Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection For the 2022 calendar year, or tax year beginning 2022, and ending 20 В World Forest ID Association Check if applicable: C Name of organization D Employer identification number Address change Doing business as 86-2654210 E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Initial return 1 Thomas Circle NW 700 (612) 770-7679 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return Washington, DC 20005 2,468,807 Application pending F Name and address of principal officer: Jade Saunders H(a) Is this a group return for subordinates? Yes Same as C above H(b) Are all subordinates included? Yes **X** 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions Tax-exempt status: www.worldforestid.org Website: H(c) Group exemption number X Corporation Trust Association L Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: Leveraging unique geo-located plant chemistry, environmental data and cutting edge technology to enable traceable and accountable global Activities & Governance supply chains. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 6 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0 Prior Year **Current Year** 505 106,786 Revenue 2,468,302 10 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 106,786 2,468,807 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 451,522 60,205 Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17,543 1,093,244 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 77,748 1,544,766 19 Revenue less expenses. Subtract line 18 from line 12 29,038 924,041 Net Assets or Fund Balances **Beginning of Current Year** End of Year 1,213,184 29,038 21 182,972 29.038 1,030,212 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Jade Saunders Sign Here Jade Saunders, Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check Paid 11-09-2023 self-employed John Mullins John Mullins P01429307 **Preparer** Firm's name Mullins, Firm's EIN **Use Only** Firm's address 7625 Wisconsin Avenue Phone no. Bethesda MD 20814 May the IRS discuss this return with the preparer shown above? See instructions

 4e
 Total program service expenses
 1,016,873

 EEA
 Form 990 (2022)

) (Revenue \$

including grants of \$

Other program services (Describe on Schedule O.)

(Expenses \$

2) World Forest ID Association Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	l _		
_	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
_	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-		Х
9	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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	<u> </u>		^
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а				
	complete Schedule D, Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX · · · · · · · · · · · · · · · · · ·	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	146		.,
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		Х
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	-10		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			Λ
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20 a	The state of the s	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

(22) World Forest ID Association Checklist of Required Schedules (continued) Part IV

			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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
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		
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		<u> </u>
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 or 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			
20	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,			
2	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		_ <u>x</u>
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"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		х
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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		X
35a	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
27	related organization?If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		
20	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? Note : All Form 990 filers are required to complete Schedule O	38	.	
Par		30	Х	
ı ai	Check if Schedule O contains a response or note to any line in this Part V			
	C. 22 Solicado O Collado a responde di fioto to any into in tito i art V 1111111111111	• • •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	1.0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	x	

Page 5 World Forest ID Association 86-2654210 Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 3 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b х 3a х 3a 3b 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)?...... X **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a 5a Х 5b Х c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a Х If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a X Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was С 7c d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . 7g g 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? 9 Sponsoring organizations maintaining donor advised funds. 9b b 10 Section 501(c)(7) organizations. Enter: 10a а b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: а b Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which С 13c Did the organization receive any payments for indoor tanning services during the tax year? х 14a 14a 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 15 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 Х If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities 17 that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17

If "Yes," complete Form 6069.

Pa	Irt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			_
_	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		х
Se	ction 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			
	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 in line 1a, above, who are independent			
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		X
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	Х	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	Х	<u> </u>
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	No
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		—
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? • • •	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	⊢—
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	⊢—
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Х	<u> </u>
13	Did the organization have a written whistleblower policy?	13	Х	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	<u> </u>
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
0.5.5	organization's exempt status with respect to such arrangements?	16b		Щ_
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
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 only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Y 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 financial statements available to the public during the tax year.			

State the name, address, and telephone number of the person who possesses the organization's books and records.

The Organization (612)770-7679, 1 Thomas Circle NW, Washington, DC 20005

20

=_	rm	990	(2022	١(

EEA

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, box 6 of 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 instructions for the order in which to list the persons above.

Check this box if heither the organization not any rela-	ied organizai	.1011 CO	mpe	nsa	ieu a	any cui	ren	t officer, director, or	trustee.	
				((C)					
(A) Name and title	(B) Average hours per week	box,	unles	eck m s per	rson i	han one s both ar /trustee)	n	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) Richard Guillery	40.00									
Executive Director				х				137,981	0	8,366
(2) Paul Wilkin Member	10.00	x						0	0	0
(3) Scot_McQueen Member	10.00	x						0	0	0
(4) Jamey French Member	10.00	x						0	0	0
(5) Alex Moad President	10.00	х		x				0	0	0
(6) Jade Saunders Executive Director	10.00	x		x				0	0	0
	10.00	x		x				0	0	0
(8)								<u> </u>		
(9)										
<u>(10)</u>										
<u>(11)</u>										
<u>(12)</u>										
<u>(13)</u>										
<u>(14)</u>										

Form **990** (2022)

Page 8

Fait VII Section A. Officers, Directors, 1	rusices,	ive y		ριο	yee	o, ai	iu i	inghest comp	elisateu Li	iipioy	663 (<u>(continuea)</u>
(A) Name and title	(B) Average hours per week	box	, unles	Po: eck n	rson i	han one s both ar /trustee)	n	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/		Estimat of comp	(F) ted amount f other pensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W- 1099-MISC/ 1099-NEC)		organiz	m the zation and organizations
<u>(15)</u>												
<u>(16)</u>												
<u>(17)</u>												
<u>(18)</u>												
<u>(19)</u>												
<u>(20)</u>												
(21)												
(22)												
(23)												
(24)												
(25)												
1b Subtotal												
c Total from continuation sheets to Part VII, Sec	tion A .											
d Total (add lines 1b and 1c)								137,981		0		8,366
2 Total number of individuals (including but not limit	ed to those li	isted a	bove	e) wl	no re	eceive	d mo	ore than \$100,000 o	of			
reportable compensation from the organization											Τ,	Yes No
3 Did the organization list any former officer, direct	or tructoo k	ov omr	alovo		r bio	shoet o	omr	onsatod				ies No
employee on line 1a? If "Yes," complete Schedule			-		_						3	x
4 For any individual listed on line 1a, is the sum of r												A
organization and related organizations greater tha	-	•										
individual										[4	х
5 Did any person listed on line 1a receive or accrue	compensati	on fror	n an	y un	relat	ted org	ganiz	zation or individual				
for services rendered to the organization? If "Yes,	" complete S	Schedu	ıle J	for s	such	perso	n				5	Х
Section B. Independent Contractors									200 (
1 Complete this table for your five highest compens compensation from the organization. Report com										(OOr		
(A)	pensation for	ine ca	alenc	лаг у	eai	ending	WIL	(B)	inization's tax y	ear.	(C)	
Name and business addre	ss							Description of service	es	Cor	(C) npensat	tion
										231	,	
2 Total number of independent contractors (in all dis	a but not li	itod to	the	. II-	to d	ahayra	-ار ا					
2 Total number of independent contractors (includir received more than \$100,000 of compensation from the contractors).	-			oc IIS	icu i	abuve	, wil	io				

Form 990 (2022) World Forest ID Association
Part VIII Statement of Revenue

		Check if Schedule O cor	ntains a respons	e or n	ote to any line in thi	s Part VIII			<u> </u>
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
									sections 512-514
	1a	Federated campaigns •		1a					
s ts	b	Membership dues		1b					
ran	С	Fundraising events		1c					
s, G	d	Related organizations .		1d					
Gift lar/	е	Government grants (contri	ibutions)	1e					
ini.	f	All other contributions, gift	s, grants,						
utio er S		and similar amounts not in	ncluded above	1f	505				
g t	g	Noncash contributions inc	luded in						
Contributions, Giffs, Grants and Other Similar Amounts		lines 1a-1f		1g	\$				
	h	Total. Add lines 1a-1f				505			
					Business Code				
e U		Government Contrac			900099	2,397,174	2,397,174		
و جَ	b	Private Sector Pro	900099	67,128	67,128				
eun Bun	С	NGO Partnerships			900099	4,000	4,000		
Program Service Revenue	d								
ρ F	е								
₫	f	All other program service re							
	g					2,468,302			
	3	Investment income (including			and				
		other similar amounts) . Income from investment of			oods				
	4 5				i				
	3	Noyallies	(i) Pool						
	6a	Gross rents	(i) Real		(ii) Personal				
		Less: rental expenses	6b						
		Rental income or (loss)	6c						
		Net rental income or (loss)							
		Gross amount from	(i) Securition		(ii) Other				
	/a	sales of assets	(i) courties		(ii) Guioi				
		other than inventory	7a						
	b	Less: cost or other basis							
ne		and sales expenses	7b						
evenue	С	Gain or (loss)	7c						
Re		Net gain or (loss)							
Other R	8a	Gross income from fundrais	sing						
ᅙ		events (not including \$							
		of contributions reported or	n line						
		1c). See Part IV, line 18		8a					
	b	Less: direct expenses .		8b					
	С	Net income or (loss) from fu	undraising event	s 🗀					
	9a	Gross income from gaming							
		activities, See Part IV, line		9a					
		Less: direct expenses .		9b					
	С	Net income or (loss) from g	jaming activities	<u> </u>					
	10a	Gross sales of inventory, le							
		returns and allowances •		10a					
		Less: cost of goods sold		10k	•				
	С	Net income or (loss) from s	sales of inventory	• • •					
S	110				Business Code				
nor ne	11a								
Miscellanous Revenue	b								
sce Rev	d C	All other revenue							
Ξ		Total. Add lines 11a-11d							
		Total revenue. See instruc				2,468,807	2,468,302	0	0
						_,,	_,,	•	

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).

Do r	check if Schedule O contains a response or note to	(A)	(B)	(C)	(D)
	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	137,981		137,981	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	270,302	148,684	65,362	56,256
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	14,212	9,686	4,526	
9	Other employee benefits	5,962	166	5,796	
10	Payroll taxes	23,065	12,180	10,885	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	26,210		26,210	
С	Accounting	18,196		18,196	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 •				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	17,956		17,956	
12	Advertising and promotion	22,366		22,366	
13	Office expenses	16,054		16,054	
14	Information technology	49,257		49,257	
15	Royalties				
16	Occupancy				
17	Travel	60,042	356	59,686	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,962		3,962	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	6,085		6,085	
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	Data Analysis	155,918	155,918		
b	Collections & Expeditions	707,495	689,883	17,612	
C	Licenses & Permits	5,129		5,129	
d	Bank Charges	3,067		3,067	
е	All other expenses	1,507		1,507	
25	Total functional expenses. Add lines 1 through 24e	1,544,766	1,016,873	471,637	56,256
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	_	Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	29,008	1	951,337
	2	Savings and temporary cash investments		2	150,317
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	111,500
	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	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	30	9	30
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	29,038	16	1,213,184
	17	Accounts payable and accrued expenses		17	181,756
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	1,216
	26	Total liabilities. Add lines 17 through 25	0	26	182,972
		Organizations that follow FASB ASC 958, check here			
ces		and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	29,038	27	1,030,212
Ва	28	Net assets with donor restrictions		28	
nd		Organizations that do not follow FASB ASC 958, check here			
·Fu		and complete lines 29 through 33.			
0 0	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
let	32	Total net assets or fund balances	29,038	32	1,030,212
_	33	Total liabilities and net assets/fund balances	29,038	33	1,213,184

Both consolidated and separate basis

2c

3a

the audit, review, or compilation of its financial statements and selection of an independent accountant?

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Separate basis

Schedule O.

Consolidated basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of

If the organization changed either its oversight process or selection process during the tax year, explain on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

SCHEDULE A (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number

Open to Public Inspection

		Forest ID Association					86-265421						
Pa	rt I	Reason for Public Cha	rity Status. (Al	ll organizations mus	st comple	ete this p	oart.) See instructi	ons.					
he	orga	nization is not a private foundation b	ecause it is: (For lir	nes 1 through 12, check	only one b	ox.)							
1		A church, convention of churches, of	or association of ch	urches described in sec t	tion 170(b)(1)(A)(i).							
2		A school described in section 170(b)(1)(A)(ii). (Attach	Schedule E (Form 990)	.)								
3		A hospital or a cooperative hospital	service organization	on described in section 1	170(b)(1)(<i>A</i>	A)(iii).							
4		A medical research organization op	erated in conjunction	on with a hospital describ	ed in sect	ion 170(b)	(1)(A)(iii). Enter the						
		hospital's name, city, and state:											
5		An organization operated for the be	enefit of a college o	r university owned or ope	erated by a	governme	ental unit described in						
		section 170(b)(1)(A)(iv). (Complete	e Part II.)										
6		A federal, state, or local governmer	nt or governmental	unit described in section	170(b)(1)	(A)(v).							
7	X	An organization that normally recei	ves a substantial pa	art of its support from a g	jovernmen	tal unit or t	from the general public						
		described in section 170(b)(1)(A)(v	vi). (Complete Part	II.)									
8		A community trust described in sec	tion 170(b)(1)(A)(v	/i). (Complete Part Ⅱ.)									
9		An agricultural research organization	on described in sec	tion 170(b)(1)(A)(ix) ope	erated in co	onjunction	with a land-grant colleg	е					
		or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or											
		university:											
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	Ļ	An organization organized and ope	•	•									
12	L	An organization organized and ope	rated exclusively fo	or the benefit of, to perfor	m the fund	tions of, o	r to carry out the purpo	ses 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 th	•				_						
á	3		on operated, super	vised, or controlled by its	supported	d organizat	ion(s), typically by givin	ıg					
		the supported organization(s) t	he power to regular	rly appoint or elect a maj	ority of the	directors	or trustees of the						
		supporting organization. You m	nust complete Par	t IV, Sections A and B.									
ı)		ion supervised or c	controlled in connection w	ith its supp	oorted orga	anization(s), by having						
		control or management of the s	supporting organiza	ation vested in the same	persons th	at control o	or manage the supporte	ed					
		organization(s). You must con	nplete Part IV, Sec	ctions A and C.									
(;		d. A supporting org	ganization operated in co	nnection w	ith, and fu	nctionally integrated wit	th,					
		its supported organization(s) (s	•	-									
(t	☐ Type III non-functionally integ	grated. A supportin	ng organization operated	in connect	ion with its	supported organization	n(s)					
		that is not functionally integrate	d. The organization	n generally must satisfy a	a distributio	n requiren	nent and an attentivene	ess					
		requirement (see instructions).	You must comple	te Part IV, Sections A a	nd D, and	Part V.							
•	9	Check this box if the organizati	on received a writte	en determination from the	e IRS that i	it is a Type	I, Type II, Type III						
		functionally integrated, or Type	•	integrated supporting or	ganization	•							
1	E	Enter the number of supported organ	izations										
	j F	Provide the following information abo	ut the supported or	ganization(s).	1		ı	·					
	(i) N	lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the o listed in you docum	ır governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No							
					162	NO							
A)													
B)													
C)													
D)													
-,													
E)													
Tota													

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and	` ,	, ,	, ,	. ,		. ,
	membership fees received. (Do not						
	include any "unusual grants.")				106,786	2,467,531	2,574,317
2	Tax revenues levied for the				,	,	,
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3				106,786	2,467,531	2,574,317
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 .						2,574,317
Secti	on B. Total Support						<u> </u>
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4				106,786	2,467,531	2,574,317
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						2,574,317
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the or	rganization's fi	rst, second, thi	rd, fourth, or fi	fth tax year as	a section 501(c)(3)
	organization, check this box and stop her	·e					<u>x</u>
Secti	on C. Computation of Public Suppo						
14	Public support percentage for 2022 (line 6	6, column (f), d	ivided by line	11, column (f))		14	%
15	Public support percentage from 2021 Sch	edule A, Part l	I, line 14			15	%
16a	33 1/3% support test - 2022. If the organ	ization did not	check the box	on line 13, an	d line 14 is 33	1/3% or more,	check this
	box and stop here. The organization qua	lifies as a publ	icly supported	organization.			
b	33 1/3% support test - 2021. If the organ	ization did not	check a box o	n line 13 or 16	a, and line 15	is 33 1/3% or r	nore, check
	this box and stop here. The organization	qualifies as a	publicly suppor	rted organizati	on		
17a	10%-facts-and-circumstances test - 202	22. If the orgar	nization did not	check a box o	on line 13, 16a	, or 16b, and lir	ne 14 is
	10% or more, and if the organization mee	ts the facts-an	d-circumstance	es test, check	this box and s t	t op here . Expla	ain in
	Part VI how the organization meets the fa	cts-and-circun	nstances test. •	The organizati	on qualifies as	a publicly supp	oorted
	organization						
b	10%-facts-and-circumstances test - 202	21. If the orgar	nization did not	check a box o	on line 13, 16a	, 16b, or 17a, a	nd line
	15 is 10% or more, and if the organization	meets the fac	ts-and-circum	stances test, c	heck this box a	and stop here.	Explain
	in Part VI how the organization meets the					•	•
	organization			-		•	· · —
18	Private foundation. If the organization di	d not check a	box on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and s	see
	instructions						

86-2654210

World Forest ID Association
Support Schedule for Organizations Described in Section 509(a)(2) Part III

(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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3	1					
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	<u> </u>					
8	Public support. (Subtract line 7c from						
Ū	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	(4) 2010	(8) 2010	(6) 2020	(a) 202 :	(6) 2022	(i) i otai
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources •						
b	Unrelated business taxable income (less						
-	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	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.)						
14	First 5 years. If the Form 990 is for the o	rganization's f	irst. second. th	ird. fourth. or f	ifth tax vear as	a section 501	(c)(3)
	organization, check this box and stop her						
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2022 (line 8	3, column (f), o	divided by line	13, column (f)))	15	%
16	Public support percentage from 2021 Sch	. , , .	•			16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2022 (line 10c, colur	nn (f), divided l	oy line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2021					18	%
19a	33 1/3% support tests - 2022. If the orga					ore than 33 1	
	17 is not more than 33 1/3%, check this b						
b	33 1/3% support tests - 2021. If the organization	•	-				-
	line 18 is not more than 33 1/3%, check this box						□
20	Private foundation. If the organization di	•	-			-	ictions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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. Al	Sup	porting	Organ	izations
---------------	-----	---------	-------	----------

	11 0 0		Yes	No
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.	1		
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).	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.	3a		
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.	3b		
С	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.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
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.	4b		
С	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes,"</i>			
	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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	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.	6		
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).	7		
8	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).	8		
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 .	9a		
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.	9b		
С	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.	9с		
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 10b below.	10a		
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.)	10b		

- Schedule A (Form 990) 2022 World Forest ID Association 86-2654210 Part IV Supporting Organizations (continued) Has the organization accepted a gift or contribution from any of the following persons? 11 A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? A family member of a person described on line 11a above? A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c. provide detail in Part VI. Section B. Type I Supporting Organizations 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 regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes." explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations No Yes Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). Yes 2 No Activities Test. Answer lines 2a and 2b below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of
 - the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

(see instructions).

Schedul	e A (Form 990) 2022 World Forest ID Association		86-2654	210	Page 6
Part	7				
1	Check here if the organization satisfied the Integral Part Test as a qualifying	j tru	st on Nov. 20, 1970 <i>(expl</i>	ain in Part \	∕I). See
	instructions. All other Type III non-functionally integrated supporting organ	izat	ions must complete Section	ons A throu	gh E.
Secti	on A - Adjusted Net Income		(A) Prior Year	1 ` ′	ent Year onal)
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			
Secti	on B - Minimum Asset Amount		(A) Prior Year	1 ` ′	ent Year onal)
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			
	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
е	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			
	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Secti	on C - Distributable Amount			Currer	nt 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			

Schedule A (Form 990) 2022 EEA

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization

	e A (Form 990) 2022 World Forest ID Associati	on	86-2		1210 Page 7
Part		3) Supporting Organ	izations (Continue	<i>ea)</i>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e			1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppor	ted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purport	oses of supported orgar	izations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required)	-	: VI)	5	
6	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	n the organization is res	oonsive		
	(provide details in Part VI). See instructions.			8	
9_	Distributable amount for 2022 from Section C, line 6			9	
_10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution	ns	Distributable
		Excess Biotributions	Pre-2022		Amount for 2022
1_	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - explain in Part VI). See				
	instructions.			_	
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
<u>c</u>	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2022 distributable amount				
_ <u>i</u>	Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if				
Э					
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions. Remaining underdistributions for 2022. Subtract lines 3h				
6	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.	1			
7	Excess distributions carryover to 2023. Add lines 3j				
•	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
<u>u</u>	Excess from 2019				
	Excess from 2020				
d	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI 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.)

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Employer identification number

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

orlo	Forest ID Association			86-2654210
Par			or Accoun	its.
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 6.		
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
1	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor	advised	
	funds are the organization's property, subject to the organization	_		Yes N
3	Did the organization inform all grantees, donors, and donor	<u> </u>		
	only for charitable purposes and not for the benefit of the do			
	conferring impermissible private benefit?			Yes N
art				
٠.,	Complete if the organization answered "Yes"	on Form 990 Part IV line 7		
l	Purpose(s) of conservation easements held by the organiza			
•	Preservation of land for public use (for example, recreating		on of a histori	cally important land area
	Protection of natural habitat	· _		cally important land area ed historic structure
	=	☐ Preservati	on or a certifie	ed historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qual	med conservation contribution in the	form of a con-	
	easement on the last day of the tax year.			Held at the End of the Tax Yo
a	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic st	` '		2c
d	Number of conservation easements included in (c) acquired	-		
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated	by the organiz	zation during the
	tax year			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe			
	$\mbox{\sc violations},$ and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing	g conservation	easements during the year
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing con	servation eas	ements during the year
В	Does each conservation easement reported on line 2(d) about		. , . , .	
9	In Part XIII, describe how the organization reports conserva			
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial st	atements that	describes the
	organization's accounting for conservation easements.			
art	III Organizations Maintaining Collections		s, or Othe	r Similar Assets.
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 9	58, not to report in its revenue staten	nent and balar	nce sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or researc	h in furtheran	ce of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these	e items.	
b	If the organization elected, as permitted under FASB ASC 9	58, to report in its revenue statement	and balance	sheet works of
	art, historical treasures, or other similar assets held for publi	c exhibition, education, or research i	n furtherance	of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical tro			
	following amounts required to be reported under FASB ASC		5 , 1	
а	Revenue included on Form 990, Part VIII, line 1	•		\$
b	Assets included in Form 990, Part X			<u> </u>
J	ASSERS INCIDUCED III FUIII 330, Fall A			J

Par	t III Organizations Maintaining	Collections of	Art, His	torical	Treasures,	or O	ther Similar A	ssets	(conti	nued)
3	Using the organization's acquisition, access	ion, and other recor	ds, check	any of the f	ollowing that n	nake si	gnificant use of its			
	collection items (check all that apply):			·	-		-			
а	Public exhibition		d	□ Loan o	r exchange pro	ogram				
b	Scholarly research		e	Other	g- p	J				
c	Preservation for future generations		·							_
4	Provide a description of the organization's c	allactions and avala	in how tho	v further th	o organization	's ovon	ent nurnese in Par			
-	XIII.	oliections and expla	iii iiow tiic	y iui ii iei ii i	e organization	3 CACII	ipt purpose iii i ai	<u>.</u>		
-		r receive denetions	of out bio	tariaal traas	ouraa ar athar	مانسنامہ				
5	During the year, did the organization solicit o				•				Г	7 N.
Dar	assets to be sold to raise funds rather than t		part of the	organizati	on's collection	<i>(</i>		. <u> </u>	es [No
rai		•	" on For	m 000 E	Oort IV/ line	0 or 1	concreted on an	ount c	n Ea	rm
	Complete if the organization	answered res	OHFO	III 990, F	art iv, iiie	9, 01 1	eponeu an an	iourit c	шго	1111
	990, Part X, line 21.									
1a	Is the organization an agent, trustee, custod		-						_	_
	included on Form 990, Part X?					• • •		. ∐ Y	es [_ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing ta	ble:						
							Am	ount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on F	orm 990, Part X, lin	e 21, for e	scrow or c	ustodial accou	nt liabil	ity?	. 🗌 Y	es [No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the	explanation	n has been	provided on P	art XIII			[
Par	t V Endowment Funds.									
	Complete if the organization	answered "Yes"	on For	m 990, F	Part IV, line	10.				
		(a) Current year	(b) Pr	ior year	(c) Two years b	oack	(d) Three years back	(e) Fo	our years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
e	Other expenditures for facilities and									
	programs									
f	Administrative expenses							+		
	End of year balance							+		
g 2	Provide the estimated percentage of the cur	ront year and halan	oo (lino 1a	column (c)) hold as:					
	Board designated or quasi-endowment	%	ce (iiile 19	, column (e	i)) lielu as.					
a										
b										
С										
_	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	are held ar	nd administere	d for th	e			T
	organization by:								Yes	No
	(i) Unrelated organizations							- 3a(' 	
	(ii) Related organizations							. 3a(i	i)	
b	If "Yes" on line 3a(ii), are the related organiz							. 3b		
4	Describe in Part XIII the intended uses of the		owment fu	ınds.						
Par										
	Complete if the organization	answered "Yes"	on For	m 990, F	art IV, line	11a. S	See Form 990,	Part X	, line	10.
	Description of property	(a) Cost or oth		1 ' '	r other basis		Accumulated	(d) B	ook valu	е
		(investm	ent)	(other)	de	epreciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
е	Other									

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

Schedule D (Fo		ciation			86	6-2654210	Page
Part VII	Investments - Other Securities.						
	Complete if the organization answered "Ye	es" on Form	990, Part	t IV, line	11b. See For	m 990, Part X,	line 12.
	(a) Description of security or category (including name of security)		(b) Book val	lue	` '	Method of valuation: end-of-year market value	•
(1) Financial	derivatives						
(2) Closely-h	eld equity interests						
(3) Other							
(A)							
(B)							
(C)							
(D)							
(E)							
(F)							
(G)							
(H)				-			
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related.						
Fait VIII	Complete if the organization answered "Ye	oc" on Form	000 Part	t IV/ line	11c Soc For	m 000 Part V	lino 12
	Complete if the organization answered Te	55 011 F01111	990, Fait	l IV, IIIIe	TIC. See For	111 990, Fait A,	illie 13.
	(a) Description of investment		(b) Book val	lue	• • •	Method of valuation: end-of-year market value	,
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(8)							
(9)				_			
Part IX	n (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.						
Faitin	Complete if the organization answered "Ye	es" on Form	000 Part	t IV/ line	11d See For	m 000 Part Y	line 15
			330, Fait	t IV, IIIIC	ritu. See i oi		
	(a) Descriptio	on				(b) Book	value
(1) (2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
	n (b) must equal Form 990, Part X, col. (B) line 15.)						
Part X	Other Liabilities.					•	
	Complete if the organization answered "Ye line 25.	es" on Form	990, Part	t IV, line	11e or 11f. S	ee Form 990, F	Part X,
1.	(a) Description of liability	(b) Book value	e				

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2payroll Liabilities	1,216
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,216

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

	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains (losses) on investments 2a	
b	Donated services and use of facilities	
С	Recoveries of prior year grants	1
d	Other (Describe in Part XIII.) 2d	1
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	1 1
С	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	
b	Prior year adjustments	1 1
С	Other losses	
d	Other (Describe in Part XIII.) 2d	1
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
С	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5
Part		•
Provide	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; I	Part X line
2: Part	XI. lines 2d and 4b; and Part XII. lines 2d and 4b. Also complete this part to provide any additional information.	i dit A, iiilo
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	i dit X, iiio
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	i dita, iiie
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	i dita, iiie
2; Part ———	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	Tarry, me
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	Tarry, ine
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	, arcx, me
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	

Schedule D (Form 990) 2022

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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 86-2654210 World Forest ID Association 01. Committee meeting documentation (Part VI, line 8b) WFID had a board of directors, but no committees, but no subcommittees. 02. Form 990 governing body review (Part VI, line 11) The draft of the 990 was emailed to all members of the board of directors. 03. Officer, director, etc mailing address (Part VI, line 9) Richard Guillerv 1 Thomas Circle NW, Suite 700, DC 20005 612-770-7679 04. Conflict of interest policy compliance (Part VI, line 12c) Board members signed an agreement upon joining the board, stating that conflicts of interest would be reported if they arose. 05. CEO, executive director, top management comp (Part VI, line 15a) The board of directors reviewed and approved the compensation for the Executive Director. 06. Other officer or key employee compensation (Part VI, line 15b The board of directors reviewed and approved the compensation for other employees through the budgeting process. 07. Governing documents, etc, available to public (Part VI, line 19) Available upon request

Name of the organization World Forest ID Association	Employer identification number 86–2654210
08. Explanation of other changes in net assets or fund balances (Part XI,	line 9)
Cash to Accrual change in accounting: \$77,133	