response (or note to any lin	e in this Part VIII			
			Check ii Concade o contain	3 a response (or riote to arry iiri	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
				1.1					30000013 3 12 3 14
nts	1		Federated campaigns						
Gra			Membership dues						
ts, An			Fundraising events						
ig i			Related organizations		75 010 402				
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contribution		75,010,483.				
er		f	All other contributions, gifts, grants,		10 006 010				
έŧ			similar amounts not included above		12,286,012.				
ont od (_	Noncash contributions included in lines 1a-		56,481.	05.006.405			
<u>0</u> <u>e</u>		h	Total. Add lines 1a-1f			87,296,495.			
					Business Code	4 040 500	4 040 500		
ce	2	а	CARBON SERVICE REGISTRY		541620	4,843,698.	4,843,698.		
e vi		b							
ı S.		С							
ran 3ev		d							
Program Service Revenue		е							
Δ.			All other program service revenu						
			Total. Add lines 2a-2f			4,843,698.			
	3		Investment income (including div						
			other similar amounts)			1,128,695.		1,640.	1127055.
	4		Income from investment of tax-e		-				
	5		Royalties						
			-	(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
	7	а		(i) Securities	(ii) Other				
				6,372,374.	5185153.				
		b	Less: cost or other basis						
ηne				1,142,573.	4159230.				
Revenue			()	5,229,801.	1025923.	6 055 504			6055504
æ			Net gain or (loss)		D	6,255,724.			6255724.
ther	8	а	Gross income from fundraising even						
ŏ			including \$						
			contributions reported on line 10	· I					
		_	Part IV, line 18	I					
			Less: direct expenses						
			Net income or (loss) from fundrai		·····				
	9	а	Gross income from gaming activ						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming		P				
	10	а	Gross sales of inventory, less ret	I					
			and allowances						
			Less: cost of goods sold						
		С	Net income or (loss) from sales of	τ inventory	Business Ord				
S			LOCG ON DOND DESERGANCE		Business Code 900001	404 170			404 170
Miscellaneous Revenue	11		LOSS ON BOND DEFEASANCE		300001	-404,179.			-404,179.
llan		b							
Sce		C	All alle and a						
Σ̈́			All other revenue			404 170			
		е	Total. Add lines 11a-11d			-404,179.	4 942 600	1 (40	6070600
	12		Total revenue. See instructions		<u></u>	99,120,433.	4,843,698.	1,640.	6978600.

FOR AGRICULTURAL DEVELOPMENT Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respor			(C)	L
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,954,591.	2,954,591.		
2	Grants and other assistance to domestic	2,001,001.	2,331,331.		
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
3	organizations, foreign governments, and foreign				
		5 316 299	5,316,299.		
4	individuals. See Part IV, lines 15 and 16	3,310,233.	3,310,233.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	2 010 022	570 177	2 330 545	
^	trustees, and key employees	2,910,022.	310,411.	2,339,545.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	10 000 107	26 110 E2E	6 764 610	
7	Other salaries and wages	44,003,13/.	36,118,525.	6,764,612.	
8	Pension plan accruals and contributions (include	2 404 470	1 706 200	700 100	
	section 401(k) and 403(b) employer contributions)	4,494,4/0.	1,786,308. 14,054.	708,162.	
9	Other employee benefits	22,145.	1 200 202		
10	Payroll taxes	1,709,079.	1,208,323.	500,756.	
11	Fees for services (nonemployees):				
а	Management	0.46 500	126 225	110 110	
b	Legal	246,730.		110,443.	
С	Accounting	311,901.	101,574.	210,327.	
d	Lobbying	8,400.		8,400.	
е	Professional fundraising services. See Part IV, line 17	212 221		242 224	
f	Investment management fees	213,894.		213,894.	
g	Other. (If line 11g amount exceeds 10% of line 25,	- 004 655	4 050 440	- 4- A44	
	column (A), amount, list line 11g expenses on Sch 0.)	5,024,657.	4,279,413.	745,244.	
12	Advertising and promotion	40,662.	28,417.	12,245.	
13	Office expenses	3,274,841.	2,216,128.	1,058,713.	
14	Information technology	108,459.	89,468.	18,991.	
15	Royalties				
16	Occupancy	2,803,077.	2,704,198.	98,879.	
17	Travel	1,566,112.	1,505,176.	60,936.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	577,748.	546,292.	31,456.	
20	Interest	132,042.		132,042.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	623,433.		623,433.	
23	Insurance	367,212.	165,357.	201,855.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	SUBCONTRACTS	12,405,538.	12,405,538.		
b	FELLOWSHIPS	1,996,833.	1,985,709.	11,124.	
c	ACR MANAGEMENT SERVICES	811,308.	811,308.	,	
d	VEHICLES AND EQUIPMENT	803,600.	803,600.		
	All other expenses	2,446,419.	1,760,715.	685,704.	
25	Total functional expenses. Add lines 1 through 24e	92,052,609.	77,507,757.	14,544,852.	0
26	Joint costs. Complete this line only if the organization	, ,	, ,	, , , , , , , , , ,	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Part X Balance Sheet

I al		Check if Schedule O contains a response or note to any line in this Part X			
		2 22add a contained a coponico of note to dry into in this fall A	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,023,239.	1	4,564,848.
	2	Savings and temporary cash investments	23,345,419.	2	24,736,343.
	3	Pledges and grants receivable, net	2,230,061.	3	993,611.
	4	Accounts receivable, net	13,120,923.	4	11,265,828.
	5	Loans and other receivables from any current or former officer, director,			
	•	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
	•	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
"	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	2,995,839.	9	4,010,417.
	1	Land, buildings, and equipment: cost or other	, ,		, ,
		basis. Complete Part VI of Schedule D 10a 11,171,396.			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 11,171,396. 10b 2,725,012.	9,064,382.	10c	8,446,384.
	11	Investments - publicly traded securities	55,605,949.	11	62,764,394.
	12	Investments - other securities. See Part IV, line 11	2,537,795.	12	1,838,061.
	13	Investments - program-related. See Part IV, line 11	, ,	13	, ,
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	16,454,686.	15	13,486,454.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	132,378,293.	16	132,106,340.
	17	Accounts payable and accrued expenses	10,645,585.	17	10,161,220.
	18	Grants payable		18	
	19	Deferred revenue	20,763,013.	19	18,327,994.
	20	Tax-exempt bond liabilities	3,551,608.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abil		controlled entity or family member of any of these persons		22	
Ĩ	23	Secured mortgages and notes payable to unrelated third parties	2,266,912.	23	1,349,135.
	24	Unsecured notes and loans payable to unrelated third parties	2,800,000.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	20,503,110.	25	
	26	Total liabilities. Add lines 17 through 25	60,530,228.	26	49,361,784.
		Organizations that follow FASB ASC 958, check here X			
ces		and complete lines 27, 28, 32, and 33.			
a	27	Net assets without donor restrictions	65,921,855.	27	76,448,681.
Ва	28	Net assets with donor restrictions	5,926,210.	28	6,295,875.
ΡĽ		Organizations that do not follow FASB ASC 958, check here			
Ē		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
t As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Š	32	Total net assets or fund balances	71,848,065.	32	82,744,556.
	33	Total liabilities and net assets/fund balances	132,378,293.	33	132,106,340.

Form **990** (2021)

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Form 990 (2021) FOR AGRICULTURAL DEVELOPMENT 71-0

Part XI Reconciliation of Net Assets

Га	neconclination of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,12</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,05		
3	Revenue less expenses. Subtract line 2 from line 1	3	7	,06	7,8:	24.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u>71</u>	,84	8,0	<u>65.</u>
5	Net unrealized gains (losses) on investments	5	2	<u>,17</u>	2,04	<u>48.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	1	,65	6,6	19.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	82	,74	4,5	56.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
					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 on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	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 separate	basis,				
	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 the	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 on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit				
	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 required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	Х	
				Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

WINROCK INTERNATIONAL INSTITUTE

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

FOR AGRICULTURAL DEVELOPMENT 71-0603560 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III

	functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.		
f	Enter the number of supported of	organizations					
g	Provide the following information	about the supporte	d organization(s).				
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
Total							
ΙЦΔ	For Panerwork Reduction Act N	otice see the Instr	uctions for Form 990 o	990-F7	132021 01	04.22 Sche	dule A (Form 990) 2021

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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	94772810.	90941913.	87881376.	91924875.	87296495.	452817469
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	94772810.	90941913.	87881376.	91924875.	87296495.	452817469
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)						
	Public support. Subtract line 5 from line 4.						452817469
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	94772810.	90941913.	<u>87881376.</u>	91924875.	<u>87296495.</u>	452817469
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1380493.	985,254.	1249229.	113,528.	1128695.	4857199.
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.)	3,549.					3,549.
11	Total support. Add lines 7 through 10						457678217
	Gross receipts from related activities,	•	,			12	
13	First 5 years. If the Form 990 is for the	-			•		. —
800	organization, check this box and sto	p here Dor					>
	ction C. Computation of Public			(6)			98.94 %
	Public support percentage for 2021 (14	0.0
	Public support percentage from 2020					15	
ıba	33 1/3% support test - 2021. If the						
L	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the	•		•		•	
17-	and stop here. The organization qua 10% -facts-and-circumstances test						
1/a		ū					•
	and if the organization meets the fact					_	▶ □
L	meets the facts-and-circumstances to	•	•				
O	10% -facts-and-circumstances test	_					1070 UI
	more, and if the organization meets the				-		ightharpoonup
19	organization meets the facts-and-circ Private foundation. If the organization		-				
10	i invate roundation. Il the organization	on did flot offect a	DUA ULI III IE 13, 10	a, 100, 11a, 01 1/1	o, oneon una bux a	na see msnuchon	·

Schedule A (Form 990) 2021

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	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						
k	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	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6		, ,	` '		1	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
k	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 on 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 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organization	on,
	check this box and stop here	-					
Se	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2021 (I			column (f))		15	%
	Public support percentage from 2020					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)21 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2021. If the						
-	more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2020. If the	=	-	•			and
-	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						>

132023 01-04-22

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on 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 on line 9a) 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 on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b 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		
	0-		
	3с		
	4a		
	4b		
	4c		
	5a		
	Eh		
	5b 5c		
	6		
	7		
	8		
	9a		
	9b		
	0.0		
	9с		
	10a		
	10b		
lule	A (Forn	n 990)	2021

132024 01-04-21

1 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c blook, the governing body of a supported organization? b A family member of a person described on line 11a above? c A 39% controlled entity of a person described on line 11a above? 1 Did the governing Dody, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or ect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If \(\text{in the III} \) is trusteed at a limes during the tax year? If \(\text{in the III} \) is trusteed at a limes during the tax year? If \(\text{in the III} \) is trusteed at a limes during the tax year? If \(\text{in the III} \) is trusteed at a majority of the organization's officers, directors, or frustees are all times during the tax year? If \(\text{in the III} \) is trusteed at a majority of the organization have the power to regularly appoint or ect at least a majority of the organization's officers, directors, or frustees several subcrated arong the organization cycle than the supported organization several properties of the supported organization and the family department of the supported organization of the supported organization and the family organization and the family organization and the family organization and the family organization and the supported organization and the supported organization and the family organization and the supported organization and the organ	Par	t IV Supporting Organizations _(continued)			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11b alone, the governing body of a supported organization? b A Amily member of a person described on line 11a above? c A 59% controlled writty of a person described on line 11a above? c A 59% controlled writty of a person described on line 11a above? 1 Dot the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations officers, effectively operated supervised, and organization and what conditions or restrictions, if any applied to such powers during the fax year. 2 Did the organization operated or controlled the arganization statistics, if the organization have from the more than one supported organization operated organization other than the supported organization and what conditions or restrictions, if any, applied to such powers during the fax year. 2 Did the organization operated is one benefit of any supported organizations? If "Yes," explain in Part VI how describe the supporting organizations. 2 Did the organization operated prefer carried out the purposes of the supported organizations? If "Yes," explain in Part VI how control or management of the supporting Organizations. 1 Were a majority of the organization's directors or trustess during the tax year also a majority of the directors or trustees of each of the supporting Organizations. 1 Were any of the organization or supported organizations, by the last day of the fifth month of the organization by a written notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 980 that was most recently filed as of the date of notification, on the earth of previously provided? 1 Did the organization by a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 980				Yes	No
1 Le blow, the governing body of a supported organization? b A family member of a person described on line 11 a on 11b above? If "Yes" to line 11a, 11b, or 11c, provide c A 35% controlled entity of a person described on line 11 a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to require yapoint or eded at least a majority of the organizations of one or more supported organizations have the power to require yapoint or eded at least a majority of the organizations of one or more supported organizations have the power to require the provisions of the supported organizations of the control of the supported organizations of the supported organization organizations of the supported organization or under than the supported organization organizations of the supported organization organizations of the supported organization or such organizations organizations organizations organizations organizations organizations organizations	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A Amily member of a person described on line 11 a above? A AS% contilled entity of a person described on line 11 a of 110 above? A AS% contilled entity of a person described on line 111 a of 110 above? Bestion B. Type I Supporting Organizations Did the growning body, members of the governing body, officers acting in their official capacity, or membership of one or not supported organization that the property of the organization that the organization of the organizations of the organizations. 1 Were a majority of the organizations of erectors of trustees during the tax year also a majority of the directors or trustees of each of the organizations of very organizations. 1 Were an anjority of the organizations of erectors or frustees during the tax year also a majority of the directors or trustees of each of the organization was vested in the same persons that controlled or munaged that according organization or supported organizations or the organization organization organizations of the organization organization organizati	а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
b A Amily member of a person described on line 11 a above? A AS% contilled entity of a person described on line 11 a of 110 above? A AS% contilled entity of a person described on line 111 a of 110 above? Bestion B. Type I Supporting Organizations Did the growning body, members of the governing body, officers acting in their official capacity, or membership of one or not supported organization that the property of the organization that the organization of the organizations of the organizations. 1 Were a majority of the organizations of erectors of trustees during the tax year also a majority of the directors or trustees of each of the organizations of very organizations. 1 Were an anjority of the organizations of erectors or frustees during the tax year also a majority of the directors or trustees of each of the organization was vested in the same persons that controlled or munaged that according organization or supported organizations or the organization organization organizations of the organization organization organizati		11c below, the governing body of a supported organization?	11a		
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	b	,			
	-	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2021 Part V Type III Non

Ра	rt v Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ıst complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 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 0.035.	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 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see

Schedule A (Form 990) 2021

instructions).

		NATIONAL INSTIT		7	1 0602560
Sche		RAL DEVELOPMENT	mi-ations .		1-0603560 Page 7
		aj(s) Supporting Orga	nizations (continu	<u>ied)</u>	2 11
	on D - Distributions				Current Year
1_	Amounts paid to supported organizations to accomplish exer	<u> </u>		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
_	Administrative expenses paid to accomplish exempt purpose	<u> </u>	3		
4_	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
<u>6</u>	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
<u>10</u>	Line 8 amount divided by line 9 amount	(2)	/···	10	/····\
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	ıs	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
ī	Carryover from 2016 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				

Schedule A (Form 990) 2021

and 4c. 8 Breakdown of line 7: a Excess from 2017 **b** Excess from 2018 c Excess from 2019 d Excess from 2020 e Excess from 2021

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C,
	line 1: Part IV. Section D. lines 2 and 3: Part IV. Section E. lines 1c. 2a. 2b. 3a. and 3b: Part V. line 1: Part V. Section B. line 1e: Part V.
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	(See instructions.)
-	

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number

71-0603560

Organization type (check one):							
Filers of	:	Section:					
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	nly a section 501(c)(7	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
	property) from any	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.					
	contributor, during literary, or educatio	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
answer "	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).					

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Name of organization
WINROCK INTERNATIONAL INSTITUTE
FOR AGRICULTURAL DEVELOPMENT

Employer identification number

71-0603560

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		\$ 53,066,806.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 9,632,770.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 3,288,674.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 1,963,341.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$2,839,989.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
WINROCK INTERNATIONAL INSTITUTE
FOR AGRICULTURAL DEVELOPMENT

Employer identification number

71-0603560

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

Schedule B (Form 990) (2021) Name of organization **Employer identification number** WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT 71-0603560 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(b) Purpose of gift (c) Use of gift (d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from

Part I

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

2021

2021

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on 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," on 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," on 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

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

•	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
Nan	ne of organization WINROCK	INTERNATIONAL I	NSTITUTE	Emp	oloyer identification number
		ICULTURAL DEVELO			71-0603560
Pa	art I-A Complete if the org	janization is exempt und	er section 501(c) o	or is a section 527 o	rganization.
2 3	Provide a description of the organize Political campaign activity expendite Volunteer hours for political campainant I-B Complete if the organize Provided P	ures		>	\$
	·	·		<u> </u>	Φ
1	Enter the amount of any excise tax Enter the amount of any excise tax	incurred by the organization und	der section 4955		ֆ
	If the organization incurred a section				
	a Was a correction made?				
	o If "Yes," describe in Part IV.				res NO
		janization is exempt und	er section 501(c),	except section 501(c)(3).
2	Enter the amount directly expended Enter the amount of the filing organ exempt function activities	by the filing organization for se ization's funds contributed to ot	ction 527 exempt functi	ion activities ction 527	\$
3	Total exempt function expenditures		,		
	line 17b				
	Did the filing organization file Form				
5	Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiz a separate political orga	ation's funds. Also enter th inization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

MITHEOCI		T ()147111	T1401110	-
FOR AGR	TCULTURAL	DEVEL	OPMENT	

Part II-A Complete if the org		empt under section			ction under
section 501(h)).	Para balanca da an	- fell - k - al anno ma (ann al l'ak '	- Dark IV and a self-self-self-self-self-self-self-self-		
		affiliated group (and list in	n Part IV each aπiliated	group member's name	e, address, EIN,
expenses, and share	•	• ,	oviciono annh		
Limi	ts on Lobbying Ex	A and "limited control" properties penditures nounts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinio	n (grassroots lobbying)			
b Total lobbying expenditures to influ	uence a legislative b	oody (direct lobbying)		9,708.	
c Total lobbying expenditures (add li				9,708.	
d Other exempt purpose expenditure				92,042,901.	
e Total exempt purpose expenditure				92,052,609.	
f Lobbying nontaxable amount. Enter				1,000,000.	
If the amount on line 1e, column (a) o		lobbying nontaxable am			
Not over \$500,000		of the amount on line 1e			
Over \$500,000 but not over \$1,000		0,000 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		6,000 plus 10% of the exc	·		
Over \$1,500,000 but not over \$17,		5,000 plus 5% of the exce			
Over \$17,000,000	,	00,000.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
σ. σ. φ ,σσσ,σσσ					
g Grassroots nontaxable amount (en	250,000.				
h Subtract line 1g from line 1a. If zero or less, enter -0-				0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than ze					
reporting section 4911 tax for this					Yes No
		Averaging Period Under		_	
(Some organizations the	hat made a section	n 501(h) election do not parate instructions for li	have to complete all o	of the five columns be	low.
	<u>-</u>				
	Lobbying Ex	penditures During 4-Ye	ar Averaging Period	Ī	
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount			1,000,000.	1,000,000.	2,000,000.
b Lobbying ceiling amount					2 000 000
(150% of line 2a, column(e))					3,000,000.
c Total lobbying expenditures			8,400.	9,708.	18,108.
d Grassroots nontaxable amount			250,000.	250,000.	500,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					750,000.
			1	1	

Schedule C (Form 990) 2021

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 on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k)
of the lobbying activity.	Yes No		Amount	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5)	, or se	ction	
			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 campaign activity expenditures from the		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 "lanswered "Yes."	No" OR (k) Part		3, is
Dues, assessments and similar amounts from members		. 1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ıİ			
a Current year		2a		
b Carryover from last year		. 2b		
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	ss			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol	itical			
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 li instructions); and Part II-B, line 1. Also, complete this part for any additional information.	st); Part II-A	, lines 1 a	and 2 (See	
PART II-A, LINE 1				
COMPRISED OF PAYMENTS TO (I) ARKANSAS STATE CHAMBER OF	COMME	RCE L	ABELED	AS
LOBBYING EXPENSE, (II) US GLOBAL LEADERSHIP CAMPAIGN MI	EMBERSI	HIP P	ARTIAL	LΥ
LABELED AS LOBBYING EXPENSE AND (III) LABOR COSTS CHARG	ED BY	INTE	RNAL	
RESOURCES				

Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

WINROCK INTERNATIONAL INSTITUTE Name of the organization

Employer identification number 71-0603560

	FOR AGRICULTURAL DEVELOPMENT			71-0603560		
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fun	ds or Accou	Ints. Complete if the		
	organization answered "Yes" on Form 990, Part IV, lin	e 6.		·		
		(a) Donor advised funds	(b) Fi	unds and other accounts		
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)			_		
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor a	dvised funds			
3	are the organization's property, subject to the organization's	•		Yes No		
6				Les Live		
6	Did the organization inform all grantees, donors, and donor a for charitable purposes and not for the benefit of the donor o					
		, , , , ,	Ü	□ Vaa □ Na		
Par		nanination are usual IVan I as Farm O				
			90, Part IV, line	<i>1</i> .		
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (for example, recrea	· —		ly important land area		
	Protection of natural habitat	Preservation	n of a certified	nistoric structure		
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the fo	orm of a conser			
	day of the tax year.			Held at the End of the Tax Year		
а			2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic stru	2c				
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic str	ucture			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, release	eased, extinguished, or terminated by	the organization	n 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,	handling of violations, and enforcing	conservation ea	sements during the year		
	>					
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conse	ervation easeme	ents during the year		
	> \$					
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section	70(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?			Yes No		
9	In Part XIII, describe how the organization reports conservation			and		
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial sta	ements that de	scribes the		
	organization's accounting for conservation easements.					
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Simil	ar Assets.		
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue stateme	nt and balance	sheet works		
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research	n furtherance o	f public		
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these	tems.	•		
b	If the organization elected, as permitted under FASB ASC 95			et works of		
	art, historical treasures, or other similar assets held for public					
	provide the following amounts relating to these items:	,,				
	(i) Revenue included on Form 990, Part VIII, line 1		•	\$		
				\$		
2	If the organization received or held works of art, historical trea		ncial gain, provi	₩		
_	the following amounts required to be reported under FASB A		ioiai gairi, provi	4 5		
_			_	\$		
a	Revenue included on Form 990, Part VIII, line 1			\$ \$		
	Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions		P	Schedule D (Form 990) 2021		
	TOTA APERWORK MEGACINOTICE, SEE THE INSTRUCTIONS	101 01111 2201		JULIEUUIE D (FULIII 330) 202 I		

FOR AGRICULTURAL DEVELOPMENT

	t III Organizations Maintaining Co	ollections of Art	Historical Tre	asures, or	Othe	r Simi	lar Asset	s (contir	ued)	age –
3	Using the organization's acquisition, accession							,		
	collection items (check all that apply):									
а	Public exhibition	d	Loan or excl	hange progra	m					
b	Scholarly research e Other									
С	c Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5	During the year, did the organization solicit or	receive donations of	art, historical treas	sures, or othe	r similar	assets				
	to be sold to raise funds rather than to be ma							Yes		No
Pai	t IV Escrow and Custodial Arrang							line 9, or		
	reported an amount on Form 990, Par		· ·							
1a	Is the organization an agent, trustee, custodia	an or other intermedia	ary for contributions	or other ass	ets not	include	d			
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII a									
		·	•					Amoun	t	
С	Beginning balance					10				
	Additions during the year						d			
е	Distributions during the year						e			
f	Ending balance									
2a	Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.							_]
Pai						10.				
	·	(a) Current year	(b) Prior year	(c) Two year			ee years back	(e) Four	years	back
1a	Beginning of year balance	56,863,222.	52,275,309.	45,911	,693.	51	,686,511.	47	510,	280.
b	Contributions	, ,		,						
c	Net investment earnings, gains, and losses	8,168,658.	6,817,891.	8,547	,890.	- 3	,626,657.	6	624,	221.
d	Grants or scholarships	, ,	, ,	,	,		<u>, , , , , , , , , , , , , , , , , , , </u>			
	Other expenditures for facilities									
_	and programs	2,037,160.	2,229,978.	2,184	,274.	2	,148,161.	2	447.	990.
f	Administrative expenses	, ,	, ,	,			· · ·	<u> </u>		
g g	End of year balance	62,994,720.	56,863,222.	52,275	,309.	45	,911,693.	51	686,	511.
2	Provide the estimated percentage of the curre				, ,		, ,	1		
a	Board designated or quasi-endowment	100	%	, riola do.						
b	Permanent endowment	%	_/*							
·	The percentages on lines 2a, 2b, and 2c shou									
За	Are there endowment funds not in the posses	•	ion that are held an	nd administer	ed for th	ne organ	nization			
-	by:	olori or the organizat	ion that are more an	a darriiriiotore	5 4 101 41	io organ	ii.Ediloii		Yes	No
	(i) Unrelated organizations							3a(i)	Х	
	(ii) Related organizations							3a(ii)		Х
h	If "Yes" on line 3a(ii), are the related organization	tions listed as require	d on Schedule R?							
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipme		mont fanas.							
	Complete if the organization answered		Part IV. line 11a. S	ee Form 990.	Part X.	line 10				
	Description of property	(a) Cost or ot		T		ccumu		(d) Boo	k valu	
	bescription of property	basis (investm		I		preciati		(u) 200	· vaia	Ü
10	Land	,	,	5,773.	20	,	-	57	5 . 7	73.
b	Land Buildings			7,304.		725	132.	3,19		
C	Buildings			0,905.			670.	3,39		
d				3,156.			090.			66.
	Equipment Other			4,258.			120.	1,03		
	Add lines 1a through 1e (Column (d) must on					,		8.44		

Schedule D (Form 990) 2021

FOR AGRICULTURAL DEVELOPMENT

Part VII Investments - Other Securities. Complete if the organization answered "Yes"	on Form 990 Part IV line	a 11h 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-vear market value
(1) Financial derivatives	(-7	(0)	
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on 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-vear market value
(1)	(-7	(0)	
(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"	on Form 000 Part IV line	a 11d Soo Form 000 Part V line 15	
	Description	7 174. 000 1 0111 030, 1 art X, iii c 10.	(b) Book value
(1) RIGHT OF USE ASSET	Boompaon		13,486,454.
(2)			20,100,101
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)	>	13,486,454.
Part X Other Liabilities.	F 000 Dart IV line	. 11. a. 11. Car Farm 000 Bart V line 05	
Complete if the organization answered "Yes" 1. (a) Description of liability	on Form 990, Part IV, line	e TTe or TTf. See Form 990, Part X, line 25.	(b) Book value
			(b) book value
(1) Federal income taxes (2) LEASE LIABILITY			17,503,960.
(2) LEASE LIABILITY (3) DEFERRED COMPENSATION LIAB	3TT.TTV		1,357,145.
(4) MORTGAGE PAYABLE	<u> </u>		662,330.
(5)			552,550.
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)	>	19,523,435.

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

Schedule D (Form 990) 2021

FOR AGRICULTURAL DEVELOPMENT

Part	Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	а.	
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:	1 1	
а	Net unrealized gains (losses) on investments	2a	
	Donated services and use of facilities		
	Recoveries of prior year grants		
	Other (Describe in Part XIII.)	2d	
	Add lines 2a through 2d		
	Subtract line 2e from line 1		3
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		
5 Dod	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	onto With Evnances n	5
Pari	t XII Reconciliation of Expenses per Audited Financial Statem	-	er neturn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12		1.1
	Total expenses and losses per audited financial statements		1
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	Donated services and use of facilities	1	
	Prior year adjustments		
	Other losses		
	Other (Describe in Part XIII.)	•	- 0.
	Add lines 2a through 2d		
	Subtract line 2e from line 1		3
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	40	
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIII.) Add lines 4a and 4b		4c
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
Parl	t XIII Supplemental Information.		3
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	t IV_lines 1b and 2b: Part V_l	ine 4: Part X line 2: Part XI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad-		ino 4, 1 die X, ino 2, 1 die Xi,
111100 2	and its, and it are sail, into the and its state complete and part to provide any ad-	antional information.	
PAR	T V, LINE 4:		
	·		
WIN	ROCK HAS BOARD-DESIGNATED ENDOWMENT FUNDS	THAT ARE INCLU	JDED IN NET
ASS	ETS WITHOUT DONOR RESTRICTIONS. AS REQUIR	ED BY GAAP, NET	T ASSETS
ASS	OCIATED WITH ENDOWMENT FUNDS, INCLUDING F	UNDS DESIGNATEI	BY THE BOARD
TO :	FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AN	D REPORTED BASE	ED ON THE
EXI	STENCE OF DONOR-IMPOSED RESTRICTIONS.		
PAR	T X, LINE 2:		
WIN	ROCK IS EXEMPT FROM INCOME TAXES UNDER SE	CTION 501(C)(3)	OF THE
INT	ERNAL REVENUE CODE AND A SIMILAR PROVISIO	N OF STATE LAW,	EXCEPT FOR
TAX	ES ON UNRELATED BUSINESS INCOME. FOR THE	YEAR ENDED DECE	EMBER 31, 2021,
NIO .	PROVISION FOR INCOME TAXES WAS MADE AS W	INKOCK HAD MO M	JET STANTETCANT

132054 10-28-21

Schedule D (Form 990) 2021

UNRELATED	RIICTNECC	TNCOMF
UNKGIALGI	ככים און כטם	TINCOME

WINROCK FOLLOWS THE AUTHORITATIVE GUIDANCE RELATING TO ACCOUNTING FOR
UNCERTAINTY IN INCOME TAXES INCLUDED IN FASB ASC TOPIC 740, INCOME TAXES.
THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR
UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S CONSOLIDATED
FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT"
FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE
TAKEN IN A TAX RETURN. WINROCK PERFORMED AN EVALUATION OF UNCERTAINTY IN
INCOME TAXES FOR THE YEAR ENDED DECEMBER 31, 2021, AND DETERMINED THAT
THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED
FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.
AS OF DECEMBER 31, 2021, THERE WERE TAX RETURNS THAT REMAINED OPEN WITH
THE U.S. FEDERAL JURISDICTION OR THE VARIOUS STATES AND LOCAL
JURISDICTIONS IN WHICH WINROCK FILES TAX RETURNS, HOWEVER, THERE ARE
CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. IT IS WINROCK'S
POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO UNCERTAINTY IN
INCOME TAXES, IF ANY, IN INTEREST OR INCOME TAX EXPENSE. AS OF DECEMBER
31, 2021, WINROCK HAD NO ACCRUALS FOR INTEREST AND/OR PENALTIES.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number

71-0603560

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?

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.) (e) If activity listed in (d) (a) Region (f) Total (b) Number of (c) Number of (d) Activities conducted in the region employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND HUMAN RIGHTS, EDUCATION, THE CARIBBEAN PROGRAM SERVICES EMPOWERMENT 377,680. AGRICULTURE, RESILIENCE, & WATER, ENVIRONMENT AND ENERGY, HUMAN RIGHTS, EAST ASIA AND THE PROGRAM SERVICES EDUCATION & PACIFIC 14 141 6,712,051. AGRICULTURE, RESILIENCE, RUSSIA AND & WATER, HUMAN RIGHTS, EDUCATION, & EMPOWERMENT NEIGHBORING STATES 5 PROGRAM SERVICES 2,457,396. 44 AGRICULTURE, RESILIENCE, & WATER, ENVIRONMENT AND ENERGY, HUMAN RIGHTS, EDUCATION, & EMPOWERMENT SOUTH ASIA 11 216 PROGRAM SERVICES 13,865,514. AGRICULTURE, RESILIENCE, & WATER, ENVIRONMENT AND ENERGY, HUMAN RIGHTS,

<u> </u>				
3 a Subtotal	49	558		34,841,665
b Total from continuation				
sheets to Part I	0	0		0
c Totals (add lines 3a				
and Oh)	49	558		34 841 665

SEE PART V FOR COLUMN (E) DESCRIPTIONS

PROGRAM SERVICES

PROGRAM SERVICES

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

17

150

Schedule F (Form 990) 2021

11,315,619.

113,405.

132071 12-20-21

SUB-SAHARAN AFRICA

SOUTH AMERICA

EDUCATION, &

& EMPOWERMENT

ENVIRONMENT AND ENERGY, HUMAN RIGHTS, EDUCATION,

71-0603560

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)	
			SUBGRANTS IMPLEMENTED					
		SUB-SAHARAN	BASED ON FUNDER		WIRE, EFT			
		AFRICA	REQUIREMENTS		AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		SUB-SAHARAN	BASED ON FUNDER		WIRE, EFT			
		AFRICA	REQUIREMENTS		AND/OR CHECK	0.		
		ni kich	KIQOIKIMINIO	204,000.	IND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		SUB-SAHARAN	BASED ON FUNDER		WIRE, EFT			
		AFRICA	REQUIREMENTS		AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		SUB-SAHARAN	BASED ON FUNDER		WIRE, EFT			
		AFRICA	REQUIREMENTS	178,794.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			GUDGDANIEG TWDI EMENIED					
			SUBGRANTS IMPLEMENTED BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
		BOUTH ASIA	REQUIREMENTS	113,034.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
		PACIFIC	REQUIREMENTS		AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	100,238.	AND/OR CHECK	0.		

3 Enter total number of other organizations or entities .

SOUTH ASIA

Schedule F (Form 990)	FOR A	GRICULTURAL	DEVELOPMENT		71-06	03560		Page 2
Part II Continuation of	of 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)
			SUBGRANTS IMPLEMENTED BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	96,490.	AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	·	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED BASED ON FUNDER		WIRE, EFT			

REQUIREMENTS

69,000. AND/OR CHECK

0.

Schedule F (Form 990)		GRICULTURAL	DEVELOPMENT		71-06	03560		Page 2
			tions or Entities Outside the	United States.)	
1 (a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of grant	(e) Amount	(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)
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	67,734.	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	67,282.	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	66,898.	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	66,180.	WIRE, EFT AND/OR CHECK	0.		
		EAST ASIA AND THE	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	64,535.	WIRE, EFT AND/OR CHECK	0.		
		RUSSIA AND NEIGHBORING STATES	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	62,559.	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	62,251.	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	62,164.	WIRE, EFT AND/OR CHECK	0.		
		EAST ASIA AND THE PACIFIC	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	60,018.	WIRE, EFT AND/OR CHECK	0.		

Part II Continuation o		looiotanoo to organiza	tions or Entities Outside the					(i) Mothod of
(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)
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	55,868.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
		PACIFIC	REQUIREMENTS	55 228	AND/OR CHECK	0.		
		FACIFIC	REQUIREMENTS	33,220.	AND/OR CHECK	Ŭ.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	52,681.	AND/OR CHECK	0.		
			GUDGDANIEG TWDI ENGNIED					
			SUBGRANTS IMPLEMENTED					
		GOLIMIT 3 GT 3	BASED ON FUNDER	E1 222	WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	31,333.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			GUDGDANIEG TWDI ENGNIED					
			SUBGRANTS IMPLEMENTED		MIDE EEM			
		SOUTH ASIA	BASED ON FUNDER	16 160	WIRE, EFT	0.		
		SOUTH ASIA	REQUIREMENTS	46,460.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	46,289.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	45,069.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	40 174	AND/OR CHECK	0.		

Schedule F (Form 990)		GRICULTURAL	ONAL INSTITUTE DEVELOPMENT		71-06	03560		Page 2
Part II Continuation o	f Grants and Other	Assistance to Organiza	tions 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)
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	36,718.	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		RUSSIA AND NEIGHBORING STATES	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		RUSSIA AND NEIGHBORING STATES	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	35,399.	WIRE, EFT AND/OR CHECK	0.		
		SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	35,338.	WIRE, EFT AND/OR CHECK	0.		
		EAST ASIA AND THE PACIFIC	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS		WIRE, EFT AND/OR CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	31,844.	WIRE, EFT AND/OR CHECK	0.		

WIRE, EFT

0.

30,920. AND/OR CHECK

SUBGRANTS IMPLEMENTED BASED ON FUNDER

REQUIREMENTS

SOUTH ASIA

Schedule F (Fo	orm 990)	FOR A	GRICULTURAL	DEVELOPMENT		Page 2			
Part II Co	ontinuation o	Grants and Other	Assistance to Organiza	tions 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)
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	30,072.	WIRE, EFT AND/OR CHECK	0.		
			EAST ASIA AND THE PACIFIC	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	28,696.	WIRE, EFT AND/OR CHECK	0.		
			RUSSIA AND NEIGHBORING STATES	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	25,587.	WIRE, EFT AND/OR CHECK	0.		
			RUSSIA AND NEIGHBORING STATES	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	24,801.	WIRE, EFT AND/OR CHECK	0.		
			RUSSIA AND NEIGHBORING STATES	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	24,711.	WIRE, EFT AND/OR CHECK	0.		
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	23,837.	WIRE, EFT AND/OR CHECK	0.		
			EAST ASIA AND THE	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	23,833.	WIRE, EFT AND/OR CHECK	0.		
			EAST ASIA AND THE PACIFIC	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	22,886.	WIRE, EFT AND/OR CHECK	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	22,454.	WIRE, EFT AND/OR CHECK	0.		

criedule F (Form 990)		CRICOLICIALE			<i></i>			raye
	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9)	<u> </u>
1	(b) IRS code section		(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, FM appraisal, other)
	, , ,		<u> </u>			assistance	assistance	appraisal, other)
			SUBGRANTS IMPLEMENTED					
		EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
		PACIFIC	REQUIREMENTS	21,474.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		CENTRAL AMERICA	BASED ON FUNDER		WIRE, EFT			
		AND THE CARIBBEAN	REQUIREMENTS	21,358.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	21,222.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	21,151.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	21,074.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	19,725.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	18,981.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	18,609.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	18,449.	AND/OR CHECK	0.		

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the I	United States.	(Schedule F (Form 9	90), Part II, line 1)	r ago z
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	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	18,422.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	17,792.	AND/OR CHECK	0.		+
		DIIGGIA AND	CIIDODANMO IMDI EMENMED					
			SUBGRANTS IMPLEMENTED		MIDE EEM			
		NEIGHBORING STATES	BASED ON FUNDER		WIRE, EFT	0.		
		STATES	REQUIREMENTS	16,574.	AND/OR CHECK	0.		+
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	16 358	AND/OR CHECK	0.		
			NDQ TRIBIDINI D	10,330.	ind) on enden	Ÿ.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	15 936.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
				,				
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	14,621.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	14,574.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	14,517.	AND/OR CHECK	0.		

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Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1	(b) IRS code section		(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	of non-cash	valuation (book, FM\
	and Env (ii applicable)		grant	or casir grant	Casif disbuiscificiti	assistance	assistance	appraisal, other)
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	14,197.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	14,071.	AND/OR CHECK	0.		
				,				
			SUBGRANTS IMPLEMENTED					
		EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
		PACIFIC	REQUIREMENTS	13.742.	AND/OR CHECK	0.		
			~	, -		-		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
				10,021.	interpretation of the second	•		
			SUBGRANTS IMPLEMENTED					
		EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
		PACIFIC	REQUIREMENTS		AND/OR CHECK	0.		
		FACIFIC	REQUIREMENTS	13,409.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA			AND/OR CHECK			
		SOUTH ASIA	REQUIREMENTS	13,100.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
					MIDE EEM			
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	12,825.	AND/OR CHECK	0.		
		Dugges ave	GUDGDANMG TYPE TYPE					
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT	_		
		STATES	REQUIREMENTS	12,799.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	12,635.	AND/OR CHECK	0.		

Schedule F (Form 990)	FOR A	GRICULTURAL	DEAEPORMENT		71-06	03560		Page 2
Part II Continuation	of Grants and Other	Assistance to Organiza	ntions or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	
1 (a) Name of organizatio	n (b) IRS code section and EIN (if applicable)	I ICI 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)
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	12,487.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	12 338	AND/OR CHECK	0.		
		DOUTH NOTH	REQUIREMENTS	12,330.	IND) OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	12,261.	AND/OR CHECK	0.		
			-	,				
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	12,240.	AND/OR CHECK	0.		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	12,228.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	12,212.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		GOLIMIT AGTA	BASED ON FUNDER	11 000	WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	11,999.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	11 862	AND/OR CHECK	0.		
				22,302.	7	•		1
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	11,028.	AND/OR CHECK	0.		
			•					

Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	r ago z
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	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	10,945.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT	_		
		SOUTH ASIA	REQUIREMENTS	10,712.	AND/OR CHECK	0.		<u> </u>
			SUBGRANTS IMPLEMENTED		L			
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	10,682.	AND/OR CHECK	0.		
		DUGGER AND	GUDGDANIIG TWDI EWENIED					
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER	10.606	WIRE, EFT			
		STATES	REQUIREMENTS	10,626.	AND/OR CHECK	0.		
			GUDGDANMG TWDI EMENMED					
			SUBGRANTS IMPLEMENTED					
		CENTRAL AMERICA	BASED ON FUNDER	10 015	WIRE, EFT			
		AND THE CARIBBEAN	REQUIREMENTS	10,015.	AND/OR CHECK	0.		
			GUDGDANMG TWDI EMENMED					
			SUBGRANTS IMPLEMENTED					
		GOTTELL 3.GT3	BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	9,938.	AND/OR CHECK	0.		
			CIIDCDANMC TMDI EMENMED					
			SUBGRANTS IMPLEMENTED		MIDE EEM			
		GOTTEL 3 GT3	BASED ON FUNDER	0.760	WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	9,769.	AND/OR CHECK	0.		<u> </u>
			SUBGRANTS IMPLEMENTED					
		GOLIMIT 3 GT 3	BASED ON FUNDER	0.456	WIRE, EFT	_		
		SOUTH ASIA	REQUIREMENTS	9,456.	AND/OR CHECK	0.		
			CIIDCDANMC TMDI EMENMED					
			SUBGRANTS IMPLEMENTED BASED ON FUNDER		WIRE, EFT			
		COUMH ACTA				0.		
		SOUTH ASIA	REQUIREMENTS	9,357.	AND/OR CHECK	ا ، ا		

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Part II	Continuation o	f Grants and Other /	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	_
1		(b) IRS code section		(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	''	non-cash	of non-cash	valuation (book, FMV
		and Life (if applicable)		grant	or casir grant	Casii disbuisement	assistance	assistance	appraisal, other)
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
				_	, -				
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			BOOTH ASTA	REQUIREMENTS	9,142.	AND/OR CHECK	0.		
				CIIDCDANMC TMDI EMENMED					
				SUBGRANTS IMPLEMENTED		L			
				BASED ON FUNDER		WIRE, EFT	_		
			SOUTH ASIA	REQUIREMENTS	9,069.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	8,884.	AND/OR CHECK	0.		
			RUSSIA AND	SUBGRANTS IMPLEMENTED					
			NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
			STATES	REQUIREMENTS		AND/OR CHECK	0.		
					,				
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
				NEL COLUMNIA DE LA COLUMNIA DEL COLUMNIA DE LA COLUMNIA DEL COLUMNIA DE LA COLUMN	0,003.	Inter on onder	, , , , , , , , , , , , , , , , , , ,		
				SUBGRANTS IMPLEMENTED					
						MIDE EEM			
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	8,768.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			EUROPE	REQUIREMENTS	8,746.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	8,517.	AND/OR CHECK	0.		

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

71-0603560

Page 2

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	r ago z
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	8,427.	AND/OR CHECK	0.		
		DUGGER AND	GUDGDANIIG TWDI EWENIED					
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS	8,400.	AND/OR CHECK	0.		
			CIIDCDANMC TMDI EMENMED					
			SUBGRANTS IMPLEMENTED		WIRE, EFT			
		SOUTH ASIA	BASED ON FUNDER		1	0.		
		SOUTH ASTA	REQUIREMENTS	8,307.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
		EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
		PACIFIC	REQUIREMENTS		AND/OR CHECK	0.		
		FACIFIC	REQUIREMENTS	0,300.	AND/OR CHECK	٠.		
			SUBGRANTS IMPLEMENTED					
		EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
		PACIFIC	REQUIREMENTS		AND/OR CHECK	0.		
		11101110	KII QO I KIII II KII	0,257.	inib) on emper			
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	8 268.	AND/OR CHECK	0.		
				7-11				
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	8,121.	AND/OR CHECK	0.		

Scriedule	e F (Form 990)	FOR A	GKICOLIOKAL	DE A RECT MRIVE		71-00	03300		Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.				
1 (a) Nan	ne 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	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV,
		and Im (mappingasis)		9	or such grains		assistance	assistance	appraisal, other)
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	8,108.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	8,108.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER	0.050	WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	8,053.	AND/OR CHECK	0.		
				CUDGDANMS TWO TWOMED					
				SUBGRANTS IMPLEMENTED					
			GOTTMIT 3.073	BASED ON FUNDER	7.050	WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	7,950.	AND/OR CHECK	0.		
				CUDCDANMC TWDI EMENMED					
			EAST ASIA AND THE	SUBGRANTS IMPLEMENTED BASED ON FUNDER		 WIRE, EFT			
			PACIFIC		7 042	AND/OR CHECK	0.		
			PACIFIC	REQUIREMENTS	7,943.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	7 936	AND/OR CHECK	0.		
			DOUTH ASTA	REQUIREMENTS	7,550.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	7 926	AND/OR CHECK	0.		
			DOUTH NOTA	KHQOIKHMINIB	7,520.	IND) OR CHECK	· · ·		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			poorn norn	MA TANDANIA	7,047.	Ind/or ciller	•		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	7 768	AND/OR CHECK	0.		
			POOTH ADIA	KTZOIKEMENIS	1,100.	LIND ON CUECK	ı		

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	r age z
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT	_		
		SOUTH ASIA	REQUIREMENTS	7,691.	AND/OR CHECK	0.		
			GUDGDANMG TWDI EWENMED					
			SUBGRANTS IMPLEMENTED		MIDE EEM			
		GOLIMIT 3 GT 3	BASED ON FUNDER	7 641	WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	7,641.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	7 546	AND/OR CHECK	0.		
		DOUTH ADIA	REQUIREMENTS	7,540.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			KI QUIRDINID	7,003.	inib) on emper	· · ·		
		RUSSIA AND	SUBGRANTS IMPLEMENTED					
		NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
		STATES	REQUIREMENTS		AND/OR CHECK	0.		
			~	, -		-		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	6,832.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	6,748.	AND/OR CHECK	0.		
			SUBGRANTS IMPLEMENTED					
			BASED ON FUNDER		WIRE, EFT			
		SOUTH ASIA	REQUIREMENTS	6,656.	AND/OR CHECK	0.		

Schedule F (Form 990)

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Part II Co	ontinuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1		(b) IRS code section		(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
(a) Name of c	organization		(c) Region				non-cash	of non-cash	valuation (book, FMV
		and EIN (if applicable)		grant	of cash grant	cash disbursement	assistance	assistance	appraisal, other)
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			DOUTH MOTH	KHQOIKHHHIID	0,033.	IND/OR CHECK	, ·		
				CUDODANIEC INDIEMENTED					
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	6,592.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	6,522.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
				2	, , === .				
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		MIDE EEM			
			GOTTELL 3.GT3			WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	6,334.	AND/OR CHECK	0.		
			RUSSIA AND	SUBGRANTS IMPLEMENTED					
			NEIGHBORING	BASED ON FUNDER		WIRE, EFT			
			STATES	REQUIREMENTS	6,233.	AND/OR CHECK	0.		
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS	5,982.	AND/OR CHECK	0.		
					,				
				SUBGRANTS IMPLEMENTED					
				BASED ON FUNDER		WIRE, EFT			
			SOUTH ASIA	REQUIREMENTS		AND/OR CHECK	0.		
			DOUTH ADIA	MACTIVEMENTS	3,300.	IND/OR CHECK	J .		+
				GUDGDANMG TWO EVENIES					
			L	SUBGRANTS IMPLEMENTED		l			
			EAST ASIA AND THE	BASED ON FUNDER		WIRE, EFT			
			PACIFIC	REQUIREMENTS	5,806.	AND/OR CHECK	0.		

Schedule F (F	Form 990)	FOR AGRICULTURAL DEVELOPMENT 71-0603560							Page 2		
		Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.						
1	f organization	(b) IRS code section and EIN (if applicable)	(c) Region	on (d) Purpose of 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)		
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,734.	WIRE, EFT AND/OR CHECK	0.				
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,497.	WIRE, EFT AND/OR CHECK	0.				
			EAST ASIA AND THE	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,453.	WIRE, EFT AND/OR CHECK	0.				
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,313.	WIRE, EFT AND/OR CHECK	0.				
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,306.	WIRE, EFT AND/OR CHECK	0.				
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,244.	WIRE, EFT AND/OR CHECK	0.				
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,214.	WIRE, EFT AND/OR CHECK	0.				
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,163.	WIRE, EFT AND/OR CHECK	0.				
			SOUTH ASIA	SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS	5,127.	WIRE, EFT AND/OR CHECK	0.				

Schedule F (Form 990) 2021

	e to Individuals Outside dditional space is needed		tes. Complete i	if the organization answered "Yes"	on Form 990, Part	: IV, line 16.	
(a) Type of grant or	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2021 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

WINROCK INTERNATIONAL IMPLEMENTS PROJECTS IN OVER 45 COUNTRIES WORLD-WIDE INCLUDING THE REGIONS OF SOUTH, SOUTHEAST AND CENTRAL ASIA, AFRICA, CENTRAL AND SOUTH AMERICA. WINROCK PROJECTS ARE FUNDED BY BOTH DOMESTIC AND INTERNATIONAL FUNDERS, WITH OVER 80% OF FUNDING PROVIDED BY THE U.S. GOVERNMENT DURING 2021. WHEN AWARDED, WINROCK ESTABLISHES A PRESENCE IN THE REQUIRED AREA AND CARRIES OUT THE SCOPE OF WORK INCLUDED WITHIN THE AWARD. WINROCK FOLLOWS ITS POLICY TO AWARD GRANTS WHICH PROVIDES GUIDELINES AROUND COMPETITION, SOLICITATION PROCEDURES, AND EVALUATION CRITERIA. WINROCK MONITORS GRANT ACTIVITIES FOR COMPLIANCE WITH THE TERMS AND CONDITIONS OF THE GRANT AGREEMENT AND TO ENSURE ACHIEVEMENT OF THE BENCHMARKS AND OBJECTIVES. MONITORING EFFORTS ARE DOCUMENTED AND INCLUDE PROCEDURES PERTINENT TO THE GRANT TYPE, INCLUDING FINANCIAL MANAGEMENT, MAINTENANCE AND INVENTORY OR EQUIPMENT, AND GRANT FILE RETENTION.

PART I, LINE 3, COLUMN (E):

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: AGRICULTURE, RESILIENCE, &

WATER, ENVIRONMENT AND ENERGY, HUMAN RIGHTS, EDUCATION, & EMPOWERMENT,

MANAGEMENT & GENERAL

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: AGRICULTURE, RESILIENCE, &

WATER, ENVIRONMENT AND ENERGY, HUMAN RIGHTS, EDUCATION, & EMPOWERMENT,

MANAGEMENT & GENERAL

Schedule F (Form 990) 2021

SCHEDULE I (Form 990)

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

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

2021
Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

WINROCK INTERNATIONAL INSTITUTE

Employer identification number 71-0603560

FOR AGRICULTURAL DEVELOPMENT Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) VIAMO PBC SUBGRANTS IMPLEMENTED 1250 CONNECTICUT AVE NW STE 200 BASED ON FUNDER 82-0825124 0. CASH REOUIREMENTS WASHINGTON, DC 20036 383,511. CARTWHEEL STARTUP STUDIO INC SUBGRANTS IMPLEMENTED 409 SW A ST BASED ON FUNDER REOUIREMENTS BENTONVILLE, AR 72712 87-1553342 229,593, 0. CASH SUBGRANTS IMPLEMENTED OPPORTUNITY INTERNATIONAL BASED ON FUNDER 550 W VAN BUREN ST STE 200 CHICAGO, IL 60607 54-0907624 501(C)3 151,740 0. CASH REQUIREMENTS ALLTANCE FOR RURAL IMPACT SUBGRANTS IMPLEMENTED 404 E GRIFFEN ST BASED ON FUNDER HARRISBURG AR 72432 81-5083680 501(C)3 127 296 0. CASH REQUIREMENTS GLOBAL AID TECHNOLOGIES INC SUBGRANTS IMPLEMENTED BASED ON FUNDER 417 MAIN STREET 84-4141545 REQUIREMENTS LITTLE ROCK, AR 72201 125 000 0. CASH FEMPAO INC SUBGRANTS IMPLEMENTED 125 W CENTRAL AVE 200 BASED ON FUNDER BENTONVILLE, AR 72712 85-1768592 125 000 0. CASH REQUIREMENTS 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2021

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIV OF AR FOR MEDICAL SCIENCES 4301 W MARKHAM LITTLE ROCK, AR 72205	71-6046242		115,915.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
NITEOWL GROCERY SALES LLC 987 GUTENSOHN SPRINGDALE, AR 72762	82-4381530		100,000.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
LAPOVATIONS, LLC 1722 N COLLEGE AVE STE C 159 FAYETTEVILLE, AR 72703	81-3670683		100,000.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
OZARKA COLLEGE 218 COLLEGE DRIVE MELBOURNE, AR 72556	71-0443460	501(C)3	91,931.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
REJOICY, INC 3802 SW HANSOM LOOP BENTONVILLE, AR 72712	86-1262344		84,240.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
BROADBAND DEVELOPMENT GROUP, LLC 124 W CAPITOL AVE STE 1901 LITTLE ROCK, AR 72201	47-3017458		37,500.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
CONNECTED NATION INC PO BOX 3448 BOWLING GREEN, KY 42102	61-1394934	501(C)3	37,114.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
NATURAL SOYBEAN AND GRAIN ALLIANCE 700 RESEARCH CENTER BLVD FAYETTEVILLE, AR 72701	46-4480503	501(C)3	28,347.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
SSG ADVISORS LLC T/A RESONANCE 1 MILL STREET STE 201 BULINGTON, VT 05401	27-1226648		21,513.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS

Schedule I (Form 990)

Schedule I (Form 990) FOR AGRIC Part II Continuation of Grants and Other		EVELOPMENT mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa		1-0603560 Pa
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OVERSEAS STRATEGIC CONSULTING LTD S SUBSIDIARIES - 1500 WALNUT STREET STE 1300 -							SUBGRANTS IMPLEMENTED BASED ON FUNDER
PHILADELPHIA, PA 19102	23-2720769		21,321.	0.	CASH		REQUIREMENTS
CRAFTON TULL & ASSOCATES, INC. 901 N 47TH ST STE 200 ROGERS, AR 72756	71-0393591		11,839.	0	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS
MOZAK LLC 9817 CASTAIN DRIVE	71 033331		11,005.				SUBGRANTS IMPLEMENTED BASED ON FUNDER
RALEIGH, NC 27617	81-3292851		11,350.	0.	CASH		REQUIREMENTS
CHAMBERLIN RESEARCH INC 8 IRON HORSE ROAD LITTLE ROCK, AR 72223	84-2302582		7,700.	0.	CASH		SUBGRANTS IMPLEMENTED BASED ON FUNDER REQUIREMENTS

Schedule I (Form 990) 2021 FOR AGRICULTURA		71-0603560 Pa				
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.		•
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash	assistance
Part IV Supplemental Information. Provide the information red	quired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.		
PART I, LINE 2:						
WINROCK INTERNATIONAL'S WORK IN TH	E UNITED	STATES INC	CLUDES FARM	ERS IN THE		
MID-SOUTH, CONSERVATION PROGRAMS T	HAT REDUC	E WATER PO	OLLUTION, A	ND A		
PORTFOLIO OF ENTREPRENEURIAL DEVEL	OPMENT WO	RK. WINROC	CK FOLLOWS	ITS POLICY		
TO AWARD GRANTS WHICH PROVIDES GUI	DELINES A	ROUND COME	PETITION, S	OLICITATION		
PROCEDURES, AND EVALUATION CRITERIA	A. WINR	OCK MONITO	ORS GRANT A	CTIVITIES		
FOR COMPLIANCE WITH THE TERMS AND	CONDITION	IS OF THE C	RANT AGREE	MENT AND TO		
ENSURE ACHIEVEMENT OF THE BENCHMAR	KS AND OE	JECTIVES.	MONITORIN	G EFFORTS		
ARE DOCUMENTED AND INCLUDE PROCEDU	RES PERTI	ייי ייי ייי	IE GRANT TV	DE:		

Schedule I (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

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.

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Questions Regarding Compensation

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number 71-0603560

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as 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	X	
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 on line 1a?	2	X	
3	Indicate which, if any, of the following the 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 Independent compensation consultant Independent compensation consultant Independent compensation consultant			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on 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		<u>X</u>
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		<u>X</u>
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			37
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			v
a	The organization?	6a		<u>X</u>
b	Any related organization?	6b		
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	_		v
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	8		
9	Regulations section 53.4958-6(c)?	9		
	neuulauuna aeulun 33.4930°0lU!!	. 9	1	1

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

Schedule J (Form 990) 2021

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 on 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 aren't 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	V-2 and/or 1099-MISC compensation	C and/or 1099-NEC	(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			reported as deferred on prior Form 990
(1) RODNEY FERGUSON	(i)	536,814.	50,000.	33,542.	29,000.	23,053.	672,409.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JOYJIT DEB ROY	(i)	281,846.	42,750.	22,089.	26,648.	16,545.	389,878.	0.
EXECUTIVE VP	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MIKE MYERS	(i)	267,303.	38,743.	13,768.	24,149.	25,996.	369,959.	0.
SENIOR VP - CFO & TREASURE	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BRAULIO OLIVEIRA	(i)	263,953.	25,347.	8,419.	27,000.	20,258.	344,977.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) PATRICIA J. MCCALL	(i)	254,839.	36,000.	4,286.	22,898.	23,010.	341,033.	0.
VP CORP AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MALIKA MAGAGULA	(i)	260,859.	33,900.	6,713.	23,413.	11,986.	336,871.	0.
VP AND COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) CHARLOTTE YOUNG	(i)	247,761.	35,325.	5,572.	22,221.	25,010.	335,889.	0.
VP GC AND CRCO	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) BRIAN BEAN	(i)	152,009.	10,000.	123,384.	15,578.	23,800.	324,771.	0.
CHIEF OF PARTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MARY GRADY	(i)	240,307.	35,000.	4,131.	24,334.	15,735.	319,507.	0.
CEO OF ERT	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) AMANDA HILLIGAS	(i)	235,208.	25,000.	2,976.	24,386.	24,894.	312,464.	0.
ASSOCIATE VP	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ALEXIS ELLICOTT	(i)	187,756.	10,000.	62,169.	19,015.	17,899.	296,839.	0.
CHIEF OF PARTY	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) EDNA CRUZ	(i)	250,220.	0.	2,661.	25,384.	13,253.	291,518.	0.
CHRO	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) ELISABETH WHITBECK	(i)	135,633.	15,000.	341.	11,980.	9,511.	172,465.	0.
BOARD SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A:
WINROCK ALLOWS EXECUTIVE TEAM MEMBERS TO BE REIMUBURSED FOR COSTS UP TO
\$1,250 ANNUALLY TO COVER EXPENSES THAT PROMOTE A HEALTHY LIFESTYLE
INCLUDING HEALTH CLUB MEMBERSHIPS, WEIGHT-MANAGEMENT/FITNESS PROGRAMS,
SMOKING CESSATION AND SIMILAR PROGRAMS.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number 71-0603560

Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermin	_	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	2	56,481.	STOCK QUOTE			
10	Securities - Closely held stock				-			
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other							
27	Other							
28	Other (
29	Number of Forms 8283 received by the organization	zation durinç	g the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date		ll contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p				ions?	31	Х	—
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				77
	contributions?					32a		X
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	tor which column (a) is chec	cked,			
	describe in Part II.			`	6	A /F	000	000:
LHA	For Paperwork Reduction Act Notice, see	the instruct	uons for Form 990	J.	Schedule N	// (FOTI	11 990)	ZU21

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

Schedule M (Form 990) 2021

WINROCK INTERNATIONAL INSTITUTE

Schedule M	(Form 990) 2021 F	'OR	AGRICULTURAL	DEVELOPMENT	71-0603560	Page 2
Part II	Supplemental In	nforn	nation. Provide the info	ermation required by Part L	lines 30b, 32b, and 33, and whether the organizat ms received, or a combination of both. Also comp	tion
	is reporting in Part I.	colum	nn (b), the number of cont	ributions, the number of iter	ms received, or a combination of both. Also comp	olete
	this part for any addit	tional	information.	industrie, and mainizer or ite.		
-	. ,					

Schedule M (Form 990) 2021

132142 11-17-21

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

QUZT
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number 71-0603560

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

INTERNATIONAL DEVELOPMENT, PROVIDING SOLUTIONS TO SOME OF THE WORLD'S

MOST COMPLEX SOCIAL, AGRICULTURAL AND ENVIRONMENTAL CHALLENGES. WINROCK

IS A NON-PROFIT ORGANIZATION THAT COMBINES TECHNICAL EXPERTISE WITH

ENTREPRENEURIAL INNOVATION TO IMPROVE LIVES AROUND THE GLOBE AND

IMPLEMENTS A PORTFOLIO OF MORE THAN 100 AGRICULTURE, ENVIRONMENT, AND

SOCIAL DEVELOPMENT PROJECTS IN MORE THAN 40 COUNTRIES.

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

ENVIRONMENTAL RESOURCES TRUST (ERT): ERT'S MISSION IS TO HARNESS THE

POWER OF MARKETS TO IMPROVE THE ENVIRONMENT. ERT ENHANCES CONFIDENCE IN

THE SCIENTIFIC INTEGRITY AND SOCIAL EQUITY OF ENVIRONMENTAL MARKETS TO

CATALYZE AMBITIOUS AND TRANSFORMATIONAL CLIMATE ACTION. THROUGH ITS

AMERICAN CARBON REGISTRY (ACR) ENTERPRISE, ERT HAS CATALYZED OVER 200

MILLION TONS OF HIGH-QUALITY EMISSION REDUCTIONS AND REMOVALS ISSUED

AS SERIALIZED CARBON OFFSET CREDITS IN THE FORESTRY, ENERGY,

TRANSPORTATION AND INDUSTRIAL SECTORS.

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

ECONOMIES, AND RESILIENT FOOD SYSTEMS IN THE UNITED STATES. THE

CENTER'S WORK FOCUSES ON FIVE LEVERS FOR FOOD SYSTEMS CHANGE CATALYTIC

SYSTEMS LEADERSHIP; EQUITY AND JUSTICE IN FARMING AND FOOD SYSTEMS;

LEARNING, COLLABORATION, INNOVATION AND ACTION ACROSS COMMUNITIES;

VALUES-BASED SUPPLY CHAINS; AND REGENERATIVE LAND USE.

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

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page **2**

Name of the organization WINROCK INTERNATIONAL INSTITUTE Employer identification number FOR AGRICULTURAL DEVELOPMENT 71-0603560

OTHER PROGRAMS: OTHER PROGRAMS INCLUDES U.S. PROGRAMS: SINCE 1985,

WINROCK'S U.S. PROGRAMS HAS USED INNOVATIVE APPROACHES TO ADDRESS

DOMESTIC ISSUES. WINROCK'S U.S. PROGRAMS BRINGS TOOLS, EXPERIENCE, AND

TRAINING TO PEOPLE AND COMMUNITIES IN ARKANSAS AND THROUGHOUT THE

MID-SOUTH HELPING THEM UNLOCK THEIR STRENGTHS, CREATIVITY, AND

RESOURCEFULNESS.

EXPENSES \$ 5,080,389. INCLUDING GRANTS OF \$ 1,264,452. REVENUE \$ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

BANGLADESH, BURKINA FASO, BRAZIL, CAMBODIA,

CANADA, CHINA, GHANA, GUINEA,

INDONESIA, JAMAICA, KAZAKHSTAN, KENYA,

KYRGYZSTAN, LAOS, LIBERIA, MALAWI,

MALI, MOZAMBIQUE, NEPAL, NIGER,

NIGERIA, PAKISTAN, PHILIPPINES, SENEGAL,

SOLOMON ISLANDS, TAJIKISTAN, TANZANIA, THAILAND,

UZBEKISTAN, VIETNAM

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBERS PETER O'NEILL AND WILL ROCKEFELLER ARE RELATED.

FORM 990, PART VI, SECTION B, LINE 11B:

FINANCE MANAGEMENT AND THE TAX RETURN PREPARER PRESENTED THE FORM 990 TO

THE AUDIT AND COMPLIANCE COMMITTEE. AT THEIR RECOMMENDATION, ALL MEMBERS

OF THE BOARD OF DIRECTORS WERE PROVIDED A COMPLETE COPY PRIOR TO FILING FOR

THE OPPORTUNITY TO REVIEW THE ACCURACY AND COMPLETENESS OF THE RETURN.

Schedule O (Form 990) 2021 Page 2

Name of the organization WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT

Employer identification number 71-0603560

FORM 990 PART I LINE 5 AND PART V LINE 2A:

THE EMPLOYEE COUNT ON PART I LINE 5 IS THE WORLDWIDE EMPLOYEE COUNT,

INCLUDING IN-COUNTRY EMPLOYEES. THE COUNT ON PART V LINE 2A IS FROM

THE FORM W-3 AND INCLUDES ONLY US EMPLOYEES.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY, BOARD MEMBERS, EXECUTIVE TEAM MEMBERS, AND ALL EMPLOYEES ARE

FURNISHED THE CODE OF CONDUCT (CODE), WHICH INCLUDES THE CONFLICTS OF

INTEREST POLICY. EACH BOARD AND STAFF MEMBER IS REQUIRED TO (I) CERTIFY

THAT THEY HAVE READ, UNDERSTAND, AND WILL COMPLY WITH THE CODE AND (II)

PURSUANT TO THE POLICY, IDENTIFY AND DISCLOSE ANY KNOWN OR POTENTIAL

CONFLICTS OF INTEREST FOR APPROVAL BY THE COMPLIANCE OFFICE PRIOR TO

PROCEEDING. FOR DIRECTORS, OFFICERS, AND THE EXECUTIVE TEAM, THE

COMPLIANCE OFFICE FURTHER PROVIDES A DISCLOSURE FORM TO EACH INDIVIDUAL

ANNUALLY TO CERTIFY THAT NO CONFLICTS HAVE ARISEN DURING THE PAST YEAR.

EVERY CONFLICT DISCLOSURE IS REVIEWED BY THE COMPLIANCE OFFICE TO DETERMINE

THE IMPACT ON WINROCK, WHETHER THE ACTION CAN PROCEED, AND APPROPRIATE

MITIGATION STEPS, IF NECESSARY.

FORM 990, PART VI, SECTION B, LINE 15:

A COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS USES COMPENSATION

SURVEYS AND OTHER RESOURCES TO DETERMINE THE APPROPRIATE COMPENSATION FOR

THE CEO. THE DECISION BY THE COMPENSATION COMMITTEE IS THEN APPROVED BY

THE FULL BOARD BEFORE BEING FINALIZED. THE COMPENSATION COMMITTEE ALSO

REVIEWS ANNUALLY THE COMPENSATION OF EXECUTIVES.

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

AR,CA,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,ND,OR,PA,RI,SC,TN

Schedule O (Form 990) 2021		Page 2
3	OCK INTERNATIONAL INSTITUTE AGRICULTURAL DEVELOPMENT	Employer identification number 71-0603560
	ACKICODIOWAL DEVELORMANI	71 0003300
UT, VA, WA, WV, WI		
FORM 990, PART VI,	SECTION C, LINE 19:	
THE ARTICLES OF INC	CORPORATION ARE MADE PUBLIC THROUGH THE .	ARKANSAS
SECRETARY OF STATE.	ARTICLES OF INCORPORATION AND THE BYL.	AWS MAY BE
DIRECTLY REQUESTED	FROM THE BOARD SECRETARY AT WINROCK INT	ERNATIONAL'S
CORPORATE MAILING A	ADDRESS.	
THE CONFLICTS OF IN	TEREST POLICY IS AVAILABLE AT WINROCK.O	RG AS PART OF
		NG AD TAKE OF
WINROCK'S CODE OF I	BUSINESS CONDUCT.	
THE AUDITED INSTITU	JTIONAL FINANCIAL STATEMENTS AND COMPLIA	NCE AUDIT UNDER
UNIFORM GUIDANCE AF	RE AVAIALABLE UPON REQUEST TO THE CHIEF	FINANCIAL OFFICER
AT THE CORPORATE MA	AILING ADDRESS:	
FORM 990, PART XI,	LINE 9, CHANGES IN NET ASSETS:	
MERGER OF ARKANSAS	REGIONAL INNOVATION HUB: EIN 46-3376034	1,656,619.

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service

Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

WINROCK INTERNATIONAL INSTITUTE

Employer identification number 71-0603560

OMB No. 1545-0047

Open to Public

Inspection

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

FOR AGRICULTURAL DEVELOPMENT

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
WINROCK INTERNATIONAL FOUNDATION -	TO SUPPORT WINROCK				WINROCK INTERNATIONAL
71-0603560, 204 EAST 4TH STREET, NORTH	INTERNATIONAL INSTITUTE FOR				INSTITUTE FOR
LITTLE ROCK, AR 72114	AGRICULTURAL DEVELOPMENT	ARKANSAS	6,131,918.	62,995,140.	AGRICULTURAL
WINROCK SOLUTIONS, LLC - 71-0603560	TO SUPPORT WINROCK IN				WINROCK INTERNATIONAL
204 EAST 4TH STREET	SOCIAL, AGRICULTURAL, &				INSTITUTE FOR
NORTH LITTLE ROCK, AR 72114	ENVIRONMENT SOLUTIONS	ARKANSAS	1,337,435.	1,337,435.	AGRICULTURAL
ENVIRONMENTAL RESOURCES TRUST, LLC -	TO IMPROVE NATURAL RESOURCE				WINROCK INTERNATIONAL
71-0603560, 204 EAST 4TH STREET, NORTH	MANAGEMENT & ENVIRONMENTAL				INSTITUTE FOR
LITTLE ROCK, AR 72114	MARKET CONFIDENCE	ARKANSAS	1,583,374.	1,583,374.	AGRICULTURAL

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	
	TO INCREASE INNOVATIVE AND				WINROCK	Yes	No
	ENTREPRENEURIAL ACTIVITY IN ARKANSAS	ARKANSAS	501(C)(3)		INTERNATIONAL INSTITUTE FOR		X

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

Schedule R (Form 990) 2021

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.

-	1	- I					Т			T	_
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	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	entity	(related, unrelated,	income	end-of-year	alloca	itions?	amount in box 20 of Schedule	partner	Percentage ownership
		foreign country)		(related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes N	0
INNOVATION FUND, LLC -	SMALL BUSINESS										
81-3781111, 204 EAST 4TH	STARTUP										
STREET, NORTH LITTLE ROCK, AR	INVESTMENTS IN										
72114	ARKANSAS	AR		NO INCOME				X	N/A	x	
	I		L			I	•		I		

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	ction b)(13) rolled tity?
		,						Yes	No

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

1a

X

Yes No

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

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

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)				1b		X
c Gift, grant, or capital contribution from related organization(s)				1c		Х
				1d	Х	
e Loans or loan guarantees by related organization(s)				1e		Х
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)				1i	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		X
I Performance of services or membership or fundraising solicitations for related org				11		Х
m Performance of services or membership or fundraising solicitations by related org	ganization(s)			1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organiza				1n		Х
				10		Х
p Reimbursement paid to related organization(s) for expenses				1p		X
q Reimbursement paid by related organization(s) for expenses				1q		X
r Other transfer of cash or property to related organization(s)				1r		X
s Other transfer of cash or property from related organization(s)				1s	Х	
2 If the answer to any of the above is "Yes," see the instructions for information on	who must complete th	is line, including covered r	elationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved		
1) THE ARKANSAS REGIONAL INNOVATION HUB	D	156,447.	CASH			
2) THE ARKANSAS REGIONAL INNOVATION HUB	I	1,656,619.	NET ASSETS FROM MERGER			
3)						
•						
4)						
•						
5)						
•						
6)						
32163 11-17-21			Schedule	R (Forr	n 990)	2021

Schedule R (Form 990) 2021

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat	por- ate ions?		General manage partner	(k) Al or Percentage ging ownership
	-									
										-
	_							Ochodolo		

WINROCK INTERNATIONAL INSTITUTE 71-0603560 Page 5 FOR AGRICULTURAL DEVELOPMENT Schedule R (Form 990) 2021 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions. PART I, IDENTIFICATION OF DISREGARDED ENTITIES: NAME OF DISREGARDED ENTITY: WINROCK INTERNATIONAL FOUNDATION PRIMARY ACTIVITY: TO SUPPORT WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT DIRECT CONTROLLING ENTITY: WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT NAME OF DISREGARDED ENTITY: WINROCK SOLUTIONS, LLC PRIMARY ACTIVITY: TO SUPPORT WINROCK IN SOCIAL, AGRICULTURAL, & **ENVIRONMENT SOLUTIONS** DIRECT CONTROLLING ENTITY: WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT NAME OF DISREGARDED ENTITY: ENVIRONMENTAL RESOURCES TRUST, LLC PRIMARY ACTIVITY: TO IMPROVE NATURAL RESOURCE MANAGEMENT & ENVIRONMENTAL MARKET CONFIDENCE DIRECT CONTROLLING ENTITY: WINROCK INTERNATIONAL INSTITUTE FOR AGRICULTURAL DEVELOPMENT PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS: NAME OF RELATED ORGANIZATION:

THE ARKANSAS REGIONAL INNOVATION HUB

DIRECT CONTROLLING ENTITY: WINROCK INTERNATIONAL INSTITUTE FOR

Schedule R (Form 990) 2021

Provide additional information on Schedule R. See instructions.
AGRICULTURAL DEVELOPMENT