Form **990**

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)**

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No. 1545-0047

**2006**

**Open to Public Inspection**

**A For the 2006 calendar year, or tax year beginning** 07/01, **2006, and ending** 06/30/2007

**B** Check if applicable: Address change [ ]; Name change [ ]; Initial return [X]; Final return [ ]; Amended return [ ]; Application pending [ ]

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization: WORLD ECONOMIC FORUM USA INC

Number and street (or P O box if mail is not delivered to street address): 3 EAST 54TH STREET — Room/suite: 17TH FL

City or town, state or country, and ZIP + 4: NEW YORK, NY 10022

**D Employer identification number** 23-3908371

**E Telephone number** (212)703-2323

**F** Accounting method: [ ] Cash [X] Accrual [ ] Other (specify) ▶

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

*H and I are not applicable to section 527 organizations*

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? [ ] Yes [ ] No (If "No," attach a list See instructions )

H(d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

**G** Website: ▶ WWW.WEFORUM.ORG/FORUMUSA

**J** Organization type (check only one) ▶ [X] 501(c)( 6 ) ◀ (insert no ) [ ] 4947(a)(1) or [ ] 527

**I** Group Exemption Number ▶

**K** Check here ▶ [ ] if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than $25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

**M** Check ▶ [X] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 7,268,496.

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received | | | | | |
| | a | Contributions to donor advised funds | 1a | | | | |
| | b | Direct public support (not included on line 1a) | 1b | | | | |
| | c | Indirect public support (not included on line 1a) | 1c | | | | |
| | d | Government contributions (grants) (not included on line 1a) | 1d | | | | |
| | e | Total (add lines 1a through 1d) (cash $ ____ noncash $ ____ ) | | | | 1e | |
| | 2 | Program service revenue including government fees and contracts (from Part VII, line 93) | | | | 2 | |
| | 3 | Membership dues and assessments STMT 1 | | | | 3 | 6,109,192. |
| | 4 | Interest on savings and temporary cash investments | | | | 4 | 43,030. |
| | 5 | Dividends and interest from securities | | | | 5 | |
| | 6 a | Gross rents | 6a | | | | |
| | b | Less. rental expenses | 6b | | | | |
| | c | Net rental income or (loss) Subtract line 6b from line 6a | | | | 6c | |
| | 7 | Other investment income (describe ▶ ) | | | | 7 | |
| | 8 a | Gross amount from sales of assets other than inventory | (A) Securities: | 8a | (B) Other: | | |
| | b | Less cost or other basis and sales expenses | | 8b | | | |
| | c | Gain or (loss) (attach schedule) | | 8c | | | |
| | d | Net gain or (loss). Combine line 8c, columns (A) and (B) | | | | 8d | |
| | 9 | Special events and activities (attach schedule). If any amount is from gaming, check here ▶ [ ] | | | | | |
| | a | Gross revenue (not including $ ____ of contributions reported on line 1b) | 9a | | | | |
| | b | Less direct expenses other than fundraising expenses | 9b | | | | |
| | c | Net income or (loss) from special events Subtract line 9b from line 9a | | | | 9c | |
| | 10 a | Gross sales of inventory, less returns and allowances | 10a | | | | |
| | b | Less cost of goods sold | 10b | | | | |
| | c | Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a | | | | 10c | |
| | 11 | Other revenue (from Part VII, line 103) | | | | 11 | 1,116,274. |
| | 12 | **Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 | | | | 12 | 7,268,496. |
| Expenses | 13 | Program services (from line 44, column (B)) | | | | 13 | 4,593,712. |
| | 14 | Management and general (from line 44, column (C)) | | | | 14 | 3,384,262. |
| | 15 | Fundraising (from line 44, column (D)) | | | | 15 | NONE |
| | 16 | Payments to affiliates (attach schedule) | | | | 16 | |
| | 17 | **Total expenses** Add lines 16 and 44, column (A) | | | | 17 | 7,977,974. |
| Net Assets | 18 | Excess or (deficit) for the year. Subtract line 17 from line 12 | | | | 18 | -709,478. |
| | 19 | Net assets or fund balances at beginning of year (from line 73, column (A)) | | | | 19 | NONE |
| | 20 | Other changes in net assets or fund balances (attach explanation) | | | | 20 | |
| | 21 | Net assets or fund balances at end of year Combine lines 18, 19, and 20 | | | | 21 | -709,478. |

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**Part II Statement of Functional Expenses** All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

| *Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I* | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
|---|---|---|---|---|---|
| 22a Grants paid from donor advised funds (attach schedule) (cash $ ___ noncash $ ___) If this amount includes foreign grants, check here ▶ ☐ | 22a | | | | |
| 22b Other grants and allocations (attach schedule) (cash $ ___ noncash $ ___) If this amount includes foreign grants, check here ▶ ☐ | 22b | | | | |
| 23 Specific assistance to individuals (attach schedule) | 23 | | | | |
| 24 Benefits paid to or for members (attach schedule) | 24 | | | | |
| 25a Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule) STMT 2 | 25a | 855,917. | NONE | 855,917. | NONE |
| b Compensation of former officers, directors, key employees, etc listed in Part V-B (attach schedule) | 25b | | | | |
| c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) | 25c | | | | |
| 26 Salaries and wages of employees not included on lines 25a, b, and c | 26 | 1,838,940. | 1,402,802. | 436,138. | NONE |
| 27 Pension plan contributions not included on lines 25a, b, and c | 27 | 131,192. | 102,269. | 28,923. | NONE |
| 28 Employee benefits not included on lines 25a - 27 | 28 | 107,971. | 48,316. | 59,655. | NONE |
| 29 Payroll taxes | 29 | 172,173. | 96,599. | 75,574. | NONE |
| 30 Professional fundraising fees | 30 | | | | |
| 31 Accounting fees | 31 | 473,405. | NONE | 473,405. | NONE |
| 32 Legal fees | 32 | 141,089. | NONE | 141,089. | NONE |
| 33 Supplies | 33 | 20,150. | 360. | 19,790. | NONE |
| 34 Telephone | 34 | 94,351. | 42,749. | 51,602. | NONE |
| 35 Postage and shipping | 35 | | | | |
| 36 Occupancy | 36 | 126,656. | NONE | 126,656. | NONE |
| 37 Equipment rental and maintenance | 37 | 219,039. | 41,620. | 177,419. | NONE |
| 38 Printing and publications | 38 | 4,700. | 2,300. | 2,400. | NONE |
| 39 Travel | 39 | 1,142,269. | 698,423. | 443,846. | NONE |
| 40 Conferences, conventions, and meetings | 40 | 114,638. | 99,268. | 15,370. | NONE |
| 41 Interest | 41 | 12,670. | NONE | 12,670. | NONE |
| 42 Depreciation, depletion, etc (attach schedule) | 42 | 5,890. | NONE | 5,890. | NONE |
| 43 Other expenses not covered above (itemize) | | | | | |
| a OTHER STAFF EXPENSE | 43a | 123,539. | 31,415. | 92,124. | NONE |
| b OTHER COMMUNICATION EXPEN | 43b | 25,596. | 16,621. | 8,975. | NONE |
| c PUBLIC RELATIONS | 43c | 103,982. | 62,126. | 41,856. | NONE |
| d OTHER ADMINISTRATIVE COST | 43d | 758,164. | 715,623. | 42,541. | NONE |
| e OTHER CONSULTING FEES | 43e | 1,505,643. | 1,233,221. | 272,422. | NONE |
| f | 43f | | | | |
| g | 43g | | | | |
| 44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) | 44 | 7,977,974. | 4,593,712. | 3,384,262. | NONE |

**Joint Costs.** Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $ ______ , (ii) the amount allocated to Program services $ ______ ,

(iii) the amount allocated to Management and general $ ______ , and (iv) the amount allocated to Fundraising $ ______

**Part III** **Statement of Program Service Accomplishments** *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

| What is the organization's primary exempt purpose? ▶SEE STATEMENT 3<br>All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others ) | Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others ) |
|---|---|
| a FINANCIAL INSTITUTIONS PROGRAMS<br>(Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | 2,868,185. |
| b HEALTHCARE SECTOR PROGRAMS<br>(Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | 794,414. |
| c CENTER FOR GLOBAL INDUSTRIES PROGRAMS<br>(Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | 589,616. |
| d MEDIA AND ENTERTAINMENT SECTOR PROGRAMS<br>(Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | 240,981. |
| e Other program services (attach schedule) SEE STATEMENT 4<br>(Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | 100,516. |
| f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) . . . . . . . ▶ | 4,593,712. |

## Part IV Balance Sheets *(See the instructions.)*

| Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.* | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|
| **Assets** | | | | | |
| 45 | Cash - non-interest-bearing | | NONE | 45 | NONE |
| 46 | Savings and temporary cash investments | | NONE | 46 | 602,788. |
| 47 a | Accounts receivable | 47a 1,275,385. | | | |
| b | Less. allowance for doubtful accounts | 47b | NONE | 47c | 1,275,385. |
| 48 a | Pledges receivable | 48a | | | |
| b | Less: allowance for doubtful accounts | 48b | | 48c | |
| 49 | Grants receivable | | | 49 | |
| 50 a | Receivables from current and former officers, directors, trustees, and key employees (attach schedule) | | | 50a | |
| b | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) | | | 50b | |
| 51 a | Other notes and loans receivable (attach schedule) | 51a | | | |
| b | Less. allowance for doubtful accounts | 51b | | 51c | |
| 52 | Inventories for sale or use | | | 52 | |
| 53 | Prepaid expenses and deferred charges STMT. 5 | | NONE | 53 | 1,107,254. |
| 54 a | Investments - publicly-traded securities ▶ ☐ Cost ☐ FMV | | | 54a | |
| b | Investments - other securities (attach schedule) ▶ ☐ Cost ☐ FMV | | | 54b | |
| 55 a | Investments - land, buildings, and equipment basis | 55a 329,464. | | | |
| b | Less accumulated depreciation (attach schedule) | 55b 5,890. | NONE | 55c | 323,574. |
| 56 | Investments - other (attach schedule) | | | 56 | |
| 57 a | Land, buildings, and equipment: basis | 57a | | | |
| b | Less: accumulated depreciation (attach schedule) | 57b | | 57c | |
| 58 | Other assets, including program-related investments (describe ▶ STMT 6 ) | | NONE | 58 | 295,742. |
| 59 | **Total assets** (must equal line 74). Add lines 45 through 58 | | NONE | 59 | 3,604,743. |
| **Liabilities** | | | | | |
| 60 | Accounts payable and accrued expenses | | NONE | 60 | 1,140,662. |
| 61 | Grants payable | | | 61 | |
| 62 | Deferred revenue STMT. 7 | | NONE | 62 | 2,749,525. |
| 63 | Loans from officers, directors, trustees, and key employees (attach schedule) | | | 63 | |
| 64 a | Tax-exempt bond liabilities (attach schedule) | | | 64a | |
| b | Mortgages and other notes payable (attach schedule) STMT. 8 | | | 64b | 406,908. |
| 65 | Other liabilities (describe ▶ STMT 9 ) | | NONE | 65 | 17,126. |
| 66 | **Total liabilities.** Add lines 60 through 65 | | NONE | 66 | 4,314,221. |
| **Net Assets or Fund Balances** | | | | | |
| | **Organizations that follow SFAS 117, check here** ▶ [X] and complete lines 67 through 69 and lines 73 and 74. | | | | |
| 67 | Unrestricted | | NONE | 67 | -709,478. |
| 68 | Temporarily restricted | | | 68 | |
| 69 | Permanently restricted | | | 69 | |
| | **Organizations that do not follow SFAS 117, check here** ▶ ☐ and complete lines 70 through 74 | | | | |
| 70 | Capital stock, trust principal, or current funds | | | 70 | |
| 71 | Paid-in or capital surplus, or land, building, and equipment fund | | | 71 | |
| 72 | Retained earnings, endowment, accumulated income, or other funds | | | 72 | |
| 73 | **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21) | | NONE | 73 | -709,478. |
| 74 | **Total liabilities and net assets/fund balances.** Add lines 66 and 73 | | NONE | 74 | 3,604,743. |

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** *(See the instructions.)*

| | | | | | |
|---|---|---|---|---|---|
| a | Total revenue, gains, and other support per audited financial statements | | | a | 7,268,496. |
| b | Amounts included on line a but not on Part I, line 12: | | | | |
| 1 | Net unrealized gains on investments | b1 | | | |
| 2 | Donated services and use of facilities | b2 | | | |
| 3 | Recoveries of prior year grants | b3 | | | |
| 4 | Other (specify): | b4 | | | |
| | Add lines b1 through b4 | | | b | |
| c | Subtract line b from line a | | | c | 7,268,496. |
| d | Amounts included on Part I, line 12, but not on line a: | | | | |
| 1 | Investment expenses not included on Part I, line 6b | d1 | | | |
| 2 | Other (specify): | d2 | | | |
| | Add lines d1 and d2 | | | d | |
| e | **Total revenue** (Part I, line 12). Add lines c and d ▶ | | | e | 7,268,496. |

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

| | | | | | |
|---|---|---|---|---|---|
| a | Total expenses and losses per audited financial statements | | | a | 7,977,974. |
| b | Amounts included on line a but not on Part I, line 17: | | | | |
| 1 | Donated services and use of facilities | b1 | | | |
| 2 | Prior year adjustments reported on Part I, line 20 | b2 | | | |
| 3 | Losses reported on Part I, line 20 | b3 | | | |
| 4 | Other (specify): | b4 | | | |
| | Add lines b1 through b4 | | | b | |
| c | Subtract line b from line a | | | c | 7,977,974. |
| d | Amounts included on Part I, line 17, but not on line a: | | | | |
| 1 | Investment expenses not included on Part I, line 6b | d1 | | | |
| 2 | Other (specify): | d2 | | | |
| | Add lines d1 and d2 | | | d | |
| e | **Total expenses** (Part I, line 17). Add lines c and d ▶ | | | e | 7,977,974. |

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (If not paid, enter -0-) | (D) Contributions to employee benefit plans & deferred compensation plans | (E) Expense account and other allowances |
|---|---|---|---|---|
| SEE STATEMENT 10 | | 796,667. | 59,250. | NONE |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
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| | | | | |
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## Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 75a | Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 5 | | | |
| b | Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) | 75b | | X |
| c | Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶ | 75c | | X |
| | If "Yes," attach a statement that includes the information described in the instructions. | | | |
| d | Does the organization have a written conflict of interest policy? | 75d | X | |

## Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions )

| (A) Name and address | (B) Loans and Advances | (C) Compensation (if not paid, enter -0-) | (D) Contributions to employee benefit plans & deferred compensation plans | (E) Expense account and other allowances |
|---|---|---|---|---|
| | -0- | -0- | -0- | -0- |
| | | | | |
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## Part VI Other Information *(See the instructions.)*

| | | | Yes | No |
|---|---|---|---|---|
| 76 | Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change | 76 | | X |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. | 77 | | X |
| 78a | Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return? | 78a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 78b | N/A | |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement | 79 | | X |
| 80a | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization? | 80a | | X |
| b | If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt or ☐ nonexempt | | | |
| 81a | Enter direct and indirect political expenditures. (See line 81 instructions.) 81a | | | |
| b | Did the organization file Form 1120-POL for this year? | 81b | | X |

**Part VI Other Information** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 82 a | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? | 82a | | X |
| b | If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III ) — 82b N/A | | | |
| 83 a | Did the organization comply with the public inspection requirements for returns and exemption applications? | 83a | X | |
| b | Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions? | 83b | N/A | |
| 84 a | Did the organization solicit any contributions or gifts that were not tax deductible? | 84a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 84b | N/A | |
| 85 | *501(c)(4), (5), or (6) organizations* a Were substantially all dues nondeductible by members? | 85a | | X |
| b | Did the organization make only in-house lobbying expenditures of $2,000 or less? | 85b | | X |
| | If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year | | | |
| c | Dues, assessments, and similar amounts from members — 85c N/A | | | |
| d | Section 162(e) lobbying and political expenditures — 85d N/A | | | |
| e | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e N/A | | | |
| f | Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f N/A | | | |
| g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? | 85g | N/A | |
| h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? | 85h | N/A | |
| 86 | *501(c)(7) orgs* Enter a Initiation fees and capital contributions included on line 12 — 86a N/A | | | |
| b | Gross receipts, included on line 12, for public use of club facilities — 86b N/A | | | |
| 87 | *501(c)(12) orgs* Enter a Gross income from members or shareholders — 87a N/A | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) — 87b N/A | | | |
| 88 b | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX | 88a | | X |
| b | At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI ▶ | 88b | | X |
| 89 a | *501(c)(3) organizations* Enter· Amount of tax imposed on the organization during the year under section 4911 ▶ N/A , section 4912 ▶ N/A , section 4955 ▶ N/A | | | |
| b | *501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction | 89b | N/A | |
| c | Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ N/A | | | |
| d | Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ N/A | | | |
| e | *All organizations* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? | 89e | | X |
| f | *All organizations* Did the organization acquire a direct or indirect interest in any applicable insurance contract? | 89f | | X |
| g | *For supporting organizations and sponsoring organizations maintaining donor advised funds* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 89g | N/A | |

90 a List the states with which a copy of this return is filed ▶

b Number of employees employed in the pay period that includes March 12, 2006 (See instructions ) 90b 26

91 a The books are in care of ▶ KEVIN STEINBERG Telephone no ▶ 212-703-2323

Located at ▶ 3 EAST 54TH STREET 17TH FL NEW YORK, NY ZIP + 4 ▶ 10022

| | | | Yes | No |
|---|---|---|---|---|
| b | 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)? | 91b | | X |
| | If "Yes," enter the name of the foreign country ▶ | | | |
| | See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts. | | | |



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**Part VI Other Information** *(continued)*

| | | Yes | No |
|---|---|---|---|
| c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ | 91c | | X |
| 92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041** - Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ | 92 | | N/A |

**Part VII Analysis of Income-Producing Activities** *(See the instructions.)*

| **Note:** *Enter gross amounts unless otherwise indicated* | Unrelated business income | | Excluded by section 512, 513, or 514 | | (E) Related or exempt function income |
|---|---|---|---|---|---|
| | (A) Business code | (B) Amount | (C) Exclusion code | (D) Amount | |
| 93 Program service revenue. | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| f Medicare/Medicaid payments | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 94 Membership dues and assessments | | | | | 6,109,192. |
| 95 Interest on savings and temporary cash investments | | | 14 | 43,030. | |
| 96 Dividends and interest from securities | | | | | |
| 97 Net rental income or (loss) from real estate | | | | | |
| a debt-financed property | | | | | |
| b not debt-financed property | | | | | |
| 98 Net rental income or (loss) from personal property | | | | | |
| 99 Other investment income | | | | | |
| 100 Gain or (loss) from sales of assets other than inventory | | | | | |
| 101 Net income or (loss) from special events | | | | | |
| 102 Gross profit or (loss) from sales of inventory | | | | | |
| 103 Other revenue a | | | | | |
| b CONSULTING INCOME | | | | | 998,483. |
| c EXCHANGE LOSS | | | 01 | -15,542. | |
| d DIRECT FUNDING | | | | | 133,333. |
| e | | | | | |
| 104 Subtotal (add columns (B), (D), and (E)) | | | | 27,488. | 7,241,008. |

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 7,268,496.

**Note:** *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I*

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** *(See the instructions.)*

| Line No. ▼ | Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes) |
|---|---|
| | STMT 12 |
| | |
| | |

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** *(See the instructions.)*

| (A) Name, address, and EIN of corporation, partnership, or disregarded entity | (B) Percentage of ownership interest | (C) Nature of activities | (D) Total income | (E) End-of-year assets |
|---|---|---|---|---|
| | % | | | |
| | % | | | |
| | % | | | |
| | % | | | |

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** *(See the instructions.)*

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

**Note:** *If "Yes" to* **(b)**, *file Form 8870* **and** *Form 4720 (see instructions).*

**Part XI** **Information Regarding Transfers To and From Controlled Entities.** *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

| | | Yes | No |
|---|---|---|---|
| 106 | Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. | | X |

| | (A) Name, address, of each controlled entity | (B) Employer Identification Number | (C) Description of transfer | (D) Amount of transfer |
|---|---|---|---|---|
| a | | | | |
| b | | | | |
| c | | | | |
| | Totals | | | |

| | | Yes | No |
|---|---|---|---|
| 107 | Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. | | X |

| | (A) Name, address, of each controlled entity | (B) Employer Identification Number | (C) Description of transfer | (D) Amount of transfer |
|---|---|---|---|---|
| a | | | | |
| b | | | | |
| c | | | | |
| | Totals | | | |

| | | Yes | No |
|---|---|---|---|
| 108 | Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? | | X |

**Please Sign Here**

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.

Signature of officer — Date May 9, 2008

Kevin Sternberg, Chief Operating Officer
Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature — Date [redacted]

Firm's name (or yours if self-employed), address, and ZIP + 4: MITCHELL & TITUS, LLP
ONE BATTERY PARK PLAZA
NEW YORK, NY

FORM 990, PART I - MEMBERSHIP DUES AND ASSESSMENTS

| DESCRIPTION | AMOUNT |
|---|---|
| MEMBERSHIP FEES | 6,109,192. |
| TOTAL | 6,109,192. |

STATEMENT 1

FORM 990, PART II, LINE 25A - CURRENT OFFICER COMPENSATION SCHEDULE

| CURRENT OFFICER NAME | PROGRAM SERVICES | MANAGEMENT AND GENERAL | FUNDRAISING |
|---|---|---|---|
| JOHN MOAVENZADEH Date of Hire: 1/1/2007 | | | |
| COMPENSATION: | NONE | 129,000. | NONE |
| CONTRIBUTIONS TO BENEFIT PLANS: | NONE | 12,900. | NONE |
| SARITA NAYYAR Date of Hire: 3/1/2007 | | | |
| COMPENSATION: | NONE | 86,000. | NONE |
| CONTRIBUTIONS TO BENEFIT PLANS: | NONE | 8,600. | NONE |
| JEAN PIERRE ROSSO | | | |
| COMPENSATION: | NONE | 206,667. | NONE |
| CONTRIBUTIONS TO BENEFIT PLANS: | NONE | NONE | NONE |
| KEVIN STEINBERG | | | |
| COMPENSATION: | NONE | 375,000. | NONE |
| CONTRIBUTIONS TO BENEFIT PLANS: | NONE | 37,750. | NONE |
| EXPENSE ACCOUNT: | NONE | NONE | NONE |
| TOTALS | NONE | 855,917. | NONE |

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
==========================================================

THE WORLD ECONOMIC FORUM USA INC. ("FORUM USA") IS A BUSINESS LEAGUE OF ORGANIZATIONS FORMED FOR THE PURPOSE OF ENHANCING THE GLOBAL BUSINESS CLIMATE BY IMPROVING THE STATE OF THE WORLD. TO ACCOMPLISH THIS GOAL, THE FORUM USA ENGAGES LEADERS FROM VARIOUS INDUSTRIES IN COLLABORATIVE ARRANGEMENTS TO SHAPE GLOBAL,REGIONAL AND INDUSTRY AGENDAS, SUCH AS INCREASING EMPLOYMENT AND ECONOMIC ACTIVITY AND BETTER INTEGRATING THE PRIVATE SECTOR WITH CIVIL SOCIETY.

FORM 990, PART III - OTHER PROGRAM SERVICES (LINE E)

| DESCRIPTION | GRANTS AND ALLOCATIONS | EXPENSES |
| --- | --- | --- |
| INFORMATION TECHNOLOGY & TELECOMMUNICATIONS SECTOR PROGRAMS | | 100,516. |
| TOTALS | | 100,516. |

FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES

| DESCRIPTION | | ENDING BOOK VALUE |
|---|---|---|
| PREPAID EXPENSES | | 47,629. |
| PREPAID INSURANCE | | 52,610. |
| PREPAID RENT | | 43,275. |
| DEFERRED CHARGES | | 963,740. |
| | TOTALS | 1,107,254. |

## FORM 990, PART IV - OTHER ASSETS

| DESCRIPTION | ENDING BOOK VALUE |
|---|---|
| EMPLOYEE LOANS RECEIVABLES | 13,975. |
| VAT RECEIVABLES | 41,752. |
| TRANSIT CHECK RECEIVABLE | 2,487. |
| EXPENSE ADVANCES TO PERSONNEL | 832. |
| RECEIVABLES FROM MA STATE | 305. |
| RECEIVABLE FROM PAYCHEX | 13,054. |
| RECEIVABLES FROM VENDORS | 6,626. |
| RECEIVABLE FROM EMPLOYEES | 336. |
| SECURITY DEPOSIT | 216,375. |
| TOTALS | 295,742. |

## FORM 990, PART IV - DEFERRED REVENUE

| DESCRIPTION | ENDING BOOK VALUE |
|---|---|
| DEFERRED RENT | 60,609. |
| DEFERRED REVENUE | 2,688,916. |
| TOTALS | 2,749,525. |

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

LENDER: WORLD ECONOMIC FORUM
INTEREST RATE: 0.032000
MATURITY DATE: 06/30/2008
REPAYMENT TERMS: INTEREST PAYABLE IN TWO EQUAL INSTALLMENTS
ENDING BALANCE DUE ........................................ 406,908.

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 406,908.

WORLD ECONOMIC FORUM USA INC 23-3908371

FORM 990, PART IV - OTHER LIABILITIES

| DESCRIPTION | ENDING BOOK VALUE |
|---|---|
| SUSPENSE ACCOUNT | 7,327. |
| FLEX SPENDING CONTRIBUTION | 9,799. |
| TOTALS | 17,126. |

STATEMENT 9

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

| NAME AND ADDRESS | TITLE AND TIME DEVOTED TO POSITION | COMPENSATION | CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | EXPENSE ACCT AND OTHER ALLOWANCES |
|---|---|---|---|---|
| JOHN MOAVENZADEH<br>3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | SENIOR DIR/HEAD OF SUSTAINABLE<br>40.00 | 129,000. | 12,900. | NONE |
| SARITA NAYYAR<br>3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | SENIOR DIR/HEAD OF CONSUMER<br>40.00 | 86,000. | 8,600. | NONE |
| AL BERKELEY<br>3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | BOARD MEMBER<br>0.33 | NONE | NONE | NONE |
| WILLIAM GEORGE<br>3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | BOARD MEMBER<br>0.33 | NONE | NONE | NONE |
| RAJAT GUPTA<br>3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | BOARD MEMBER<br>0.33 | NONE | NONE | NONE |
| JOE SCHOENDORF | BOARD MEMBER<br>0.33 | NONE | NONE | NONE |

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

| NAME AND ADDRESS | TITLE AND TIME DEVOTED TO POSITION | COMPENSATION | CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | EXPENSE ACCT AND OTHER ALLOWANCES |
|---|---|---|---|---|
| 3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | | | | |
| JEAN PIERRE ROSSO<br>3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | CHAIRMAN<br>26.00 | 206,667. | NONE | NONE |
| KEVIN STEINBERG<br>3 EAST 54TH STREET<br>17TH FL<br>NEW YORK, NY 10022 | CHIEF OPERATING OFFICER<br>40.00 | 375,000. | 37,750. | NONE |
| | GRAND TOTALS | 796,667. | 59,250. | NONE |

## FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

| LINE NO. | EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES |
|---|---|
| 94 | THE MEMBERSHIP RECEIPTS ARE USED TO ACCOMPLISH THE ORGANIZATION'S PRIMARY GOAL OF IMPROVING GLOBAL BUSINESS AND THE STATE OF THE WORLD. |
| 103B | CONSULTING INCOME IS USED TO SUPPORT THE ORGANIZATION'S GOAL OF IMPROVING GLOBAL BUSINESS AND THE STATE OF THE WORLD. |
| 103C | DIRECT FUNDING USED TO FUND SPECIAL PROGRAMS OF THE ORGANIZATION. |