

Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning , and ending

Name of foundation WORLD COCOA FOUNDATION INC		A Employer identification number 54-1715875
Number and street (or P.O. box number if mail is not delivered to street address) 1025 CONNECTICUT AVE, NW	Room/suite 1205	B Telephone number 2027377870
City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036		C If exemption application is pending, check here ... <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 8,153,149.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>		

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	4,882,699.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	105,619.	105,619.	105,619.	STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	2,680,751.	0.	2,680,751.	STATEMENT 2	
12 Total. Add lines 1 through 11	7,669,069.	105,619.	2,786,370.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	450,291.	0.	0.	450,291.
	14 Other employee salaries and wages	2,554,798.	0.	102,540.	2,413,736.
	15 Pension plans, employee benefits	802,629.	0.	26,481.	765,648.
	16a Legal fees STMT 3	241,562.	0.	0.	281,884.
	b Accounting fees STMT 4	37,262.	0.	0.	46,607.
	c Other professional fees STMT 5	2,864,961.	0.	141,197.	2,622,047.
	17 Interest				
	18 Taxes STMT 6	23,690.	0.	0.	23,838.
	19 Depreciation and depletion	39,312.	0.	0.	
	20 Occupancy	276,856.	0.	0.	330,303.
	21 Travel, conferences, and meetings	781,235.	0.	129,527.	654,058.
	22 Printing and publications				
	23 Other expenses STMT 7	3,657,474.	68,563.	111,012.	3,691,380.
	24 Total operating and administrative expenses. Add lines 13 through 23	11,730,070.	68,563.	510,757.	11,279,792.
	25 Contributions, gifts, grants paid	0.			0.
26 Total expenses and disbursements. Add lines 24 and 25	11,730,070.	68,563.	510,757.	11,279,792.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-4,061,001.				
b Net investment income (if negative, enter -0-)		37,056.			
c Adjusted net income (if negative, enter -0-)			2,275,613.		

Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	2,316,867.	340,082.	340,082.
	2 Savings and temporary cash investments	4,708,527.	5,962,813.	5,962,813.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable	4,659,074.	1,506,917.	1,506,917.
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	145,411.	170,005.	170,005.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis ▶ 337,539.				
Less: accumulated depreciation ▶ 214,736.	45,155.	122,803.	122,803.	
15 Other assets (describe ▶ SECURITY DEPOSITS)	15,936.	50,529.	50,529.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	11,890,970.	8,153,149.	8,153,149.	
Liabilities	17 Accounts payable and accrued expenses	1,038,441.	682,200.	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶	878,681.	1,558,102.	
23 Total liabilities (add lines 17 through 22)	1,917,122.	2,240,302.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	2,082,982.	2,784,193.	
	25 Net assets with donor restrictions	7,890,866.	3,128,654.	
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances	9,973,848.	5,912,847.		
30 Total liabilities and net assets/fund balances	11,890,970.	8,153,149.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	9,973,848.
2 Enter amount from Part I, line 27a	2	-4,061,001.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	5,912,847.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	5,912,847.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b	NONE			
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	8,256,079.	0.	.000000
2017	8,814,799.	0.	.000000
2016	10,513,708.	0.	.000000
2015	10,257,640.	0.	.000000
2014	12,304,933.	157,868.	77.944441
2 Total of line 1, column (d)			2 77.944441
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			3 15.588888
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			4
5 Multiply line 4 by line 3			5 0.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 371.
7 Add lines 5 and 6			7 371.
8 Enter qualifying distributions from Part XII, line 4			8 11,396,752.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
 See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	371.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	371.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	371.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	0.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	371.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> <u>DC, VA</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation <u>SEE STATEMENT 9</u>		X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	X	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.WORLDCOCOA.ORG	X	
14 The books are in care of ► THERESA RODRIGUEZ- WORLD COCOA FND Telephone no. ► 202-559-4395 Located at ► 1025 CONNECTICUT AVE., NW # 1205, WASHINGTON, DC ZIP+4 ► 20036		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year		N/A
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ► SEE STATEMENT 10	X	

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		X
Organizations relying on a current notice regarding disaster assistance, check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)		N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)		N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	
Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
If "Yes" to 6b, file Form 8870.		
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(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 and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 11		450,291.	55,381.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
TIMOTHY MCCOY - 1025 CONNECTICUT AVE., NW # 1205, WASHINGTON, DC	VP FOR COUNTRY RELATIONS 44.00	260,690.	36,833.	0.
PAUL MACEK - 1025 CONNECTICUT AVE., NW # 1205, WASHINGTON, DC 20036	VP FOR PROGRAMS 44.00	231,789.	65,584.	0.
ADAM MAYAKI - 1025 CONNECTICUT AVE., NW # 1205, WASHINGTON, DC 20036	SR. DIR. OF FINANCE AND OPERATIONS 44.00	175,872.	51,182.	0.
ETHAN BUDIANSKY - 1025 CONNECTICUT AVE., NW # 1205, WASHINGTON, DC	ENVIRONMENT DIRECTOR 44.00	123,904.	31,694.	0.
MICHAEL MATARASSO - 1025 CONNECTICUT AVE., NW # 1205, WASHINGTON, DC	MONITORING & EVALUATION DIRECTOR 44.00	127,325.	24,741.	0.
Total number of other employees paid over \$50,000				10

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
DALBERG CONSULTING US LLC - 155 WEST 23RD STREET, 6TH FLOOR, NEW YORK, NY 10011	CONSULTING	386,000.
P&A LTDA. - PRACA RIO BRANCO, 13-SALA-2-CENTRO, ESPIRITO SANTO DO PINHAL	CONSULTING	275,000.
HOGAN LOVELLS US LLP - COLUMBIA SQ. 555 13TH ST NW, WASHINGTON, DC 20004	CONSULTING	180,000.
NORC AT THE UNIV. OF CHICAGO - 55 EAST MONROE STREET, 20TH FLOOR, CHICAGO, IL 60603	CONSULTING	170,172.
PRIO EVENT MANAGEMENT GMBH BUDAPESTER STR. 7/9-10787, BERLIN, GERMANY	CONSULTING	114,436.
Total number of others receiving over \$50,000 for professional services		12

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SEE STATEMENT 12	3,396,267.
2 SEE STATEMENT 13	1,906,668.
3 SEE STATEMENT 14	1,245,722.
4 SEE STATEMENT 15	533,427.

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	
Total. Add lines 1 through 3	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	7,143,253.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,143,253.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,143,253.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 16	4	7,143,253.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5	2a	
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	11,279,792.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	116,960.
3 Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	11,396,752.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	371.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,396,381.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only				
b Total for prior years:				
_____ , _____ , _____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e				
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ _____				
a Applied to 2018, but not more than line 2a ...				
b Applied to undistributed income of prior years (Election required - see instructions) ...				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2019 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr. ...				
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2015 ...				
b Excess from 2016 ...				
c Excess from 2017 ...				
d Excess from 2018 ...				
e Excess from 2019 ...				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling ▶ 08/01/94

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	0.	0.	0.	0.	0.
b 85% of line 2a	0.	0.	0.	0.	0.
c Qualifying distributions from Part XII, line 4, for each year listed	11,396,752.	8,256,079.	8,814,799.	10,513,708.	38,981,338.
d Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	11,396,752.	8,256,079.	8,814,799.	10,513,708.	38,981,338.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					0.
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from an exempt organization					0.
(4) Gross investment income					0.

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV **Supplementary Information** *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> NONE				
Total			▶ 3a	0.
b <i>Approved for future payment</i> NONE				
Total			▶ 3b	0.

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations


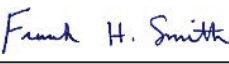
		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1)	Cash	1a(1)	X
(2)	Other assets	1a(2)	X
b	Other transactions:		
(1)	Sales of assets to a noncharitable exempt organization	1b(1)	X
(2)	Purchases of assets from a noncharitable exempt organization	1b(2)	X
(3)	Rental of facilities, equipment, or other assets	1b(3)	X
(4)	Reimbursement arrangements	1b(4)	X
(5)	Loans or loan guarantees	1b(5)	X
(6)	Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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 taxpayer) is based on all information of which preparer has any knowledge.		May the IRS discuss this return with the preparer shown below? See instr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	DocuSigned by:  Richard Seobey 787B15F8944D42D...	5/14/2020 Date PRESIDENT Title	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Check <input type="checkbox"/> if self-employed
	FRANK H. SMITH		PTIN P00639053
	Firm's name ▶ MARCUM LLP	Date 05/13/20	Firm's EIN ▶ 11-1986323
Firm's address ▶ 1899 L STREET NW # 850 WASHINGTON, DC 20036		Phone no. 202-227-4000	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

WORLD COCOA FOUNDATION INC

Employer identification number

54-1715875

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization WORLD COCOA FOUNDATION INC	Employer identification number 54-1715875
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BLOMMER 1011 BLOMMER DR. E. GREENVILLE, PA 18041	\$ 180,668.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	CARGILL BV., CARGILL COCOA & CHOCOLATE EVERT VAN DE BEEKSTRAAT 378 SCHIPHOL NL-1118 CZ NETHERLANDS	\$ 247,068.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	FERRERO FERRERO TRADING LUX SA FINDEL BUS. CNT., COMPLEXE B RUE DE TREVES L-2632 FINDEL, LUXEMBOURG	\$ 361,340.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	HERSHEY TRADING PILATUSSTRASSE 41 6003 LUZERN SWITZERLAND	\$ 361,340.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	ICRAF-INTERNATIONAL CENTRE FOR RESEARCH AGROFORESTRY P.O. BOX 30677 NAIROBI, KENYA	\$ 9,509.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	MONDELEZ EUROPE GMBH LINDBERG ALLEE 1, GLATTPARK 8152 ZURICH, SWITZERLAND	\$ 436,340.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WORLD COCOA FOUNDATION INC	Employer identification number 54-1715875
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	OLAM 16TH FLOOR NEW ZEALAND HOUSE 80 HAYMARKET LONDON, UNITED KINGDOM	\$ 213,668.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	USAID 1300 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20016	\$ 1,698,834.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	UNCDF TWO UNITED NATIONS PLAZA, 26TH FL NEW YORK, NY 10017	\$ 90,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	WM WRIGLEY JR. COMPANY 1132 W BLACKHAWK ST. CHICAGO, IL 60642	\$ 394,340.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	BARRY CALLEBAUT AG WESTPARK, PFINGSTWEIDSTRASSE 60 ZURICH, SWITZERLAND	\$ 247,068.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	IDH ARTHUR VAN SCHEDNELSTRAAT 500, 3511 MH UTRECHT NERTHLANDS, NETHERLANDS	\$ 170,934.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WORLD COCOA FOUNDATION INC	Employer identification number 54-1715875
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	DENGO DO BRASIL LTDA R NEBRASKA, 323, SAO PAULO, SP BRAZIL, BRAZIL 04560-010	\$ 5,025.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WORLD COCOA FOUNDATION INC	Employer identification number 54-1715875
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization WORLD COCOA FOUNDATION INC	Employer identification number 54-1715875
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

WORLD COCOA FOUNDATION INC

54-1715875

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INVESTMENT INTEREST AND DIVIDENDS	105,619.	0.	105,619.	105,619.	105,619.
TO PART I, LINE 4	105,619.	0.	105,619.	105,619.	105,619.

FORM 990-PF OTHER INCOME STATEMENT 2

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
CONFERENCES AND MEETINGS	384,643.	0.	384,643.
PROGRAM SERVICE FEES	1,500.	0.	1,500.
OTHER INCOME	8,127.	0.	8,127.
MEMBERSHIP DUES AND ASSESSMENTS	2,286,481.	0.	2,286,481.
TOTAL TO FORM 990-PF, PART I, LINE 11	2,680,751.	0.	2,680,751.

FORM 990-PF LEGAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	241,562.	0.	0.	281,884.
TO FM 990-PF, PG 1, LN 16A	241,562.	0.	0.	281,884.

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	37,262.	0.	0.	46,607.
TO FORM 990-PF, PG 1, LN 16B	37,262.	0.	0.	46,607.

WORLD COCOA FOUNDATION INC

54-1715875

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TELECOMMUNICATIONS AND IT SUPPORT	110,077.	0.	1,288.	107,246.
CONSULTANTS AND CONTRACTED SERVICES	2,754,884.	0.	139,909.	2,514,801.
TO FORM 990-PF, PG 1, LN 16C	2,864,961.	0.	141,197.	2,622,047.

FORM 990-PF

TAXES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAXES AND REGULATORY FEES	23,690.	0.	0.	23,838.
TO FORM 990-PF, PG 1, LN 18	23,690.	0.	0.	23,838.

FORM 990-PF

OTHER EXPENSES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SPONSORS	16,656.	0.	0.	16,656.
SUPPLIES	24,262.	0.	4,020.	18,278.
BANK FEES AND FOREIGN EXCHANGE	68,563.	68,563.	68,563.	0.
INSURANCE	44,978.	0.	2,185.	43,064.
BAD DEBT	43,055.	0.	33,055.	10,000.
PUBLICATIONS AND SUBSCRIPTIONS	97,740.	0.	0.	112,476.
EQUIPMENT	84,096.	0.	3,189.	124,816.
OPERATING GRANTS AND CONTRACTS	3,277,249.	0.	0.	3,365,215.
ADVERTISING	875.	0.	0.	875.
TO FORM 990-PF, PG 1, LN 23	3,657,474.	68,563.	111,012.	3,691,380.

WORLD COCOA FOUNDATION INC54-1715875FORM 990-PFOTHER LIABILITIESSTATEMENT 8DESCRIPTIONBOY AMOUNTEOY AMOUNT

DEFERRED RENT

9,629.

0.

CONTRACT LIABILITIES

869,052.

1,558,102.

TOTAL TO FORM 990-PF, PART II, LINE 22

878,681.

1,558,102.

FORM 990-PFEXPLANATION CONCERNING PART VII-A, LINE 8BSTATEMENT 9EXPLANATION

THE DISTRICT OF COLUMBIA AND STATE OF VIRGINIA DO NOT REQUIRE A COPY OF THE FEDERAL FORM 990-PF TO BE FILED WITH THEM.

FORM 990-PFNAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTERESTSTATEMENT 10NAME OF COUNTRY

GHANA

COTE DIVOIRE (IVORY COAST)

WORLD COCOA FOUNDATION INC

54-1715875

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
HAROLD POELMA 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
MARCO GONCALVES 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
SIMON BILLINGTON 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
PETER BLOMMER 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
PATRICK DE BOUSSAC 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
NICOLAS DE WASSEIGE 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
GARY GUITTARD 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
JASON REIMAN 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
FRANCISCO GOMEZ 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.
PATRICK POIRRIER 1025 CONNECTICUT AVE., NW # 1205 WASHINGTON, DC 20036	BOARD MEMBER 1.00	0.	0.	0.

WORLD COCOA FOUNDATION INC54-1715875ALAIN PONCELET
1025 CONNECTICUT AVE., NW # 1205
WASHINGTON, DC 20036BOARD MEMBER (LEFT OCT. 2019)
1.00 0. 0. 0.PAUL DAVIES
1025 CONNECTICUT AVE., NW # 1205
WASHINGTON, DC 20036BOARD MEMBER (STARTED OCT. 2019)
1.00 0. 0. 0.BARRY PARKIN
1025 CONNECTICUT AVE., NW # 1205
WASHINGTON, DC 20036CHAIRMAN
1.00 0. 0. 0.RICHARD SCOBEY
1025 CONNECTICUT AVE., NW # 1205
WASHINGTON, DC 20036PRESIDENT
44.00 450,291. 55,381. 0.GERRY MANLEY
1025 CONNECTICUT AVE., NW # 1205
WASHINGTON, DC 20036SECRETARY
1.00 0. 0. 0.STEVEN RETZLAFF
1025 CONNECTICUT AVE., NW # 1205
WASHINGTON, DC 20036TREASURER
1.00 0. 0. 0.CHRISTINE MCGRATH
1025 CONNECTICUT AVE., NW # 1205
WASHINGTON, DC 20036VICE CHAIRMAN
1.00 0. 0. 0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

450,291.	55,381.	0.
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WORLD COCOA FOUNDATION INC

54-1715875

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 12

ACTIVITY ONE

THE WCF COCOA LIVELIHOODS PROGRAM (WCF/CLP) IS A TEN-YEAR EFFORT TO INCREASE FARM-LEVEL PRODUCTIVITY OF COCOA AND FOOD CROPS OF 200,000 SMALLHOLDER, COCOA-GROWING HOUSEHOLDS IN WEST AFRICA. CLP PHASE I (2009-2014) WAS SUPPORTED BY THE BILL AND MELINDA GATES FOUNDATION, WCF COMPANY MEMBERS, FOUR NATIONAL GOVERNMENTS, AND THE DUTCH SUSTAINABLE TRADE INITIATIVE (IDH). CLP PHASE II (2014-2019), WHICH IS SUPPORTED BY A SIMILAR ARRAY OF FUNDERS AS CLP I, PLUS THE WALMART FOUNDATION, BUILDS UPON THE LESSONS LEARNED AND MODELS DEVELOPED OVER CLP I. WCF HAS ADDED A SIGNIFICANT FOOD CROP COMPONENT TO CLP II, ENSURING THAT COCOA FARMING COMMUNITIES RECEIVE THE TRAINING AND RESOURCES NECESSARY TO INCREASE THE PRODUCTIVITY OF SELECTED FOOD CROPS. THE OBJECTIVES OF CLP PHASE II ARE TO INCREASE COCOA PRODUCTIVITY TO 1,000 KG/HECTARE, IMPROVE SERVICE DELIVERY EFFICIENCY, AND IMPROVE FARMER RESILIENCY. THE ACTIVITIES ENDED AS OF DECEMBER 31, 2019.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

3,396,267.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 13

ACTIVITY TWO

COCOACTION- THE COCOA ACTION STRATEGY, LAUNCHED BY THE WORLD COCOA FOUNDATION (WCF) IN MAY 2014, BRINGS THE WORLD'S LEADING COCOA AND CHOCOLATE COMPANIES TOGETHER TO ACCELERATE SUSTAINABILITY AND IMPROVE THE LIVELIHOODS OF COCOA FARMERS. COCOA ACTION DEVELOPS PARTNERSHIPS AMONG GOVERNMENTS, COCOA FARMERS, AND THE COCOA INDUSTRY TO BOOST PRODUCTIVITY AND STRENGTHEN COMMUNITY DEVELOPMENT IN COTE D'IVOIRE AND GHANA - THE LEADING COCOA PRODUCING COUNTRIES IN THE WORLD. COCOA ACTION INTENDS TO TRAIN AND DELIVER IMPROVED PLANTING MATERIAL, FERTILIZER/SOIL FERTILITY PRACTICES AND OTHER GOOD AGRICULTURAL PRACTICES TRAINING TO 300,000 COCOA FARMERS AND EMPOWER THE COMMUNITIES WHERE THEY LIVE THROUGH EDUCATION, CHILD LABOR MONITORING, AND WOMEN'S EMPOWERMENT. COCOA ACTION IS MEASURED AGAINST ADHERENCE TO AGREED-UPON KEY PERFORMANCE INDICATORS, AND PROGRESS IS PUBLICLY REPORTED ON A REGULAR BASIS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

1,906,668.

WORLD COCOA FOUNDATION INC

54-1715875

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 14

ACTIVITY THREE

THE AFRICAN COCOA INITIATIVE (ACI) AND AFRICAN COCOA INITIATIVE PHASE II (ACI II) ARE PUBLIC-PRIVATE PARTNERSHIPS AMONG WCF, THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT, AND WCF MEMBER COMPANIES. INCREASED FARM-LEVEL PRODUCTIVITY IS A DRIVER FOR ECONOMIC GROWTH, FOOD SECURITY, ENHANCED QUALITY OF LIFE AND IMPROVED ENVIRONMENTAL SUSTAINABILITY. IN RECOGNITION OF THIS, ACI FOCUSES ON FACILITATING PUBLIC PRIVATE PARTNERSHIPS AND IMPROVED PRODUCTIVITY WHILE ACI II FOCUSES ON POOR QUALITY PLANTING MATERIAL AND LACK OF ACCESS THEREOF, AS WELL AS THE ABSENCE OF RURAL FINANCIAL SERVICES TO FINANCE FARM RENOVATION. THE GOALS OF ACI/ACI II INSTITUTIONALIZE EFFECTIVE PUBLIC AND PRIVATE SECTOR MODELS TO SUPPORT SUSTAINABLE PRODUCTIVITY GROWTH AND IMPROVED FOOD SECURITY. IN 2019, ACI II INCORPORATED ACTIVITIES FOR COTE D'IVOIRE SPECIFICALLY THEIR FEMALE MEMBERS BY PROVIDING ACCESS TO SAVINGS, CREDIT AND IMPROVED HOUSEHOLD INCOME IN ESTIMATED 934 VSLA.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

1,245,722.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 15

ACTIVITY FOUR

FEED THE FUTURE PARTNERSHIP FOR CLIMATE SMART COCOA IS A FOUR-YEAR INITIAL PROGRAM LED BY WCF IN CONSORTIUM WITH ACDI/VOCA. THIS PROGRAM BRINGS TOGETHER USAID AND NINE PRIVATE SECTOR COMPANIES (BARRY CALLEBAUT, CARGILL, ECOM, THE HERSHEY COMPANY, LINDT & SPRUNGLI, MARS, NESTLE, OLAM AND TOUTON) TO ADDRESS THE CHALLENGES OF CLIMATE CHANGE IN COCOA-PRODUCING LANDSCAPES. THE PROGRAM FOCUSES ON TWO GEOGRAPHIC: CLUSTERS WEST AFRICA AND CENTRAL AMERICA/CARRIBEAN. THE PROGRAM WORKED THROUGH THE COCOA AND NON-COCOA VALUE CHAINS TO COORDINATE AND LEVERAGE PRIVATE SECTOR INVESTMENT IN DEVELOPING CLIMATE SMART AGRICULTURE IN WEST AFRICA AND LATIN AMERICA.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 4

533,427.

WORLD COCOA FOUNDATION INC

54-1715875

FORM 990-PF

CASH DEEMED CHARITABLE EXPLANATION STATEMENT
PART X, LINE 4

STATEMENT 16

THE FOUNDATION DOES NOT OWN ANY CASH FOR INVESTMENT PURPOSES. ALL CASH IS HELD TO FUND CURRENT OPERATIONS AND THE AMOUNT EXPENDED DURING THE NEXT YEAR FOR CHARITABLE PURPOSES WILL EXCEED THE TOTAL CASH HELD AT YEAR END.

Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0047

2019

Department of the Treasury
Internal Revenue Service

For calendar year 2019 or other tax year beginning _____, and ending _____

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

<p>A <input checked="" type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) WORLD COCOA FOUNDATION INC</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 1025 CONNECTICUT AVE, NW, NO. 1205</p> <p>City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036</p>	<p>D Employer identification number (Employees' trust, see instructions.) 54-1715875</p> <p>E Unrelated business activity code (See instructions.) 900000</p>
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C Book value of all assets at end of year **8,153,149.**

F Group exemption number (See instructions.) ▶

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses. ▶ **1** Describe the only (or first) unrelated trade or business here ▶ **FRINGE BENEFIT - TRANSPORTATION**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **THERESA RODRIGUEZ- WORLD COCOA FND** Telephone number ▶ **202-559-4395**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement)		5		
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13	0.	

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	
20 Depreciation (attach Form 4562)	20	
21 Less depreciation claimed on Schedule A and elsewhere on return	21a	21b
22 Depletion	22	
23 Contributions to deferred compensation plans	23	
24 Employee benefit programs	24	
25 Excess exempt expenses (Schedule I)	25	
26 Excess readership costs (Schedule J)	26	
27 Other deductions (attach schedule)	27	
28 Total deductions. Add lines 14 through 27	28	0.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	0.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30	0.
31 Unrelated business taxable income. Subtract line 30 from line 29	31	0.

Part III Total Unrelated Business Taxable Income

32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	0.
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules)	34	0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	39	0.

Part IV Tax Computation

40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	41	
42	Proxy tax. See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0.

Part V Tax and Payments

46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a	
b	Other credits (see instructions)	46b	
c	General business credit. Attach Form 3800	46c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d	
e	Total credits. Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	0.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51a	Payments: A 2018 overpayment credited to 2019	51a	
b	2019 estimated tax payments	51b	1,780.
c	Tax deposited with Form 8868	51c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d	
e	Backup withholding (see instructions)	51e	
f	Credit for small employer health insurance premiums (attach Form 8941)	51f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	51g	
52	Total payments. Add lines 51a through 51g	52	1,780.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	1,780.
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	56	1,780.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here SEE STATEMENT 17	Yes	No
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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 taxpayer) is based on all information of which preparer has any knowledge.

DocuSigned by: Richard Seabey 5/14/2020 **PRESIDENT**

787B15F8944D42D... Date Title

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	FRANK H. SMITH	Frank H. Smith	05/13/20		P00639053
	Firm's name MARCUM LLP	Firm's EIN 11-1986323		1899 L STREET NW # 850	
	Firm's address WASHINGTON, DC 20036	Phone no. 202-227-4000			

WORLD COCOA FOUNDATION INC

54-1715875

FORM 990-T

NAME OF FOREIGN COUNTRY IN WHICH
ORGANIZATION HAS FINANCIAL INTEREST

STATEMENT 17

NAME OF COUNTRY

GHANA

COTE DIVOIRE (IVORY COAST)

Government of the District of Columbia

2019 D-20 SUB Corporation Franchise Tax Return



* 1 9 0 2 0 3 S 1 1 8 3 3 *

Taxpayer Identification Number (TIN) 541715875
 Number of business locations 1
 In DC Outside DC:

SOFTWARE DEVELOPER USE ONLY
 VENDOR ID #1833

Name of corporation
 WORLD COCOA FND INC

Tax period ending (MMDDYYYY)
 12312019

Mark if: QHTC located in DC Ballpark TIF area
 Mark if: AMENDED RETURN
 Mark if: FINAL RETURN
 Mark if: CERTIFIED QHTC
 Mark if: COMBINED REPORT*

Business mailing address #1
 1025 CONNECTICUT AVE. NW

Business mailing address #2
 SUITE 1205

*You must fill in the Designated Agent info below

City WASHINGTON State DC Zipcode+4 20036

Mark if: WORLDWIDE**
 **Worldwide form must be filed with this return

Designated Agent Name Designated Agent TIN

• READ INSTRUCTIONS BEFORE PREPARING RETURN (To allocate non-business items, see instructions.)

Enter dollar amounts only. If amount is zero, leave line blank. If minus, enter amount and mark X in oval.

GROSS INCOME	1	Gross receipts, minus returns and allowances		1	\$	.00
	2	Cost of goods sold (from Form D-20 Schedule A) and/or operations (attach statement)		2	\$	.00
	3	Gross profit from sales and/or operations Line 1 minus Line 2	Mark if minus	3	\$	.00
	4	Dividends from Form D-20, Schedule B		4	\$	.00
	5	Interest (attach statement)		5	\$	.00
	6	Gross rental income from D-20, Schedule I, Column 3, Line 6		6	\$	.00
	7	Gross royalties (attach statement)		7	\$	.00
	8	(a) Net capital gain (loss) (attach a copy of your federal Schedule D)	Mark if minus	8(a)	\$	.00
		(b) Ordinary gain (loss) from Part II, federal Form 4797 (attach copy)	Mark if minus	8(b)	\$	.00
	9	Other income (loss) (attach statement)	Mark if minus	9	\$	.00
10	Total gross income Add Lines 3 - 9	Mark if minus	10	\$	.00	
11	Compensation of officers from Form D-20, Schedule C		11	\$	.00	
12	Salaries and wages		12	\$	.00	
13	Repairs		13	\$	.00	
14	Bad debts		14	\$	.00	
15	Rent		15	\$	.00	
16	Taxes From Form D-20, Schedule D		16	\$	.00	
DEDUCTIONS	17	(a) Interest payments	.00			
		(b) Minus nondeductible payments to related entities	.00 =	17(c)	\$	.00
	18	Contributions and/or gifts (attach statement)		18	\$	.00
	19	Amortization (attach a copy of your federal Form 4562)		19	\$	.00
	20	Depreciation (attach a copy of your federal Form 4562. Do not include any additional IRC 179 expenses or IRC 168(k) depreciation)		20	\$	.00
	21	Depletion (attach statement)		21	\$	.00
	22	(a) Enter royalty payments made	.00			
	(b) Minus nondeductible payments to related entities	.00 =	22(c)	\$	.00	

D-20 FORM, PAGE 2
 Taxpayer Name: WORLD COCOA FND INC



Taxpayer Identification Number (TIN) 541715875

* 1 9 0 2 0 3 S 2 1 8 3 3 *

Enter dollar amounts only

DEDUCTIONS

23	Pension, profit-sharing plans		23	\$	.00
24	Other deductions (attach statement)		24	\$	.00
25	Total deductions Add Lines 11 - 24		25	\$	.00
26	Net income Line 10 minus Line 25	Mark if minus	26	\$	.00
27	Net operating loss deduction for years before 2000		27	\$	.00
28	Net income after net operating loss deduction Line 26 minus Line 27	Mark if minus	28	\$	.00

29	(a) Non-business income/state adjustment (attach statement)	Mark if minus	29a	\$	.00
	(b) Expense related to non-business income (attach statement)		29b	\$	.00
	(c) 29(a) minus 29(b)	Mark if minus	29c	\$	.00

30	Net income subject to apportionment Line 28 minus Line 29(c)	Mark if minus	30	\$	.00
31	DC apportionment factor from Form D-20, Schedule F, col. 3, Line 5 if Combined Report, from Combined Reporting Schedule 2A, Col. 1 Line 9.		31		1.000000

32	Net income from trade or business apportioned to DC Line 30 amount multiplied by Line 31 factor.	Mark if minus	32	\$.00
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TAXABLE INCOME

33	Other income/deductions attributable to DC (attach statement - see instructions)	Mark if minus	33	\$.00
34	Total taxable income <i>before</i> apportioned NOL deduction Line 32 plus or minus Line 33	Mark if minus	34	\$	.00
35	Apportioned NOL deduction (Losses occurring in year 2000 and later) * *(Losses occurring in tax year 2018 or later are limited to 80%. See instructions.)		35	\$	.00
36	Tentative DC taxable income. Line 34 minus Line 35.	Mark if minus	36	\$	.00

TAX - PAYMENTS AND CREDITS

37	Allocated/apportioned net capital gain from sale or exchange of an eligible investment in a DC QHTC, from Schedule QCGI, Line 3		37	\$	.00
38	DC taxable income. Line 36 minus Line 37. If QHTC, skip Lines 39-43. Complete QHTC Schedule on Page 4, Lines 1-13.	Mark if minus	38	\$	.00
39	Tentative tax 8.25% of Line 38.		39	\$	.00
40	3% tax on eligible QHTC capital gain income, from Schedule QCGI, Line 4.		40	\$	.00

41	Total tax. Add Line 39 and Line 40.		41	\$	.00
42	Minus nonrefundable credits from Schedule UB, Line 9		42	\$	.00
43	Total DC gross receipts from Line '4' MTLGR Worksheet	\$			.00
44	Net tax. Line 41 minus Line 42. The minimum tax is \$250 if DC gross receipts are \$1M or less or \$1,000 if DC gross receipts are greater than \$1M.		44	\$	.00

45	Payments and refundable credits:				
	(a) Tax paid, if any, with request for an extension of time to file.		45a	\$	.00
	(b) Tax paid, if any, with original return if this is an amended return		45b	\$	.00
	(c) 2019 estimated franchise tax payments		45c	\$	699.00
	(d) Refundable credits <i>from Schedule UB, Line 12</i>		45d	\$	.00

46	If this is an amended 2019 return, enter refund requested with original return.		46	\$	.00
47	Total payments and credits. Add Lines 45(a) through 45(d). Do not include Line 46.		47	\$	699.00
48	Estimated tax interest (Mark if D-2220 attached)		48	\$	.00
49	Total Amount Due. If Line 47 is smaller than the total of Lines 44 and 48, enter amount due. <i>Will this payment come from an account outside of the U.S.? Yes No See instructions</i>		49	\$	.00

50	Overpayment. If Line 47 is larger than the total of Lines 44 and 48, enter amount overpaid.		50	\$	699.00
51	Amount you want to apply to your 2020 estimated franchise tax		51	\$	.00
52	Amount to be refunded Line 50 minus Line 51		52	\$	699.00

D-20 FORM, PAGE 3



Taxpayer Name: WORLD COCOA FND INC
 Taxpayer Identification Number (TIN) 541715875

Schedule A - Cost of Goods Sold (See specific instructions for Line 2.)		Schedule B - Dividends (See specific instructions for Line 4.)	
	AMOUNT	NAME AND ADDRESS OF DECLARING CORPORATION	AMOUNT
1. Inventory at beginning of year	\$ 0		
2. Merchandise bought for manufacture or sale		DIVIDENDS FROM FED FORM	\$ 0
3. Salaries and wages			
4. Other costs per books (attach statement)			
(Additional federal depreciation and additional IRC § 179 expenses are not allowable.)			
5. Total	\$ 0		
6. Minus: Inventory at end of tax year			
7. Cost of goods sold (Enter here and on D-20 Line 2.)	\$ 0		

Method of inventory valuation:		Total Dividends	
		Minus deduction for Subpart F Income.	\$ 0
		Minus deduction for dividends received from wholly-owned subsidiary	
		TOTAL (Enter here and on D-20, Line 4.)	\$ 0

Schedule C - Compensation of officers (See specific instructions for Line 11. If more than 3 offices attach additional sheets as needed.)						
Col. 1 Name and Address of Officer	Col. 2 Official Title	Col. 3 Percent of Time Devoted to Business	Percent of Corporation Stock Owned		Col. 6 Amount of Compensation	Col. 7 Expense Account Allowances
			Col. 4 Common	Col. 5 Preferred		
		%	%	%	\$ 0	\$ 0
		%	%	%		
		%	%	%		
TOTAL COMPENSATION OF OFFICERS (Enter here and on D-20, Line 11.)					\$ 0	

Schedule D - Taxes (See specific instructions for Line 16.)			
EXPLANATION	AMOUNT	EXPLANATION	AMOUNT
	\$ 0		\$ 0
		TOTAL (Enter here and on D-20, Line 16.)	\$ 0

Schedule E - Reconciliation of the net income reported on Federal and DC returns			
1. Taxable income before net operating loss deduction and special deductions (page 1 of your Federal corporate return).	\$ 0	7. Total DC taxable income reported (from D-20, Line 36).	\$ 0
UNALLOWABLE DEDUCTIONS AND ADDITIONAL INCOME		NON-TAXABLE INCOME AND ADDITIONAL DEDUCTIONS	
2. Income taxes (see specific instructions for line 16).		8. Net income apportioned or allocated to outside DC.	
3. DC income taxes and franchise taxes imposed by DC Revenue Act of 1947, as amended.		9. Other non-taxable income and additional deductions including NOL (itemize):	
4. Interest on obligations of states, territories of the U.S. or any Political Subdivision thereof.		(a) _____	
5. Other unallowable deductions and additional income (itemize, include additional federal depreciation and additional IRC § 179 expenses).		(b) _____	
(a) _____			
(b) _____			
6. TOTAL of Lines 1-5.	\$ 0	10. TOTAL of Lines 7, 8 and 9.	\$ 0

Taxpayer Name: WORLD COCOA FND INC

Taxpayer Identification Number (TIN) 541715875



Schedule F - DC apportionment factor (See instructions.)

Note: If this is a combined report do not use Schedule F to derive the apportionment factor for the group. Leave Schedule F blank. Use Combined Reporting Schedule 2A, Line 9 instead.

Round cents to the nearest dollar. If an amount is zero, leave the line blank.

Carry all factors to six decimal places and truncate.

For all businesses other than financial institutions:

	Column 1 TOTAL	Column 2 in DC	Column 3 Factor (Column 2 divided by Column 1)
1. SALES FACTOR: All gross receipts of the business other than gross receipts from non-business income.	\$.00	\$.00	.00

For Financial Institutions:

2. SALES FACTOR: All gross income of the financial institution other than gross income from non-business income.	\$.00	\$.00	.00
3. PAYROLL FACTOR: Total compensation paid or accrued by the financial institution.	\$.00	\$.00	.00

4. SUM OF FACTORS: (For Financial Institutions add Lines 2 and 3 of Column 3)

5. **DC APPORTIONMENT FACTOR:** For businesses other than financial institutions enter the number from Line 1, Col. 3. Enter on D-20, Line 31

For financial institutions divide Line 4, Column 3 by 2. If there are less than two factors, use Line 4, Column 3. Enter on D-20, Line 31.

Qualified High Technology Companies Tax, Exemption and Credits Schedule (See instructions)

1	Initial Date of Certification as QHTC (MMDDYYYY)			
2	Initial Date Of Taxable Income (MMDDYYYY)			
3	Cumulative Amount of QHTC Franchise Tax Exemption Previously Used	\$	.00	
4	DC taxable income. D-20 Line 38.	Mark if minus:	4 \$	.00
5	Tentative QHTC Franchise Tax 6.0% of Line 4		5 \$	.00
6	3% tax on eligible QHTC capital gains income From Line 4 of Schedule QCGI		6 \$	.00
7	Total QHTC Franchise Tax. Add Line 5 and Line 6.		7 \$	.00
8	Minus nonrefundable credits from Schedule UB, Line 9		8 \$	.00
9	QHTC tax due. Subtract Line 8 from Line 7		9 \$	.00
10	Minus QHTC Franchise Tax Exemption This Return		10 \$	.00
11	Total DC gross receipts from Line '4' MTLGR Worksheet	\$	.00	
12	Net tax. Line 9 minus Line 10. The minimum tax is \$250 if DC gross receipts are \$1M or less or \$1,000 if DC gross receipts are greater than \$1M. Enter here and on page 2, Line 44. Complete page 2, Lines 45 through 52.		12 \$	.00
13	Amount of QHTC Franchise Tax Exemption Remaining	\$	.00	

Third party designee To authorize another person to discuss this return with OTR, fill in here

and enter the name and phone number of that person. See instructions.

Designee's name

Phone number

DocuSigned by: I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on the information available to the preparer.

PLEASE SIGN HERE	<i>Richard Scobey</i>	President	5/14/2020	2022274000
	787B15F8944D42D...			
PAID PREPARER ONLY	<i>Frank H. Smith</i>		MARCUM LLP	1899 L STREET NW #850
	Preparer's signature (if other than taxpayer)	Date	Firm name	Firm address
	Preparer's PTIN P00639053			

If you want to allow the preparer to discuss this return with the Office

of tax and Revenue fill in the oval

Taxpayer Name: WORLD COCOA FND INC

Taxpayer Identification Number (TIN) 541715875

Schedule G - Balance Sheets

	Beginning of Taxable Year		End of Taxable Year	
	(A) Amount	(B) Total	(A) Amount	(B) Total
ASSETS				
1. Cash				
2. Trade notes and accounts receivable				
(a) MINUS: Allowance for bad debts				
3. Inventories				
4. Gov't obligations: (a) U.S. and its instrumentalities				
(b) States, subdivisions thereof, etc				
5. Other current assets (attach statement)				
6. Loans to stockholders				
7. Mortgage and real estate loans				
8. Other investments (attach statement)				
9. Buildings and other fixed depreciable assets				
(a) MINUS: Accumulated depreciation				
10. Depletable assets				
(a) MINUS: Accumulated depletion				
11. Land (net of any amortization)				
12. Intangible assets (amortizable only)				
(a) MINUS: Accumulated amortization				
13. Other assets (attach statement)				
14. TOTAL ASSETS				
LIABILITIES AND CAPITAL				
15. Accounts payable				
16. Mortgages, notes, bonds payable in less than 1 year				
17. Other current liabilities (attach statement)				
18. Loans from stockholders				
19. Mortgages, notes, bonds payable in 1 year or more				
20. Other liabilities (attach statement)				
21. Capital stock: (a) Preferred stock				
(b) Common stock				
22. Paid-in or capital surplus (attach statement)				
23. Retained earnings - Appropriated (attach statement)				
24. Retained earnings - Unappropriated				
25. MINUS: Cost of treasury stock		()		()
26. TOTAL LIABILITIES AND CAPITAL				

Schedule H-1 - Reconciliation of Income (Loss) per Books With Income (Loss) per Return

1. Net income per books	\$ 0	7. Income recorded on books this year and not included in this return (itemize). Tax-exempt interest \$ _____	\$ 0
2. Federal income tax			
3. Excess of capital losses over capital gains			
4. Taxable income not recorded on books this year (itemize)			
5. Expenses recorded on books this year and not deducted on this return (itemize). (a) Depreciation \$ _____ (b) Depletion \$ _____		8. Deductions on this tax return and not charged against book income this year (itemize). (a) Depreciation \$ _____ (b) Depletion \$ _____	
6. TOTAL of Lines 1 through 5	\$ 0	9. TOTAL of Lines 7 and 8	\$ 0
		10. Taxable Income (federal Form 1120, page 1, line 28 should equal Line 6 minus Line 9 of this Schedule.)	\$ 0

Schedule H-2 - Analysis of Unappropriated Retained Earnings per Books

1. Balance at beginning of year	\$ 0	5. Distributions: (a) Cash	\$ 0
2. Net income per books		(b) Stock	
3. Other increases (itemize)		(c) Property	
		6. Other decreases (itemize).	
4. TOTAL of Lines 1, 2 and 3	\$ 0	7. TOTAL of Lines 5 and 6	\$ 0
		8. Balance at end of year (Line 4 minus Line 7)	\$ 0

Taxpayer Name: WORLD COCOA FND INC



Taxpayer Identification Number (TIN) 541715875

Schedule I – Income from Rent

Col. 1 Address of Property	Col. 2 Kind of Property	Col. 3 Gross Amount of Rent	Col. 4 Depreciation* or Amortization (Per Federal Form 4562)	Col. 5 Repairs (Explain in Sch. I-1)	Col. 6 Taxes, Interest and other Expenses* (Explain in Sch. I-1)
1.		\$	\$	\$	\$
2.					
3.					
4.					
5.					
6. TOTAL (Enter the total of Column 3 on D-20, Line 6. Enter total of Column 4, 5, and 6 on appropriate deduction lines.)		\$	\$	\$	\$

*excludes federal 30% and 50% bonus depreciation and additional IRC §179 expenses.

Schedule I-1 – Explanation of deductions claimed in Columns 5 and 6 of Schedule I.

Column No.	Explanation	Amount	Column No.	Explanation	Amount
		\$			\$

Supplemental Information

1. STATE OR COUNTRY OF INCORPORATION VIRGINIA	2.(a) DATE OF INCORPORATION 03281994	2.(b) DATE BUSINESS BEGAN IN DC 08012008	3. IRS SERVICE CENTER WHERE FEDERAL RETURN WAS FILED FOR PERIOD COVERED BY THIS RETURN: OGDEN, UTAH
4. THE CORPORATION'S BOOKS ARE IN THE CARE OF – THERESA RODRIGUEZ C/O WORLD COCOA FOUNDATION		5. LOCATED AT – 1025 CONN. AVE NW # 1205, WASHINGTON, DC 20036	
6. During 2019, has the Internal Revenue Service made or proposed any adjustments to your federal income tax return, or did you file any amended returns with the IRS? YES NO X		If you have already provided OTR with a detailed statement, enter the date it was sent. MM/DD/YYYY	
7. Is this corporation unitary with another entity? YES X NO		If yes, explain:	
8. Is this return made on the accrual basis? X YES NO		If no, indicate basis used: Cash Basis Other (specify)	
9. Did you file a franchise tax return with DC for the year 2018? X YES NO		If no, state reason:	
10. Did you withhold DC income tax from wages paid to your DC resident employees during 2019? X YES NO		If no, state reason:	
11. Did you file annual information returns, federal forms 1096 and 1099, relating to payment of dividends and interest for 2019? YES X NO			
12 (a) Has the business been terminated? YES X NO		If yes, explain and give date:	
(b) Have you moved out of DC? YES X NO			
13. Did you file an annual ballpark fee return? YES X NO			