PUBLIC DISCLOSURE COPY

Form 990

Return of Organization Exempt From Income Tax

Open to Public

OMB No. 1545-0047

Department of the Treasury

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. Inspection Internal Revenue Service 06/30,2012 07/01 , **2011**, and ending A For the 2011 calendar year, or tax year beginning D Employer identification number C Name of organization COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039 B Check if applicable EVERYWHERE (CARE USA), INC. E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite (404) 681-2552151 ELLIS ST. NE City or town, state or country, and ZIP + 4 Terminated 720,221,651, G Gross receipts \$ ATLANTA, GA 30303-2440 Amended return H(a) Is this a group return for X No Yes Application pending F Name and address of principal officer: HELENE GAYLE H(b) Are all affiliates included? 151 ELLIS STREET ATLANTA, GA 30303 If "No." attach a list. (see instructions) 527 4947(a)(1) or X 501(c)(3) Tax-exempt status: 501(c) (H(c) Group exemption number Website: WWW.CARE.ORG L Year of formation: 1945 M State of legal domicite: DC Association Form of organization: X | Corporation Trust Part I Summary Briefly describe the organization's mission or most significant activities: CARE FIGHTS ROOT CAUSES OF POVERTY IN THE WORLD'S POOREST COMMUNITIES. WE PLACE FOCUS ON WORKING ALONGSIDE POOR WOMEN BECAUSE, WITH PROPER Governance RESOURCES WOMEN HAVE POWER TO HELP FAMILIES/COMMUNITIES ESCAPE POVERTY 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 3 Number of voting members of the governing body (Part VI, line 1a) 21. 4 Number of independent voting members of the governing body (Part VI, line 1b) Activities 610. Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 24. 6 Total number of volunteers (estimate if necessary) n 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Prior Year 541,567,076. 560, 169, 461. Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 9 12,340,090. 10,390,484. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5,569,573. 8,619,551. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 557,527,133. 581,129,102. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12). 89,629,241. 75,730,535. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 171,059,451. 191,485,458. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 2,946,245. 3,236,664. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ _____22,022,712. 319,080,209. 342,756,672. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 582,715,146. 613,209,329. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

Part II Signature Block

Under pena	alties of perjury, I declare that I have examined this d complete. Declaration of preparer (other than offi	retum, including accompanying schedules an cer) is based on all information of which prep	d statements, and to arer has any knowle	o the best of my know edge.	wiedge and belief, it is true	<u>''</u>	
Sign Here	Signature of officer Type or print name and title	M		Date	Soli3		
aid	Print/Type preparer's name CHAD FRANKS	Preparer's signature Franks	01/29/2013	seit-employeu	P01071312		
Preparer Jse Only	Firm's name FIRMST & YOUNG U. Firm's address 55 IVAN ALLEN BLVD, SUI	Firm's EIN ► 34-6565596 Phone no. 404-874-8300					
May the IF	RS discuss this return with the preparer show			<u></u>	Yes X	Ne	

For Paperwork Reduction Act Notice, see the separate instructions.

Total assets (Part X, line 16)

Total liabilities (Part X, line 26)

Net assets or fund balances. Subtract line 21 from line 20. .

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-25,188,013.

421,675,029.

100,283,440.

321,391,589.

End of Year

19

20

21

22

o s

-32,080,227.

521,859,830.

166,421,882.

355,437,948.

Beginning of Current Year

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COOPERATIVE FOR ASSISTANCE AND RELIEF Form 990 (2011) Page 2 **Statement of Program Service Accomplishments** Part III Briefly describe the organization's mission: ATTACHMENT 1 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ _________including grants of \$ ______________________________) (Revenue \$ EMERGENCY: CARE'S PROGRAMS DIRECTLY ASSIST SURVIVORS OF NATURAL DISASTERS AND CONFLICT THROUGH BOTH IMMEDIATE RELIEF AND LONGER-TERM COMMUNITY REHABILITATION, INCLUDING FOOD, TEMPORARY SHELTER, CLEAN WATER, SANITATION SERVICES, MEDICAL CARE, FAMILY PLANNING AND REPRODUCTIVE HEALTH SERVICES AND SEEDS AND TOOLS. CARE PLACES SPECIAL EMPHASIS ON THE NEEDS OF THE MOST VULNERABLE, INCLUDING WOMEN, CHILDREN AND THE ELDERLY. 3,707,605.) (Revenue \$) (Expenses \$ ______including grants of \$ **4b** (Code: REHABILITATION: CARE PROGRAMS HELP TACKLE UNDERLYING CAUSES OF POVERTY SO THAT PEOPLE CAN BECOME SELF-SUFFICIENT. RECOGNIZING THAT GIRLS AND WOMEN SUFFER DISPROPORTIONATELY FROM POVERTY AND MARGINALIZATION, CARE PLACES SPECIAL EMPHASIS ON WORKING WITH THEM TO CREATE PERMANENT SOCIAL CHANGE. **4c** (Code:) (Expenses \$ 395,182,228. including grants of \$ 68,079,592.) (Revenue \$ ATTACHMENT 2 4d Other program services (Describe in Schedule O.) (Expenses \$ 4,454,366 including grants of \$ 0) (Revenue \$ 525,036,594.

4e Total program service expenses ▶ JSA 1E1020 1.000

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Part	1990 (2011) Checklist of Required Schedules		<u> </u>	Page 3
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
2			- 21	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C</i> , <i>Part III</i>	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			37
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		37	
11	endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X	
а	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	Х	
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			37
b	complete Schedule D, Parts XI, XII, and XIII	12a		Х
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		Х	
19	Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		
13	If "Yes," complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			37
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25-		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		Х
	If "Yes," complete Schedule L, Part I	230		- 71
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			- 21
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>			
-	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	X	
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note . All Form 990 filers are required to complete Schedule O	38	Х	

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Form 990 (2011) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V.............. 262 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable ________1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . 2a Χ b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Χ **b** If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a 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 X **b** If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Х 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? Χ b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Х 7a and services provided to the payor? Χ **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Χ 7с Х 7e e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Χ f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? Χ h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? **b** Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? Χ b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are 1a 22			
	material differences in voting rights among members of the governing body, or if the governing body			
	delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
-	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a	Х	
a h	Other officers or key employees of the organization	15b	X	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions.)	130		
160				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		X
	with a taxable entity during the year?	IVa		71
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	4.01-		
Sect	ion C. Disclosure	16b		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 3			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	U1(c)(3)S 0	nly)
	available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f inter	est p	olicy,
	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne		

organization: ▶_{VICKIE J BARROW-KLEIN 151 ELLIS ST. NE ATLANTA, GA 30303-2440 404-681-2552}

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for	box,	unle	Pos heck ss pe	erson	e than o	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) RICHARD ALMEIDA										
BOARD MEMBER	3.00	Х							0	0
(2) KY AMOAKO										
BOARD MEMBER UNTIL OCT 2011	3.00	Х							0	0
(3) JOANNE BRADFORD										-
BOARD MEMBER	3.00	Х						C	0	0
(4) EDUARDO CASTRO-WRIGHT										
BOARD MEMBER	3.00	Х						C	0	0
(5) GILLES CONCORDEL										
BOARD MEMBER	3.00	Х						C	0	0
(6) SUSAN CROWN										
BOARD MEMBER	3.00	Х						C	0	0
(7) ALEX CUMMINGS										
BOARD MEMBER	3.00	Х						C	0	0
(8) BOWMAN CUTTER										
BOARD MEMBER/CHAIR	3.00	X						C	0	0
(9) KATHARIN DYER										
BOARD MEMBER	3.00	Х						C	0	0
(10) MARIA ECHAVESTE BOARD MEMBER UNTIL OCT 2011	3.00	х						C	0	0
(11) PAUL JANSEN										
BOARD MEMBER	3.00	Х						C	0	0
(12) DEAN KEHLER										
BOARD MEMBER/TREASURER	3.00	X						C	0	0
(13) EMERY KOENIG BOARD MEMBER	3.00	Х						C	0	0
(14) RICHARD MARIN]									
BOARD MEMBER	3.00	X						C	0	0

Form **990** (2011)

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COOPERATIVE FOR ASSISTANCE AND RELIEF

Part VII Section A. Officers, Directors, Tru (A)	(B)	ĺ	•		C)			(D)	(E)	(F)
Name and title	Average hours per week (describe	box,	unle:	Pos heck ss pe	morerson lirect	e than o	an tee)	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
15) DORIS MEISSNER										
BOARD MEMBER/VICE CHAIR	3.00	Х						C	0	
16) AFAF MELEIS										
BOARD MEMBER	3.00	X						C	0	1
17) JOHN MORGRIDGE	2 00	· v						C	0	
BOARD MEMBER 18) RANDALL POND	3.00	X							0	
BOARD MEMBER	3.00	Х							0	
19) VIRGINIA SALL	3.00	21								
BOARD MEMBER/VICE CHAIR	3.00	Х							0	
20) RANVIR TREHAN										
BOARD MEMBER	3.00	Х						C	0	
21) BRUCE TULLY										
BOARD MEMBER	3.00	Х						C	0	
22) WILLIAM UNGER										
BOARD MEMBER	3.00	Х						C	0	
23) MONICA VACHHER								_		
BOARD MEMBER UNTIL OCT 2011	3.00	X						C	0	
24) DEIDRA WAGER	2 00	37								
BOARD MEMBER 25) HELENE D GAYLE	3.00	X						C	0	
PRESIDENT AND CEO	40.00	Х		Х				419,832.	0	20,959
1h Sub-total	10.00							113,032.	0	
c Total from continuation sheets to Part VII, S	ection A			• •				3,805,950.	0	256,033.
d Total (add lines 1b and 1c)	-						•	3,805,950.	0	256,033.
2 Total number of individuals (including but not							o re	eceived more than	\$100,000 of	
reportable compensation from the organization		195				,				
										Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu										3 X
4 For any individual listed on line 1a, is the organization and related organizations graindividual	eater than	\$15	0,0	00?) It	"Yes	s,"	complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yo	accrue co	mpen	sati	on 1	fron	n any	un	related organization	on or individual	5 X
Section B. Independent Contractors	oo, oompie	.5 501	·out	., 0	. , 01	34011	PUI	<i></i>		1 1 1 1
1 Complete this table for your five highest com			1.							,

compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 57

Form **990** (2011)

JSA 1E1055 2.000

Form 990 (2011)

COOPERATIVE FOR ASSISTANCE AND RELIEF

(A)	(B)	ĺ	,,,,,,		C)		<u> </u>	(D)	ed Employees (c		(F)	
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	box,	unles	Pos heck ss pe	sition more erson	e than or/truston is or/truston employee	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fr org an	stimated nount of other upensated om the anization d relate anization	ion on d
6) VICKIE J BARROW KLEIN												
CHIEF FINANCIAL OFFICER	40.00			Х				212,599.	0		20,0)57
7) CAROL A HUDSON DIR EXEC OFF/BOARD SECRETARY	40.00			Х				89,192.	0		13,0)25
8) JOSEPH J IAROCCI												
SR VP/CHIEF OF STAFF 9) NICHOLAS C OSBORNE	40.00				Х			327,491.	0		25,3	364
REGIONAL DIR ASIA	40.00				Х			236,844.	0		8,3	380
0) JONATHAN W MITCHELL												
CHIEF OPERATING OFFICER	40.00				Х			211,495.	0		19,2	256
1) MARC DE LAMOTTE												
REGIONAL DIR WEST AFRICA	40.00				X			205,554.	0		10,8	317
2) PATRICK SOLOMON												
VP GLOBAL SUPPORT SERVICES	40.00				X			198,659.	0		23,3	101
3) MUHAMMAD MUSA												
COUNTRY DIR INDIA	40.00					X		268,937.	0		9,4	127
4) ANN P JONES												
DIR FINANCIAL MGMT SYSTEM	40.00					X		234,946.	0		19,9	908
5) MUSTAQUE AHMED								, , , , , ,				
CHIEF OF PARTY ANGOLA	40.00					x		216,889.	0		5,!	566
6) KYMBERLY WOLFF	10.00							210,000.			57.	
SR VP EXTERNAL RELATIONS	40.00					x		216,416.	0		17,8	240
						Λ	_	210,410.	0		± / , (7 7 7
b Sub-total												
c Total from continuation sheets to Part VII, \$	_											
d Total (add lines 1b and 1c)							_		<u></u>			
2 Total number of individuals (including but not reportable compensation from the organization		hose 195		d a	bove	e) who	re	ceived more than	\$100,000 of			
											Yes	N
B Did the organization list any former office	مده ما:سممده		4				I	lavos ar biabas	t		100	
B Did the organization list any former officemployee on line 1a? If "Yes," complete Sched										3	Х	
										3	21	
For any individual listed on line 1a, is the												
organization and related organizations gr											v	
individual										4	X	
Did any person listed on line 1a receive or										_		
for services rendered to the organization? If "Y	es," comple	te Sch	nedu	ile J	J tor	such	per.	son		5		X
Section B. Independent Contractors												

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form **990** (2011)

COOPERATIVE FOR ASSISTANCE AND RELIEF

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	nplo	ye	es,	and I	Hig	hest Compensat	ed Employees (d	continue	ed)
(A) Name and title	(B) Average hours per week (describe	box,	unles er and	Pos heck ss pe d a d	rson lirect	e than o	an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	com	(F) stimated nount of other upensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org an	from the organization and related rganizations
37) STEPHEN WALLACE											
COUNTRY DIR COTE D'IVOIRE	40.00					X		212,758.	0		8,742.
38) CATHEREN WOOLARD FMR EX VP GLOB ADVOC/EXT RELAT	0						Х	100,054.	0		(
39) STEVEN HOLLINGWORTH FMR CHIEF OP OFF/EVP GLOBAL OP	0						Х	175,246.	0		17,899.
40) PETER BUIJS FMR REG DIR LAT AMER/CARIBBEAN	0						Х	164,922.	0		11,250.
41) JEAN MICHEL VIGREUX FMR SRVP PGM QUALITY/IMPACT	0						Х	158,281.	0		18,345.
42) LISA T DEAN FMR REG DIR SOUTH AFRICA	0						Х	155,835.	0		6,088.
1b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	ection A						> > >				
2 Total number of individuals (including but not	limited to t						o re	eceived more than	\$100,000 of		
reportable compensation from the organization	n ▶	195	5								
											Yes No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schede										3	Х
4 For any individual listed on line 1a, is the sorganization and related organizations greindividual	eater than	\$15	50,0	00?) If	"Yes	5, "	complete Schedu	le J for such	4	X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye										5	X
Section B. Independent Contractors										<u>'</u>	
Complete this table for your five highest com- compensation from the organization. Report of year.											

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form **990** (2011)

COOPERATIVE FOR ASSISTANCE AND RELIEF

Fal	T VII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts t	1.0	Federated campaigns 1a	637,502.				
an Tu	1 a	. oddratod dampargilo I I I I I I I I	037,302.				
عَ ق	b						
ifts r A	С	Fundraising events	172,105.				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations					
	е	Government grants (contributions) 1e	172,284,433.				
ē Ĕ	f	All other contributions, gifts, grants,					
들본		and similar amounts not included above 1f	368,473,036.				
d of	g	Noncash contributions included in lines 1a-1f: \$	84,898,796.				
ದೆ ಜ	h	Total. Add lines 1a-1f		541,567,076.			
ne			Business Code				
en en							
Š	2a						
- 8	b						
Ξ̈́	С						
Š	d						
aп	е						
Program Service Revenue	f	All other program service revenue					
Pre	g	Total. Add lines 2a-2f		0			
	3	Investment income (including dividends, intere					
		other similar amounts)		9,587,032.			9,587,032.
	4	Income from investment of tax-exempt bond p		0			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
							42 017
	5	Royalties · · · · · · · · · · · · · · · · · · ·	(ii) Personal	43,917.			43,917.
		\ //	. ,				
	6a	Gross rents	206,336.				
	b	Less: rental expenses					
	С	Rental income or (loss) 174,723.	206,336.				
	d	Net rental income or (loss)		381,059.			381,059.
	7a	Gross amount from sales of (i) Securities	(ii) Other				
	'a	assets other than inventory 163,181,304.	139,905.				
	b	Less: cost or other basis					
	-	and sales expenses 162,517,757.					
	_	Gain or (loss)	139,905.				
	c d	Net gain or (loss)		002 452			803,452.
-				803,452.			003,452.
ne	8a						
Jen		events (not including \$172,105.					
é		of contributions reported on line 1c).					
<u>.</u>		See Part IV, line 18 a	7,195.				
Other Revenu	b	Less: direct expenses b	176,761.				
ŏ	С	Net income or (loss) from fundraising events .	<u> </u>	-169,566.			-169,566.
	9a	Gross income from gaming activities.					
		See Part IV, line 19					
	b	Less: direct expenses b					
	C	Net income or (loss) from gaming activities		0			
		, , , ,					
	Iva	Gross sales of inventory, less returns and allowances					
	.						
	b	Less: cost of goods sold					
	с	Net income or (loss) from sales of inventory. Miscellaneous Revenue	Business Code	0			
	<u> </u>						
	11a	ALL OTHER REVENUE	900099	4,818,691.			4,818,691.
	b	LIST RENTAL	511140	495,472.			495,472.
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d		5,314,163.			
	12	Total revenue. See instructions		557,527,133.			15,960,057.

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Form 990 (2011)

COOPERATIVE FOR ASSISTANCE AND RELIEF

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

req	uired to complete columns (B), (C), and (D). Check if Schedule O contains a resp	nonce to any question is	this Part IV		77
				(C)	(D)
	not include amounts reported on lines 6b, ,8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	11 620 702	11 620 702		
_	organizations in the United States. See Part IV, line 21	11,632,723.	11,632,723.		
2	Grants and other assistance to individuals in	0			
_	the United States. See Part IV, line 22	U			
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	77,996,518.	77,996,518.		
4	Benefits paid to or for members	0	77,000,010.		
5	Compensation of current officers, directors,				
3	trustees, and key employees	1,931,922.	494,032.	1,397,882.	40,008
6	Compensation not included above, to disqualified	1733173221	13 17 0021	2700.70021	10,000
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	527,267.	413,681.	76,663.	36,923
7	Other salaries and wages	112,361,565.	96,468,938.	11,276,664.	4,615,963
8	Pension plan accruals and contributions (include section	, , , , , , , , ,	,,	, , , , , , ,	
-	401(k) and 403(b) employer contributions)	6,362,878.	5,303,225.	765,672.	293,981
9	Other employee benefits	43,510,759.	40,244,754.	2,749,264.	516,741
10	Payroll taxes	6,365,060.	5,121,086.	892,062.	351,912
11	Fees for services (non-employees):				
а	Management	0			
	Legal	1,403,382.	1,015,745.	149,068.	238,569
	Accounting	3,231,032.	1,000,298.	2,230,734.	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	2,946,245.			2,946,245
f	Investment management fees	563,453.		563,453.	
g	Other	26,070,909.	19,127,177.	6,362,395.	581,337
12	Advertising and promotion	2,237,729.	754,624.	1,873.	1,481,232
13	Office expenses	28,727,574.	17,182,484.	2,290,736.	9,254,354
14	Information technology	4,896,331.	2,820,708.	1,840,027.	235,596
15	Royalties	0			
16	Occupancy	12,475,015.	10,911,688.	1,287,980.	275,347
17	Travel	42,086,455.	39,523,401.	2,207,155.	355,899
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	79,328.	52,809.	26,519.	
19	Conferences, conventions, and meetings	0			
20	Interest	236,800.	121,224.	6,389.	109,187
21	Payments to affiliates	16,550.	F 31F 000	F00 130	16,550
22	Depreciation, depletion, and amortization	6,001,468.	5,315,282.	502,132.	184,054
23	Insurance	619,626.	618,689.	937.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	,	00 000 465	00 622 005	222 760	E2 020
	EMERGENCY SUPPLIES AGRICULTURAL COMMODITIES	90,899,465. 36,467,795.	90,622,885.	223,760.	52,820
		32,944,625.	32,944,625.		
	MOSQUITO NETS(IN KIND CONTR) SUB CONTRACTOR EXPENSES	24,501,453.	24,357,088.	4,996.	139,369
		5,621,219.	4,525,115.	799,479.	296,625
	All other expenses Total functional expenses. Add lines 1 through 24e	582,715,146.	525,036,594.	35,655,840.	22,022,712
26	Joint costs. Complete this line only if the	302,713,110.	323,030,394.	33,033,040.	22,022,112
-	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)	o			
JSA		·			F 000 (0044)

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Form **990** (2011)

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COOPERATIVE FOR ASSISTANCE AND RELIEF

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			215,049.	1	143,177.
	2	Savings and temporary cash investments			74,228,748.	2	47,710,590.
	3	Pledges and grants receivable, net			13,679,197.	3	8,458,304.
	4	Accounts receivable, net			25,990,372.	4	18,449,023.
	5	Receivables from current and former officers,	directo	ors, trustees, key			
		employees, and highest compensated employe					
	6	Schedule L Receivables from other disqualified persons (a 4958(f)(1)), persons described in section 4958(employers and sponsoring organizations of se	c)(3)(B),	and contributing	0	5	0
w		employees' beneficiary organizations (see instructions)			0	6	0
Assets	7	Notes and loans receivable, net			5,201,837.	7	2,471,380.
Ass	8	Inventories for sale or use			49,070,230.	8	23,632,599.
	9	Prepaid expenses and deferred charges			2,556,866.	9	3,686,423.
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D					
		Less: accumulated depreciation			20,255,139.		24,673,533.
	11	Investments - publicly traded securities			196,509,000.	11	175,691,317.
	12	Investments - other securities. See Part IV, line 11				12	4 073 004
	13	Investments - program-related. See Part IV, line 11	7,424,269.	13	4,073,224.		
	14	Intangible assets				1.7	112,685,459.
	15	Other assets. See Part IV, line 11			126,729,123. 521,859,830.	15	421,675,029.
_	16 17	Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses			34,057,716.	16 17	14,989,978.
	18	Grants payable		18	11,000,070:		
	19	Deferred revenue	98,226,450.	19	53,845,970.		
	20	Tax-exempt bond liabilities			0	20	0
ý	21	Escrow or custodial account liability. Complete	e Part I	V of Schedule D	0	21	0
itie	22	Payables to current and former officers,		i i			
Liabilities		employees, highest compensated employees, a		- 1			
=		Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelate	ed third	parties		23	0
	24	Unsecured notes and loans payable to unrelated	third par	ties	870,043.	24	1,008,677.
	25	Other liabilities (including federal income tax, pay	ables to	related third			
		parties, and other liabilities not included on lines	,	·			
		of Schedule D			33,267,673.	25	30,438,815.
_	26	Total liabilities. Add lines 17 through 25			166,421,882.	26	100,283,440.
ses		Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34.	₽ X	and complete			
anc	27	Unrestricted net assets			96,439,086.	27	108,217,726.
Bal	28	Temporarily restricted net assets			125,516,741.	28	88,111,780.
pu	29	Permanently restricted net assets		<u></u>	133,482,121.	29	125,062,083.
or Fund Balances		Organizations that do not follow SFAS 117, che complete lines 30 through 34.	ck here	▶ and			
ţţ	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or equ	uipment f	fund		31	
Net Assets	32	Retained earnings, endowment, accumulated inco	ome, or	other funds		32	
Š	33	Total net assets or fund balances			355,437,948.	33	321,391,589.
	34	Total liabilities and net assets/fund balances			521,859,830.	34	421,675,029.

Form **990** (2011)

JSA 1E1053 1.000

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

Form 990 (2011) Page **12 Reconciliation of Net Assets** Part XI Check if Schedule O contains a response to any question in this Part XI.......... 557,527,133. 1 1 Total revenue (must equal Part VIII, column (A), line 12).......... 582,715,146. 2 2 -25,188,013. 3 3 355,437,948. 4 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) -8,858,346. 5 5 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, 321,391,589. Part XII **Financial Statements and Reporting** No X Accrual Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Χ Were the organization's financial statements audited by an independent accountant? 2b Х If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c Χ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: Both consolidated and separate basis X Consolidated basis Separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

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

3b X Form **990** (2011)

3a | X

JSA 1E1054 1.000

PUBLIC DISCLOSURE COPY

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Open to Public Inspection

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF Employer identification number

EVERYW	HERE (CARE USA	A), INC.							13-	-1685	039		
Part I	Reason for Pub	lic Charity Statu	s (All organizations mu	st con	nplete	this pa	art.) Se	e instr	uctions.				_
The orga	nization is not a priv	ate foundation be	cause it is: (For lines 1 th	rough	11, che	eck only	one bo	x.)					
1	A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(1)(A)(i)					
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)												
3	A hospital or a coo	perative hospital s	ervice organization descri	bed in	sectio	n 170(b)(1)(A)	(iii).					
4			erated in conjunction wi	th a h	ospita	l descr	ibed in	sectio	n 170(b)(1)(A))(iii). E	nter the	,
	hospital's name, cit	y, and state:											
5	An organization or	erated for the be	nefit of a college or univ	ersity	owned	l or ope	erated b	y a go	vernme	ntal ur	it desc	cribed in	1
	section 170(b)(1)(A)(iv). (Complete F	Part II.)										
6	A federal, state, or	local government	or governmental unit des	cribed	in sec t	ion 170	(b)(1)(A)(v).					
7 X	An organization the	at normally receive	es a substantial part of it	s supp	ort fro	m a go	vernme	ental un	it or fro	m the	genera	al public	;
	described in section	n 170(b)(1)(A)(vi).	. (Complete Part II.)										
8	A community trust	described in secti	on 170(b)(1)(A)(vi). (Com	plete F	Part II.)								
9	An organization the	at normally receive	es: (1) more than 331/3%	of its	suppo	rt from	contrib	outions,	membe	ership i	fees, ai	nd gross	;
	receipts from activ	rities related to its	exempt functions - subj	ect to	certai	n excep	otions,	and (2)	no mo	re tha	n 331/3	3% of its	;
	support from gros	s investment inco	ome and unrelated busi	ness ta	axable	incom	e (less	section	n 511	tax) fr	om bu	sinesses	;
	acquired by the org	anization after Jur	ne 30, 1975. See section	509(a))(2). (C	Complet	e Part I	II.)					
10	An organization org	ganized and opera	ted exclusively to test for	public :	safety.	See se	ction 5	09(a)(4).				
11	An organization o	rganized and ope	rated exclusively for the	bene	fit of,	to perf	orm th	e funct	ions of,	, or to	carry	out the	,
	purposes of one o	r more publicly su	ipported organizations de	escribe	d in s	ection 5	509(a)(1) or se	ection 5	09(a)(2	2). See	section	1
	509(a)(3). Check th	ne box that describ	es the type of supporting	organ	ization	and co	mplete	lines 1	1e th <u>rou</u>	<u>ı</u> gh 11	h.		
	a Type I	b Type	II c Type	III - Fu	unction	ally inte	grated		d	Туре	III - Otl	her	
e	-	-	the organization is not			_		-	-			-	
	persons other than	foundation mana	gers and other than one	or mo	re pub	licly su	pported	d organ	izations	desci	ibed in	section	١
	509(a)(1) or sectio	` ' ' '											
f	If the organization	received a writte	n determination from the	e IRS	that it	is a Ty	ype I, T	ype II,	or Type	e III su	ıpportir	ng	
	organization, check											. Ш	
g	-	006, has the orga	nization accepted any gift	or cor	ntributi	ion from	any of	the					
	following persons?										_		_
			ectly controls, either alor					s desc	ribed in	(ii)		Yes No	_
			dy of the supported organ		?						11g(i)		-
			scribed in (i) above?								11g(ii)		-
_			son described in (i) or (ii) a							l	11g(iii)		_
h		ı -	ut the supported organiza	T ` '		1		I					-
	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv)	ls the zation in		ou notify anization		s the zation in	(vi	i) Amoul suppor		
	o.gaao		above or IRC section	col. (i)	listed in overning	in col	. (i) of	col. (i) o	rganized		очрро.	•	
			(see instructions))	docui	ment?	your su	· ·		U.S.?				
				Yes	No	Yes	No	Yes	No				-
(A)													
													-
(B)													
													-
(C)													
													-
(D)													
													-
(E)													
Total													
													-

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

Schedule A (Form 990 or 990-EZ) 2011

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039

Schedule A (Form 990 or 990-EZ) 2011 Page **2**

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2007 **(b)** 2008 (d) 2010 (c) 2009(e) 2011 (f) Total Calendar year (or fiscal year beginning in) grants, contributions, membership fees received. (Do not 693,239,000. 679,137,000. 552,719,112. 560,907,732. include any "unusual grants.") 541,567,076. 3,027,569,920. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 693,239,000. 679,137,000. 552,719,112. 560,907,732. 541,567,076. 3,027,569,920. The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 308,037,525. shown on line 11, column (f) Public support. Subtract line 5 from line 4. 719,532,395 Section B. Total Support (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 Calendar year (or fiscal year beginning in) **(e)** 2011 (f) Total Amounts from line 4 693,239,000 679,137,000 552,719,112 560,907,732 541,567,076. 3,027,569,920. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 13,255,000 12,212,337 11,283,670 sources 8,311,296 10,012,008 55,074,311. Net income from unrelated business 2,704. 0 9,440 17,836 29,980. activities, whether or not the business 10 Other income. Do not include gain or loss from the sale of capital assets 5,852,622 (Explain in Part IV.) 6,273,000 5,902,000 3,115,071,827. 11 **Total support.** Add lines 7 through 10 . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 87.30 % Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 89.89% 16a 331/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check b 331/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039

Schedule A (Form 990 or 990-EZ) 2011 Page **3**

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

_				-	-	,	
	tion A. Public Support		410000	()0000	4,0,0,4,0	1 () 22()	(n -
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second.	third, fourth, or	fifth tax year a	as a section 501(c)(3)
	organization, check this box and stop here.						▶ □
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2011 (line 8,	column (f) divide	ed by line 13, colur	mn (f))		15	%
16	Public support percentage from 2010 Scheo					16	%
	tion D. Computation of Investmen						
17	Investment income percentage for 2011 (lin			3, column (f))		17	%
18	Investment income percentage from 2010 S					18	%
	331/3% support tests - 2011. If the org						
	17 is not more than 331/3%, check this						
b	331/3% support tests - 2010. If the organ	_	_	•			
~	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization of		•	•			

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COOPERATIVE FOR ASSISTANCE AND RELIEF

Schedule A (Form 990 or 990-EZ) 2011 Page **4**

Part IV Supplemen

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

OTHER INCOME WITHIN TOTAL SUPPORT

SCHEDULE A, PART II, LINE 10

TOTAL OTHER INCOME OF \$5,314,163 CONSISTS OF \$495,472 LIST RENTAL REVENUE

AND \$4,818,691 OF MISCELLANEOUS INCOME GENERATED FROM THE COUNTRY OFFICES

PRIMARILY THROUGH SALE OF ASSETS OR PROGRAM MANAGEMENT FEES.

Schedule A (Form 990 or 990-EZ) 2011

13-1685039

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

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service **Employer identification number** Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE (CARE USA), INC. 13-1685039 Organization type (check one): Filers of: Section: Х Form 990 or 990-EZ 501(c)(3) (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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of o	rganization COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE (CARE USA), INC.		Employer identification number 13-1685039
Part I	Contributors (see instructions). Use duplicate copies of Par	t I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_		\$19,920,196.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_		\$48,768,721.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_		\$141,519,313.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 _		\$45,243,413.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Person Payroll

Noncash

Person Payroll

Noncash

Χ

Х

Χ

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution.)

_ _ 5

(a)

No.

_ _ 6

(b)

Name, address, and ZIP + 4

18,050,682.

19,857,412.

(c)

Total contributions

Page 2

Name of o	rganization COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE (CARE USA), INC.		Employer identification number 13-1685039
Part I	Contributors (see instructions). Use duplicate copies of Par	t I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$11,056,785.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$12,751,407.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$19,012,852.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 10 _		\$11,097,395.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE (CARE USA), INC.

Employer identification number

13-1685039

Page 3

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
3	\$36,467,795 - AGRICULTURAL COMMODITIES \$191,889 - NON FOOD IN-KIND		
		\$\$659,684.	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	MOSQUITO NETS		
		\$\$	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5_	VEHICLES	_	
		\\$31,022.	_05/04/2012
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

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Page 4

Name of o	organization COOPERATIVE FOR ASSIST	ANCE AND RELIE	?	Employer identification number
	EVERYWHERE (CARE USA),			13-1685039
Part III	Exclusively religious, charitable, etc., that total more than \$1,000 for the year.	ear. Complete colur	nns (a) through (e)	and the following line entry.
	For organizations completing Part III, e contributions of \$1,000 or less for the	year. (Enter this inf	ormation once. See	naritable, etc., e instructions.) ►\$
(a) No.	Use duplicate copies of Part III if addition	onai space is neede	u.	
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		er of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship 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) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship 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) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship 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) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee
				Schedule R (Form 990, 990-F7, or 990-PF) (2011)

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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ See separate instructions.

the organization answered "Yes" to Form	990, Part IV, line 3, or Form 990-E	EZ, Part V, line 46 (Political Campaign	Activities), then
---	-------------------------------------	---	-------------------

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• ;	Section	501(c)(4).	(5). c	or (6)	organizations:	Complete	Part III.
-----	---------	------------	--------	--------	----------------	----------	-----------

Name of organization COOPERATIV	VE FOR ASSISTANCE AND RE	LIEF	Employer identif	ication number
EVERYWHERE (CARE USA),			13-168	
Part I-A Complete if the c	organization is exempt under s	section 501(c) or i	s a section 527 organ	ization.
1 Provide a description of the	e organization's direct and indirect p	olitical campaign ac	tivities in Part IV.	
2 Political expenditures			▶\$	
3 Volunteer hours				
	organization is exempt under s		- · · · · ·	
	cise tax incurred by the organizatio			
	cise tax incurred by organization m			
	a section 4955 tax, did it file Form			
b If "Yes," describe in Part IV.				Yes No
Part I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3)).
1 Enter the amount directly e	expended by the filing organization	for section 527 ex	empt function	
activities			▶ \$	
	ng organization's funds contributed	_		
527 exempt function activit	ies		> \$	
	enditures. Add lines 1 and 2. En			
	le Form 1120-POL for this year? s and employer identification numb			
	ts. For each organization listed, en			
	tributions received that were prom			
	ind or a political action committee			
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(4)	(2) / (33) 555	(0) =	filing organization's	contributions received and
			funds. If none, enter -0	promptly and directly delivered to a separate
				political organization. If
				none, enter -0
(1)				
(2)	<u> </u>			
(0)				
(3)				
(4)				
(5)				
(6)	 			

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Schedule C (Form 990 or 990-EZ) 2011

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Sch	nedule C (Form 990 or 990-EZ) 2011	COOPER	ATIVE FC	OR ASSISTANCE A	AND RELIEF	13	1685039 Page Z
Pa	art II-A Complete if the o section 501(h)).	rganizatio	on is exen	npt under sectior	501(c)(3) and	filed Form 5768 (ele	ection under
	name, address	, EIN, expe	enses, and	I share of excess lo	obbying expend		group member's
В	Check ▶ if the filing org	ganization	checked I	oox A and "limited	control" provisio	ons apply.	
	Limi	ts on Lobb	ying Expen	ditures		(a) Filing	(b) Affiliated
	(The term "expend	ditures" m	eans amou	nts paid or incurred	-	organization's totals	group totals
	1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)						
	Total lobbying expenditures to						
С	Total lobbying expenditures (a	add lines 1a	a and 1b)				
d	Other exempt purpose expen	ditures					
е	Total exempt purpose expend	ditures (add	l lines 1c ar	nd 1d)			
	Lobbying nontaxable amount.						
	columns.			J			
	If the amount on line 1e, column	(a) or (b) is:	The lobbying	ng nontaxable amount i	s:		
	Not over \$500,000	(-, - (-, -		amount on line 1e.			
	Over \$500,000 but not over \$1,0	00 000		us 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1			us 10% of the excess			
	Over \$1,500,000 but not over \$1		•	us 5% of the excess of			
		7,000,000	•		vei \$1,300,000.		
_	Over \$17,000,000	nt (antar 25	\$1,000,000				
g					_		
n	Subtract line 1g from line 1a.						
!	Subtract line 1f from line 1c.						
J	If there is an amount other the						
	reporting section 4911 tax for	this year?					Yes No
		ations that lumns belo	made a seew. See the	instructions for lin	n do not have to es 2a through 2		ive
		Lobk	ying Expe	nditures During 4-Y	ear Averaging Pe	riod	I
	Calendar year (or fiscal year beginning in)	(a) 2	800	(b) 2009	(c) 2010	(d) 2011	(e) Total
2 a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2011

JSA 1E1265 1.000

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039

Schedule C (Form 990 or 990-EZ) 2011 Page **3**

Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T filed	d For	m 570	68		
For	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(2	1)		(k)	
	ne lobbying activity.	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:		37				
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X				
C	Media advertisements?		X				
d	Mailings to members, legislators, or the public?		X				
е	Publications, or published or broadcast statements? Grants to other organizations for Johnving purposes?		Х				
f	Grants to other organizations for lobbying purposes?	Х				203	,585.
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X				
i	Other activities?		X				
j	Total. Add lines 1c through 1i					203	,585.
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X				
b	If "Yes," enter the amount of any tax incurred under section 4912						
C C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
d Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	or s	ectio			
ıα	501(c)(6).	(0)(0)	, OI 3	ectio	•		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	—	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? THES Complete if the organization is exempt under section 501(c)(4) section 501.				3	+	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (answered "Yes."	OR (b) Pai	rt III-A	• •	3, is	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid).	ints (οτ				
а				2a			
b	Current year Carryover from last year			2b			
C	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	es		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	bbyir	ng				
	and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
Con 1. A	Supplemental Information applete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line iso, complete this part for any additional information.	5; Pa	rt II-A	; and I	Part II-	B, line	· · · · · · · · · · · · · · · · · · ·
	E PAGE 4						

Schedule C (Form 990 or 990-EZ) 2011

JSA 1E1266 1.000

Schedule C (Form 990 or 990-EZ) 2011 Page 4

COOPERATIVE FOR ASSISTANCE AND RELIEF

Part IV Supplemental Information (continued)

ACTIVITIES THAT ASSIST OUR MISSION OF FIGHTING GLOBAL POVERTY SCHEDULE C, PART II-B, LINE 1F CARE'S ADVOCACY PRIORITIES HARNESS ITS BROAD EXPERIENCE IN THE DEVELOPING WORLD, AND IS FOCUSED ON FOREIGN ASSISTANCE BUDGETING, FOOD SECURITY, SEXUAL AND REPRODUCTIVE HEALTH, GENDER AND WOMEN'S EMPOWERMENT, AND HUMANITARIAN ASSISTANCE. CARE'S PRIMARY LOBBYING IS CONDUCTED BY WAY OF A GRANT TO CARE ACTION NOW, A RELATED, SEPARATELY INCORPORATED 501(C)(4) ORGANIZATION. LOBBYING ACTIVITIES INCLUDED INFLUENCING POLICYMAKERS THROUGH CONGRESSIONAL TESTIMONY, BRIEFINGS, REPORTS AND MEETINGS, AND TARGETED ENGAGEMENT OF THE PUBLIC AT LARGE.

Schedule C (Form 990 or 990-EZ) 2011

PUBLIC DISCLOSURE COPY

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF

EVERYWHERE (CARE USA), INC.

Employer identification number

13-1685039

EVE	RYWHERE (CARE USA), INC.	13-1685039
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or organization answered "Yes" to Form 990, Part IV, line 6.	Accounts. Complete if the
	(a) Donor advised funds	(b) Funds and other accounts
		(b) i unas una suisi associnte
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	danan adukan d
5	Did the organization inform all donors and donor advisors in writing that the assets held in o	
^	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any of the private benefit?	
Par	conferring impermissible private benefit?	rm 000 Part IV line 7
1 ai	Purpose(s) of conservation easements held by the organization (check all that apply).	iiii 990, Fait IV, iiile 7.
•		an historically important land area
		an historically important land area
		a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in t	the form of a conservation
2	easement on the last day of the tax year.	the form of a conservation
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
-	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or termina	•
	tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har	
	violations, and enforcement of the conservation easements it holds?	_
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ease	
	>	5 ,
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easement	ts during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and	expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial	al statements that describes the
	organization's accounting for conservation easements.	
Par		Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educ	evenue statement and balance sheet
	public service, provide, in Part XIV, the text of the footnote to its financial statements that desc	cribes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re-	venue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, educ public service, provide the following amounts relating to these items:	
	(i) Revenues included in Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar as	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	
<u>b</u>	Assets included in Form 990, Part X	▶\$

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

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 Page 2

COOPERATIVE FOR ASSISTANCE AND RELIEF

Par	t III Organizations Maintaini	ng Collections of	Art, Histo	rical Tre	easures	s, or	Other	Similar As	sets (c	continue	ed)	
3	Using the organization's acquisition collection items (check all that app		other reco	rds, checl	k any o	f the	follow	ring that are	a sigr	nificant u	ise o	of its
а	Public exhibition		d	Loa	n or ex	chan	ge prog	ırams				
b	Scholarly research		е	Oth	er							
С	Preservation for future ge	enerations		_								
4	Provide a description of the organ	nization's collections	and explain	ain how t	they fur	ther	the org	ganization's	exemp ⁶	t purpos	e in	Part
	XIV.											
5	During the year, did the organization	on solicit or receive o	donations o	of art, histo	orical tr	easu	res, or	other similar				
	assets to be sold to raise funds rath	ner than to be mainta	ained as pa	art of the o	organiza	ation'	s collec	ction?	[Yes		No
Par	Escrow and Custodial A line 9, or reported an an				nization	ans	wered	"Yes" to Fo	orm 99	00, Part	IV,	
1 a	Is the organization an agent, truste			-	ontributi	ons o	or other	assets not	Г			٦
	included on Form 990, Part X?								· · · L	Yes	X	No
b	If "Yes," explain the arrangement in	Part XIV and comp	lete the fol	lowing tab	ole:							
								Am	ount			
C	Beginning balance					1 c						
d	Additions during the year					1d						
_	Distributions during the year					1e						
f	Ending balance									1		T
	Did the organization include an am		Part X, line	21?					L	Yes	X	No
	If "Yes," explain the arrangement in				W. C. II.							
Par	t V Endowment Funds. Con											
٠.	Danis dan afasan balansa	(a) Current year	(b) Prid		(c) Tw			(d) Three year		(e) Four	years	back
	Beginning of year balance	36,854,409.		7,142.	60,1	151,	642.	76,448,	537.			
b	Contributions	2,925,473.	1,43	3,549.								
С	Net investment earnings, gains,											
	and losses	539,481.	6,90	9,644.	8,2	244,	356.	-12,160,	895.			
	Grants or scholarships											
е	Other expenditures for facilities .											
_	and programs	7,245,980.		0,609.			267.	4,006				
t	Administrative expenses	22,566.		5,317.			352.		,000.			
g	End of year balance	33,050,817.		4,409.			379.	60,151,	642.			
2	Provide the estimated percentage	-		e (line 1g,	column	(a))	held as	:				
а	Board designated or quasi-endown		8_%									
	Permanent endowment ▶75.0											
С	Temporarily restricted endowment											
_	The percentages in lines 2a, 2b, ar											
за	Are there endowment funds not in	the possession of the	ne organiza	ation that	are hel	d and	d admir	nistered for th	ie			
	organization by:										Yes	No
	(i) unrelated organizations									1.7	Х	
	(ii) related organizations									3a(ii)		X
b	If "Yes" to 3a(ii), are the related org		•							3b		
4	Describe in Part XIV the intended u											
Par	t VI Land, Buildings, and Equ	uipment. See Forr	n 990, Pa	ırt X, line	10.							
	Description of property		other basis tment)	(b) Cost (0	or other ba ther)	sis		cumulated eciation	(c	d) Book val	ue	
	Land			<u> </u>	191,26					3,19		
	Buildings			<u> </u>	539,35	_		45,564.		2,19		
С	Leasehold improvements			1,1	L94,25	50.		80,321.		11	.3,9	29.
d	Equipment			44,5	562,71	L4.	25,3	88,173.		19,17	4,5	41.
	Other											
Γ∩t a	I Add lines 1a through 1e (Column	(d) must equal Form	n QQA Part	X columi	n(R) lin	na 10	(c))			24 67	3 5	33

Schedule D (Form 990) 2011

JSA 1E1269 1.000

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039

Schedule D (F	Form 990) 2011		Paç	ge 3
Part VII	Investments - Other Securities. See Form	n 990, Part X, line	e 12.	
	(a) Description of security or category (including name of security)		(c) Method of valuation: Cost or end-of-year market value	
(1) Financia	al derivatives			
	-held equity interests			
(3) Other				
<u>(A)</u>				
(B)				
<u>(C)</u>				
(D)				
(E)				
(F)				
<u>(G)</u> (H)				
(11)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII		n 990 Part X line	Le 13	
r are viii	(a) Description of investment type	(b) Book value	(c) Method of valuation:	
	(a) 2 coonplien of investment type	(2) 2001. Tailab	Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, line			
(1) mp.r.c.	(a) Des TS HELD BY THIRD PARTY	cription	(b) Book value	4.0
	LOANS TO CARE INT'L		107,081,44	
_ ` '	R LONG TERM INVESTMENT		1,468,68	
(4) DEPO			812,0	
(5)	0110		012,0	
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 15.)			59.
Part X	Other Liabilities. See Form 990, Part X, lin	ne 25.		
1.	(a) Description of liability	(b) Book value	<u>e </u>	
	ral income taxes			
	FITS ACCRUED-OVERSEAS NATL STF	29,566,4		
	R LIABILITIES	872,3	370.	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
<u>(10)</u> (11)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)	30,438,8	315.	
1001011	(1), 1.2.2.2.4.2.2.1.2.2.3.4.2.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4			

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

JSA 1E1270 1.000 COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039

Schedu	le D (Form 990) 2011	Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statemer	nts
1	Total revenue (Form 990, Part VIII, column (A), line 12)	
2	Total expenses (Form 990, Part IX, column (A), line 25)	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities 5	
6	Investment expenses 6	
7	Prior period adjustments 7	-
8	Other (Describe in Part XIV.)	
9	Total adjustments (net). Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1
a	Net unrealized gains on investments 2a	
b	Donated services and use of facilities 2b	
C	Recoveries of prior year grants 2c	
d	Other (Describe in Part XIV.)	
e	Add lines 2a through 2d	20
3	Add lines 2a through 2d Subtract line 2e from line 1	2e 3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3
	Investment expenses not included on Form 990, Part VIII, line 7b.	
a b		
C	Add Page 4 and 41	40
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	4c 5
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	
1 1	Total amount and leaves are suffered for a rial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1
a		
b		
c d	Other losses Other (Describe in Part XIV.) 2d	
e		20
3	Add lines 2a through 2d Subtract line 2e from line 1	2e
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3
=		
a	Other (Describe in Part XIV.) 4a 4b	
	Add lines 4a and 4b	40
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	4c
	XIV Supplemental Information	5
Comp Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete additional information.	V, lines 1b and 2b; e this part to provide
SEE_	PAGE 5	

Schedule D (Form 990) 2011

Part XIV Supplemental Information (continued)

SCHEDULE D, PART V, LINE 1A

THERE IS A VARIANCE BETWEEN FISCAL YEAR END 2010 CLOSING BALANCE AND

FISCAL YEAR END 2011 OPENING BALANCE DUE TO THE FOLLOWING:

ENDOWMENT, BEG OF YR BALANCE DIFFERENT FROM PRIOR YR END BALANCE

- NOTE THAT THE TIME SPECIFIED FOR TWO TERM ENDOWMENTS EXPIRED AND WERE REMOVED FROM THE BEGINNING BALANCE FOR FY2011.
- IT WAS DETERMINED THAT TWO OF OUR DONOR POOLS SHOULD NOT BE DESIGNATED AS QUASI-ENDOWMENTS AS THERE WAS NO BOARD MANDATE TO THAT EFFECT; AS SUCH, THEY WERE REMOVED FROM THE FY11 ENDOWMENT BALANCE.

INTENDED USE OF ORGANIZATION'S ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENTS IS TO FUND PROGRAMS

CONSISTENT WITH THE ORGANIZATION'S MISSION AS DIRECTED BY THE DONORS WHO

HAVE ESTABLISHED THOSE ENDOWMENTS.

FIN 48 FS FOOTNOTE

SCHEDULE D, PART X, LINE 2

IN JUNE 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ISSUED FASB INTERPRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, AN INTERPRETATION OF FASB STATEMENT NO.L 109 (ASC 740) ("FIN 48"). FIN 48 PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN WHEN THERE IS UNCERTAINTY ABOUT WHETHER A TAX POSITION WILL ULTIMATELY BE SUSTAINED

Schedule D (Form 990) 2011

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Schedule D (Form 990) 2011

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

Page 5

Part XIV Supplemental Information (continued)

UPON EXAMINATION. CARE USA HAS ADOPTED THE RECOGNITION AND DISCLOSURE PROVISIONS OF FIN 48 FOR ITS FISCAL YEAR ENDING JUNE 30, 2012.

Schedule D (Form 990) 2011

JSA 1E1226 2.000

PUBLIC DISCLOSURE COPY

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

ame (of the organization COOPERATIVE	FOR ASSIS	TANCE AND	RELIEF	Employer identific	ation number
VEF	RYWHERE (CARE USA), INC	Ξ.			13-168503	9
art	General Information of Form 990, Part IV, line 14		Outside the U	Jnited States. Complete	if the organization answer	ered "Yes" to
1	For grantmakers. Does the orga	nization mainta	in records to s	substantiate the amount of	f its grants and other	
	assistance, the grantees' eligibili	ty for the grant	s or assistance	e, and the selection criter	ia used to award the	
	grants or assistance?					X Yes No
	For grantmakers. Describe in assistance outside the United Sta	-	ganization's pr	rocedures for monitoring	the use of its grants	and other
3	Activities per Region. (The follow	ing Part I, line	3 table can be	e duplicated if additional sp	pace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	CENTRAL AMERICA/CARIBBEAN	16.	667.	PROGRAM SERVICES	RELIEF & DEVELOPMENT	37,379,753.
(2)	MIDDLE EAST AND NORTH AFRICA	16.	214.	PROGRAM SERVICES	RELIEF & DEVELOPMENT	24,884,540.
(3)	RUSSIA/INDEPENDENT STATES	1.	48.	PROGRAM SERVICES	RELIEF & DEVELOPMENT	4,250,234.
(4)	SOUTH AMERICA	13.	303.	PROGRAM SERVICES	RELIEF & DEVELOPMENT	28,648,726.
(5)	SOUTH ASIA	54.	2,119.	PROGRAM SERVICES	RELIEF & DEVELOPMENT	104,139,893.
(6)	SUB-SAHARAN AFRICA	116.	2,930.	PROGRAM SERVICES	RELIEF & DEVELOPMENT	282,548,410.
(7)	EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RELIEF & DEVELOPMENT	5,612,726.
(8)	EUROPE (INCLUDING ICELAND AND			PROGRAM SERVICES	RELIEF & DEVELOPMENT	196,305.
(9)						
10)						
11)						
12)						
13)						
14)						
15)						
16)						
17)	Cub total					
3a b	Sub-total continuation	216.	6,281.			487,660,587.
	sheets to Part I					
С	Totals (add lines 3a and 3b)	216.	6,281.			487,660,587.

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

Schedule F (Form 990) 2011

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COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039

Schedule F (Form 990) 2011	Page 2

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed.										
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
(1)			SUB-SAHARAN AFRICA	2 - PT V	27,101.	EFT		N/A	FMV		
(2)			SUB-SAHARAN AFRICA	3 - PT V	117,696.	EFT		N/A	FMV		
(3)			SUB-SAHARAN AFRICA	4 - PT V	125,138.	EFT		N/A	FMV		
(4)			SOUTH ASIA	5 - PT V	5,784.	EFT		N/A	FMV		
(5)			SOUTH ASIA	6 - PT V	53,725.	EFT		N/A	FMV		
(6)			SOUTH ASIA	7 - PT V	37,766.	EFT		N/A	FMV		
(7)			SOUTH ASIA	8 - PT V	31,841.	EFT		N/A	FMV		
(8)			RUSSIA	9 - PT V	130,896.	EFT		N/A	FMV		
(9)			RUSSIA	10 - PT V	25,662.	EFT		N/A	FMV		
(10)			RUSSIA	11 - PT V	46,069.	EFT		N/A	FMV		
(11)			SUB-SAHARAN AFRICA	12 - PT V	19,862.	EFT		N/A	FMV		
(12)			SUB-SAHARAN AFRICA	13 - PT V	27,787.	EFT		N/A	FMV		
(13)			SUB-SAHARAN AFRICA	14 - PT V	66,809.	EFT		N/A	FMV		
(14)			SOUTH ASIA	15 - PT V	29,461.	EFT		N/A	FMV		
(15)			SOUTH ASIA	16 - PT V	34,668.	EFT		N/A	FMV		
(16)			SUB-SAHARAN AFRICA	17 - PT V	12,387.	EFT		N/A	FMV		
by th	r total number of recipient orga e IRS, or for which the grantee r total number of other organiza	or counsel has pro	vided a section 501(c)(3) equivalency letter			xempt				

Schedule F (Form 990) 2011

JSA

1E1275 1.000

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039

Schedule F (m 990) 2011	2
ochedule i (i	iii 990) 2011	

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
1)			SUB-SAHARAN AFRICA	18 - PT V	10,287.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	19 - PT V	5,014.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	20 - PT V	27,849.	EFT		N/A	FMV
4)			SOUTH ASIA	21 - PT V	12,849.	EFT		N/A	FMV
5)			SOUTH ASIA	22 - PT V	22,868.	EFT		N/A	FMV
6)			SOUTH ASIA	23 - PT V	6,705.	EFT		N/A	FMV
7)			SOUTH ASIA	24 - PT V	17,752.	EFT		N/A	FMV
8)			SOUTH AMERICA	25 - PT V	59,326.	EFT		N/A	FMV
9)			SOUTH ASIA	26 - PT V	111,221.	EFT		N/A	FMV
10)			SOUTH ASIA	27 - PT V	48,105.	CHECK		N/A	FMV
11)			SUB-SAHARAN AFRICA	28 - PT V	148,780.	EFT		N/A	FMV
12)			SOUTH ASIA	29 - PT V	9,304.	EFT		N/A	FMV
13)			SOUTH ASIA	30 - PT V	171,798.	EFT		N/A	FMV
14)			CENT. AMERICA/CARIBBEAN	31 - PT V	6,580.	CHECK		N/A	FMV
15)			CENT. AMERICA/CARIBBEAN	32 - PT V	9,956.	CHECK		N/A	FMV
16)			SUB-SAHARAN AFRICA	33 - PT V	9,921.	MONEY ORDER		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM appraisa other)
)			SUB-SAHARAN AFRICA	34 - PT V	78,729.	MONEY ORDER		N/A	FMV
)			SUB-SAHARAN AFRICA	35 - PT V	37,060.	MONEY ORDER		N/A	FMV
)			SUB-SAHARAN AFRICA	36 - PT V	177,452.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	37 - PT V	36,822.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	38 - PT V	91,993.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	39 - PT V	21,378.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	40 - PT V	50,629.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	41 - PT V	274,350.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	42 - PT V	14,545.	CHECK		N/A	FMV
0)			SUB-SAHARAN AFRICA	43 - PT V	35,856.	CHECK		N/A	FMV
1)			SUB-SAHARAN AFRICA	44 - PT V	5,878.	CHECK		N/A	FMV
2)			SUB-SAHARAN AFRICA	45 - PT V	23,207.	CHECK		N/A	FMV
3)			SUB-SAHARAN AFRICA	46 - PT V	5,670.	CHECK		N/A	FMV
4)			SUB-SAHARAN AFRICA	47 - PT V	38,775.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	48 - PT V	233,766.	EFT		N/A	FMV
6)			SUB-SAHARAN AFRICA	49 - PT V	29,726.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	50 - PT V	5,434.	CHECK		N/A	FMV
(2)			CENT. AMERICA/CARIBBEAN	51 - PT V	20,259.	CHECK		N/A	FMV
(3)			SUB-SAHARAN AFRICA	52 - PT V	30,544.	CHECK		N/A	FMV
(4)			SUB-SAHARAN AFRICA	53 - PT V	65,626.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	54 - PT V	17,358.	EFT		N/A	FMV
(6)			SOUTH ASIA	55 - PT V	5,147.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	56 - PT V	154,929.	CHECK		N/A	FMV
(8)			SOUTH ASIA	57 - PT V	37,600.	EFT		N/A	FMV
(9)			SOUTH ASIA	58 - PT V	57,586.	EFT		N/A	FMV
(10)			SOUTH ASIA	59 - PT V	148,742.	EFT		N/A	FMV
(11)			SOUTH ASIA	60 - PT V	45,262.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	61 - PT V	11,955.	CHECK		N/A	FMV
(13)			SUB-SAHARAN AFRICA	63 - PT V	7,065.	CHECK		N/A	FMV
(14)			SOUTH ASIA	64 - PT V	6,895.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	65 - PT V	11,135.	EFT		N/A	FMV
(16)			CENT. AMERICA/CARIBBEAN	66 - PT V	8,046.	CHECK		N/A	FMV

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	Part II can be duplicated it						nt of (h) Description	(i) Method of	
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST/NORTH AFRICA	67 - PT V	61,995.	EFT		N/A	FMV
(2)			CENT. AMERICA/CARIBBEAN	68 - PT V	42,626.	CHECK		N/A	FMV
(3)			CENT. AMERICA/CARIBBEAN	69 - PT V	23,736.	CHECK		N/A	FMV
(4)			CENT. AMERICA/CARIBBEAN	70 - PT V	7,917.	CHECK		N/A	FMV
(5)			CENT. AMERICA/CARIBBEAN	71 - PT V	8,365.	CHECK		N/A	FMV
(6)			CENT. AMERICA/CARIBBEAN	72 - PT V	26,772.	CHECK		N/A	FMV
(7)			CENT. AMERICA/CARIBBEAN	73 - PT V	24,116.	CHECK		N/A	FMV
(8)			CENT. AMERICA/CARIBBEAN	74 - PT V	8,729.	CHECK		N/A	FMV
(9)			CENT. AMERICA/CARIBBEAN	75 - PT V	6,801.	CHECK		N/A	FMV
(10)			CENT. AMERICA/CARIBBEAN	76 - PT V	29,294.	CHECK		N/A	FMV
(11)			CENT. AMERICA/CARIBBEAN	77 - PT V	12,823.	CHECK		N/A	FMV
(12)			CENT. AMERICA/CARIBBEAN	78 - PT V	9,994.	CHECK		N/A	FMV
(13)			CENT. AMERICA/CARIBBEAN	79 - PT V	7,181.	CHECK		N/A	FMV
(14)			CENT. AMERICA/CARIBBEAN	80 - PT V	15,373.	CHECK		N/A	FMV
(15)			CENT. AMERICA/CARIBBEAN	81 - PT V	36,334.	CHECK		N/A	FMV
(16)			MIDDLE EAST/NORTH AFRICA	82 - PT V	26,879.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST/NORTH AFRICA	83 - PT V	26,879.	CHECK		N/A	FMV
(2)			SOUTH AMERICA	84 - PT V	119,046.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	85 - PT V	231,859.	EFT		N/A	FMV
(4)			MIDDLE EAST/NORTH AFRICA	86 - PT V	81,324.	CHECK		N/A	FMV
(5)			SUB-SAHARAN AFRICA	87 - PT V	65,789.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	88 - PT V	31,461.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	89 - PT V	44,956.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	90 - PT V	60,825.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	91 - PT V	14,832.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	92 - PT V	277,716.	EFT		N/A	FMV
[11)			SUB-SAHARAN AFRICA	93 - PT V	104,457.	EFT		N/A	FMV
(12)			SOUTH ASIA	94 - PT V	11,266.	EFT		N/A	FMV
13)			SUB-SAHARAN AFRICA	95 - PT V	23,658.	MONEY ORDER		N/A	FMV
[14]			SUB-SAHARAN AFRICA	96 - PT V	79,496.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	97 - PT V	35,374.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	98 - PT V	168,227.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Methodo valuation (book, FM appraisa other)
1)			CENT. AMERICA/CARIBBEAN	99 - PT V	30,255.	CHECK		N/A	FMV
2)			SUB-SAHARAN AFRICA	100 - PT V	95,422.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	101 - PT V	28,674.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	102 - PT V	8,732.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	103 - PT V	7,658.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	104 - PT V	7,658.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	105 - PT V	61,927.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	106 - PT V	66,084.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	107 - PT V	8,963.	EFT		N/A	FMV
))			SUB-SAHARAN AFRICA	108 - PT V	15,280.	EFT		N/A	FMV
1)			SUB-SAHARAN AFRICA	109 - PT V	64,503.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	110 - PT V	83,603.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	111 - PT V	80,186.	EFT		N/A	FMV
1)			SOUTH ASIA	112 - PT V	15,567.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	113 - PT V	43,535.	EFT		N/A	FMV
6)			SUB-SAHARAN AFRICA	114 - PT V	39,271.	EFT		N/A	FMV

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal, other)
)			SUB-SAHARAN AFRICA	115 - PT V	57,657.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	116 - PT V	109,152.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	117 - PT V	14,790.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	118 - PT V	8,130.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	119 - PT V	11,130.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	120 - PT V	7,392.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	121 - PT V	7,902.	MONEY ORDER		N/A	FMV
)			SOUTH ASIA	122 - PT V	85,039.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	123 - PT V	42,794.	EFT		N/A	FMV
0)			SUB-SAHARAN AFRICA	124 - PT V	49,277.	EFT		N/A	FMV
1)			SUB-SAHARAN AFRICA	125 - PT V	38,310.	CHECK		N/A	FMV
2)			SUB-SAHARAN AFRICA	126 - PT V	41,894.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	127 - PT V	144,615.	EFT		N/A	FMV
4)			SUB-SAHARAN AFRICA	128 - PT V	495,006.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	129 - PT V	189,529.	EFT		N/A	FMV
6)			SUB-SAHARAN AFRICA	130 - PT V	17,633.	MONEY ORDER		N/A	FMV

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	Part II can be duplicated in	· ·				(0.14	(-) A	(In) December in the con-	(i) Method of
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	131 - PT V	67,640.	EFT		N/A	FMV
(2)			SOUTH ASIA	132 - PT V	19,354.	EFT		N/A	FMV
(3)			SOUTH ASIA	133 - PT V	53,633.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	134 - PT V	5,086.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	135 - PT V	52,979.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	136 - PT V	27,446.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	137 - PT V	48,912.	EFT		N/A	FMV
(8)			SOUTH ASIA	138 - PT V	9,671.	EFT		N/A	FMV
(9)			MIDDLE EAST/NORTH AFRICA	139 - PT V	57,194.	EFT		N/A	FMV
(10)			SOUTH ASIA	140 - PT V	10,055.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	141 - PT V	17,918.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	142 - PT V	11,167.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	143 - PT V	38,533.	MONEY ORDER		N/A	FMV
(14)			SUB-SAHARAN AFRICA	144 - PT V	9,931.	MONEY ORDER		N/A	FMV
(15)			SUB-SAHARAN AFRICA	145 - PT V	61,184.	MONEY ORDER		N/A	FMV
(16)			SUB-SAHARAN AFRICA	146 - PT V	12,923.	MONEY ORDER		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM appraisa other)
1)			SUB-SAHARAN AFRICA	147 - PT V	126,880.	EFT		N/A	FMV
2)			SOUTH AMERICA	148 - PT V	79,398.	EFT		N/A	FMV
3)			CENT. AMERICA/CARIBBEAN	149 - PT V	30,225.	CHECK		N/A	FMV
1)			SOUTH AMERICA	150 - PT V	35,322.	EFT		N/A	FMV
5)			SOUTH AMERICA	151 - PT V	42,493.	EFT		N/A	FMV
6)			CENT. AMERICA/CARIBBEAN	152 - PT V	53,205.	CHECK		N/A	FMV
')			CENT. AMERICA/CARIBBEAN	153 - PT V	146,710.	CHECK		N/A	FMV
3)			CENT. AMERICA/CARIBBEAN	154 - PT V	38,091.	CHECK		N/A	FMV
)			CENT. AMERICA/CARIBBEAN	155 - PT V	40,579.	CHECK		N/A	FMV
0)			CENT. AMERICA/CARIBBEAN	156 - PT V	245,959.	CHECK		N/A	FMV
1)			CENT. AMERICA/CARIBBEAN	157 - PT V	110,797.	CHECK		N/A	FMV
2)			CENT. AMERICA/CARIBBEAN	158 - PT V	65,958.	CHECK		N/A	FMV
3)			CENT. AMERICA/CARIBBEAN	159 - PT V	29,390.	CHECK		N/A	FMV
4)			CENT. AMERICA/CARIBBEAN	160 - PT V	19,000.	CHECK		N/A	FMV
5)			CENT. AMERICA/CARIBBEAN	161 - PT V	32,845.	CHECK		N/A	FMV
6)			CENT. AMERICA/CARIBBEAN	162 - PT V	28,772.	CHECK		N/A	FMV

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
1)			CENT. AMERICA/CARIBBEAN	163 - PT V	9,967.	CHECK		N/A	FMV
2)			CENT. AMERICA/CARIBBEAN	164 - PT V	6,815.	CHECK		N/A	FMV
3)			CENT. AMERICA/CARIBBEAN	165 - PT V	60,790.	CHECK		N/A	FMV
(4)			SUB-SAHARAN AFRICA	166 - PT V	7,521.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	167 - PT V	20,081.	EFT		N/A	FMV
(6)			SOUTH ASIA	168 - PT V	19,756.	CHECK		N/A	FMV
7)			SOUTH ASIA	169 - PT V	507,232.	CHECK		N/A	FMV
(8)			SOUTH ASIA	170 - PT V	17,305.	CHECK		N/A	FMV
(9)			SUB-SAHARAN AFRICA	171 - PT V	5,077.	MONEY ORDER		N/A	FMV
(10)			SUB-SAHARAN AFRICA	172 - PT V	5,074.	MONEY ORDER		N/A	FMV
(11)			SUB-SAHARAN AFRICA	173 - PT V	22,870.	EFT		N/A	FMV
(12)			SOUTH ASIA	174 - PT V	24,621.	EFT		N/A	FMV
(13)			MIDDLE EAST/NORTH AFRICA	175 - PT V	27,209.	CHECK		N/A	FMV
14)			MIDDLE EAST/NORTH AFRICA	176 - PT V	9,757.	CHECK		N/A	FMV
15)			MIDDLE EAST/NORTH AFRICA	177 - PT V	25,740.	CHECK		N/A	FMV
(16)			RUSSIA	178 - PT V	65,550.	EFT		N/A	FMV

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Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	eived more than \$5,00						▶□
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	179 - PT V	1,709,375.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	180 - PT V	24,178.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	181 - PT V	27,686.	CHECK		N/A	FMV
(4)			SOUTH ASIA	182 - PT V	32,873.	EFT		N/A	FMV
(5)			SOUTH ASIA	183 - PT V	68,209.	EFT		N/A	FMV
(6)			SOUTH ASIA	184 - PT V	301,810.	EFT		N/A	FMV
(7)			SOUTH ASIA	185 - PT V	20,052.	EFT		N/A	FMV
(8)			SOUTH ASIA	186 - PT V	61,048.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	187 - PT V	6,499.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	188 - PT V	11,916.	CHECK		N/A	FMV
(11)			SOUTH ASIA	189 - PT V	8,817.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	190 - PT V	47,339.	EFT		N/A	FMV
(13)			SOUTH ASIA	191 - PT V	6,838.	EFT		N/A	FMV
(14)			SOUTH ASIA	192 - PT V	5,208.	EFT		N/A	FMV
(15)			SOUTH ASIA	193 - PT V	7,087.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	194 - PT V	61,510.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal, other)
(1)			SOUTH ASIA	195 - PT V	459,997.	EFT		N/A	FMV
(2)			SOUTH ASIA	196 - PT V	14,081.	CHECK		N/A	FMV
(3)			SUB-SAHARAN AFRICA	197 - PT V	14,941.	CHECK		N/A	FMV
(4)			MIDDLE EAST/NORTH AFRICA	198 - PT V	61,750.	EFT		N/A	FMV
(5)			SOUTH ASIA	199 - PT V	8,918.	EFT		N/A	FMV
(6)			SOUTH ASIA	200 - PT V	6,946.	EFT		N/A	FMV
7)			SOUTH ASIA	201 - PT V	8,293.	EFT		N/A	FMV
(8)			SOUTH ASIA	202 - PT V	12,283.	EFT		N/A	FMV
9)			SOUTH ASIA	203 - PT V	10,772.	EFT		N/A	FMV
(10)			SOUTH ASIA	204 - PT V	9,019.	EFT		N/A	FMV
[11)			SOUTH ASIA	205 - PT V	12,841.	EFT		N/A	FMV
(12)			SOUTH ASIA	206 - PT V	7,751.	EFT		N/A	FMV
(13)			SOUTH ASIA	207 - PT V	10,930.	EFT		N/A	FMV
[14]			SOUTH ASIA	208 - PT V	9,231.	EFT		N/A	FMV
(15)			SOUTH ASIA	209 - PT V	24,106.	EFT		N/A	FMV
(16)			RUSSIA	210 - PT V	17,580.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Metho valuation (book, FI) apprais other)
)			SOUTH ASIA	211 - PT V	558,769.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	212 - PT V	68,050.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	213 - PT V	17,227.	CHECK		N/A	FMV
			SUB-SAHARAN AFRICA	214 - PT V	12,390.	CHECK		N/A	FMV
			SUB-SAHARAN AFRICA	215 - PT V	14,581.	CHECK		N/A	FMV
			SUB-SAHARAN AFRICA	216 - PT V	19,486.	EFT		N/A	FMV
			SOUTH ASIA	217 - PT V	72,207.	CHECK		N/A	FMV
			SUB-SAHARAN AFRICA	218 - PT V	75,931.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	219 - PT V	16,762.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	220 - PT V	19,379.	EFT		N/A	FMV
)			SOUTH ASIA	221 - PT V	20,933.	EFT		N/A	FMV
:)			SOUTH ASIA	222 - PT V	21,191.	EFT		N/A	FMV
3)			SOUTH ASIA	223 - PT V	21,206.	EFT		N/A	FMV
·)			SOUTH ASIA	224 - PT V	27,923.	EFT		N/A	FMV
)			SOUTH ASIA	225 - PT V	21,953.	EFT		N/A	FMV
6)			SOUTH ASIA	226 - PT V	21,183.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
1)			SOUTH ASIA	227 - PT V	25,144.	EFT		N/A	FMV
2)			SOUTH ASIA	228 - PT V	21,765.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	229 - PT V	69,048.	CHECK		N/A	FMV
4)			SUB-SAHARAN AFRICA	230 - PT V	30,684.	CHECK		N/A	FMV
5)			SUB-SAHARAN AFRICA	231 - PT V	72,063.	CHECK		N/A	FMV
6)			SUB-SAHARAN AFRICA	232 - PT V	88,950.	EFT		N/A	FMV
7)			SUB-SAHARAN AFRICA	233 - PT V	38,361.	EFT		N/A	FMV
8)			SUB-SAHARAN AFRICA	234 - PT V	10,700.	CHECK		N/A	FMV
9)			SUB-SAHARAN AFRICA	235 - PT V	278,203.	CHECK		N/A	FMV
10)			SUB-SAHARAN AFRICA	236 - PT V	45,852.	CHECK		N/A	FMV
11)			SUB-SAHARAN AFRICA	237 - PT V	328,850.	CHECK		N/A	FMV
12)			SUB-SAHARAN AFRICA	238 - PT V	10,652.	EFT		N/A	FMV
13)			CENT. AMERICA/CARIBBEAN	239 - PT V	14,018.	CHECK		N/A	FMV
14)			CENT. AMERICA/CARIBBEAN	240 - PT V	81,858.	CHECK		N/A	FMV
15)			SUB-SAHARAN AFRICA	241 - PT V	12,860.	EFT		N/A	FMV
16)			SOUTH AMERICA	242 - PT V	40,314.	EFT		N/A	FMV

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1	Part II can be duplicated i	· ·		(d) Dumos of	(a) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
·	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	243 - PT V	230,597.	EFT		N/A	FMV
(2)			SOUTH ASIA	244 - PT V	1,798,024.	EFT		N/A	FMV
(3)			RUSSIA	245 - PT V	8,324.	EFT		N/A	FMV
(4)			RUSSIA	246 - PT V	7,245.	EFT		N/A	FMV
(5)			RUSSIA	247 - PT V	8,074.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	248 - PT V	68,240.	EFT		N/A	FMV
(7)			SOUTH AMERICA	249 - PT V	162,441.	EFT		N/A	FMV
(8)			RUSSIA	250 - PT V	43,372.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	251 - PT V	18,160.	CHECK		N/A	FMV
(10)			RUSSIA	252 - PT V	13,773.	EFT		N/A	FMV
(11)			RUSSIA	253 - PT V	45,072.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	254 - PT V	7,635.	EFT		N/A	FMV
(13)			SOUTH ASIA	255 - PT V	13,610.	EFT		N/A	FMV
(14)			SOUTH AMERICA	256 - PT V	23,420.	EFT		N/A	FMV
(15)			CENT. AMERICA/CARIBBEAN	257 - PT V	27,775.	CHECK		N/A	FMV
(16)			SOUTH AMERICA	258 - PT V	115,962.	EFT		N/A	FMV

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Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	eived more than \$5,000.						▶□
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	259 - PT V	159,658.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	260 - PT V	52,718.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	261 - PT V	9,404.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	262 - PT V	76,048.	EFT		N/A	FMV
(5)			SOUTH ASIA	263 - PT V	6,308.	EFT		N/A	FMV
(6)			SOUTH ASIA	264 - PT V	5,400.	EFT		N/A	FMV
(7)			MIDDLE EAST/NORTH AFRICA	265 - PT V	77,955.	CHECK		N/A	FMV
(8)			MIDDLE EAST/NORTH AFRICA	266 - PT V	24,130.	CHECK		N/A	FMV
(9)			SUB-SAHARAN AFRICA	267 - PT V	25,834.	CHECK		N/A	FMV
(10)			SUB-SAHARAN AFRICA	268 - PT V	24,465.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	269 - PT V	17,893.	EFT		N/A	FMV
(12)			SOUTH ASIA	270 - PT V	7,491.	EFT		N/A	FMV
(13)			SOUTH ASIA	271 - PT V	17,651.	EFT		N/A	FMV
(14)			SOUTH ASIA	272 - PT V	5,507.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	273 - PT V	50,425.	CHECK		N/A	FMV
(16)			SOUTH ASIA	274 - PT V	12,896.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	275 - PT V	5,561.	EFT		N/A	FMV
(2)			CENT. AMERICA/CARIBBEAN	276 - PT V	81,958.	CHECK		N/A	FMV
(3)			SOUTH AMERICA	277 - PT V	152,143.	EFT		N/A	FMV
(4)			SOUTH AMERICA	278 - PT V	16,519.	CHECK		N/A	FMV
(5)			RUSSIA	279 - PT V	7,702.	EFT		N/A	FMV
(6)			RUSSIA	280 - PT V	8,683.	EFT		N/A	FMV
(7)			RUSSIA	281 - PT V	93,751.	EFT		N/A	FMV
(8)			RUSSIA	282 - PT V	39,739.	EFT		N/A	FMV
(9)			SOUTH ASIA	283 - PT V	265,207.	EFT		N/A	FMV
(10)			SOUTH ASIA	284 - PT V	348,238.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	285 - PT V	16,583.	CASH		N/A	FMV
(12)			SOUTH ASIA	286 - PT V	152,788.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	287 - PT V	136,034.	CASH		N/A	FMV
(14)			RUSSIA	288 - PT V	10,520.	EFT		N/A	FMV
(15)			RUSSIA	289 - PT V	112,681.	EFT		N/A	FMV
(16)			RUSSIA	290 - PT V	38,720.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuatio (book, FM appraisa other)
1)			SUB-SAHARAN AFRICA	291 - PT V	82,884.	CHECK		N/A	FMV
2)			SUB-SAHARAN AFRICA	292 - PT V	10,313.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	293 - PT V	14,655.	EFT		N/A	FMV
)			SOUTH ASIA	294 - PT V	20,339.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	295 - PT V	19,142.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	296 - PT V	5,568.	EFT		N/A	FMV
)			CENT. AMERICA/CARIBBEAN	297 - PT V	29,710.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	298 - PT V	18,866.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	299 - PT V	22,552.	EFT		N/A	FMV
0)			SOUTH ASIA	300 - PT V	5,335.	EFT		N/A	FMV
1)			SUB-SAHARAN AFRICA	301 - PT V	54,567.	CHECK		N/A	FMV
2)			SOUTH ASIA	302 - PT V	20,925.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	303 - PT V	12,598.	EFT		N/A	FMV
4)			SUB-SAHARAN AFRICA	304 - PT V	5,673.	EFT		N/A	FMV
5)			SOUTH ASIA	305 - PT V	10,202.	EFT		N/A	FMV
6)			SUB-SAHARAN AFRICA	306 - PT V	97,876.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			SOUTH ASIA	307 - PT V	27,120.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	308 - PT V	43,236.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	309 - PT V	77,354.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	310 - PT V	66,482.	EFT		N/A	FMV
5)			SOUTH ASIA	311 - PT V	100,003.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	312 - PT V	72,198.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	313 - PT V	24,449.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	314 - PT V	17,214.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	315 - PT V	6,440.	EFT		N/A	FMV
10)			SUB-SAHARAN AFRICA	316 - PT V	83,530.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	317 - PT V	61,052.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	318 - PT V	45,603.	EFT		N/A	FMV
13)			SUB-SAHARAN AFRICA	319 - PT V	32,755.	EFT		N/A	FMV
14)			SUB-SAHARAN AFRICA	320 - PT V	103,405.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	321 - PT V	51,855.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	322 - PT V	7,320.	EFT		N/A	FMV

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
[1)			SUB-SAHARAN AFRICA	323 - PT V	21,830.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	324 - PT V	67,972.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	325 - PT V	112,276.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	326 - PT V	27,836.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	327 - PT V	13,937.	EFT		N/A	FMV
6)			CENT. AMERICA/CARIBBEAN	328 - PT V	5,884.	CHECK		N/A	FMV
7)			CENT. AMERICA/CARIBBEAN	329 - PT V	18,882.	CHECK		N/A	FMV
(8)			SOUTH AMERICA	330 - PT V	65,718.	EFT		N/A	FMV
9)			CENT. AMERICA/CARIBBEAN	331 - PT V	9,687.	CHECK		N/A	FMV
10)			SUB-SAHARAN AFRICA	332 - PT V	9,494.	MONEY ORDER		N/A	FMV
[11)			SUB-SAHARAN AFRICA	333 - PT V	30,664.	EFT		N/A	FMV
(12)			SOUTH ASIA	334 - PT V	62,749.	EFT		N/A	FMV
13)			SOUTH ASIA	335 - PT V	30,706.	EFT		N/A	FMV
14)			SOUTH ASIA	336 - PT V	15,217.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	337 - PT V	7,274.	MONEY ORDER		N/A	FMV
(16)			SUB-SAHARAN AFRICA	338 - PT V	7,274.	MONEY ORDER		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	339 - PT V	24,897.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	340 - PT V	101,863.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	341 - PT V	155,235.	EFT		N/A	FMV
4)			SOUTH ASIA	342 - PT V	16,453.	EFT		N/A	FMV
5)			RUSSIA	343 - PT V	249,874.	EFT		N/A	FMV
(6)			SOUTH ASIA	344 - PT V	77,762.	EFT		N/A	FMV
(7)			SOUTH ASIA	345 - PT V	32,150.	EFT		N/A	FMV
(8)			SOUTH ASIA	346 - PT V	7,147.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	347 - PT V	18,972.	EFT		N/A	FMV
[10]			MIDDLE EAST/NORTH AFRICA	348 - PT V	10,384.	CHECK		N/A	FMV
[11)			SUB-SAHARAN AFRICA	349 - PT V	5,713.	EFT		N/A	FMV
12)			SUB-SAHARAN AFRICA	350 - PT V	8,109.	EFT		N/A	FMV
13)			SUB-SAHARAN AFRICA	351 - PT V	11,014.	EFT		N/A	FMV
14)			SOUTH ASIA	352 - PT V	165,088.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	353 - PT V	6,294.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	354 - PT V	33,474.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	355 - PT V	61,693.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	356 - PT V	35,012.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	357 - PT V	25,117.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	358 - PT V	19,281.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	359 - PT V	8,260.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	360 - PT V	19,615.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	361 - PT V	39,825.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	362 - PT V	249,645.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	363 - PT V	11,520.	EFT		N/A	FMV
(10)			SOUTH AMERICA	364 - PT V	315,820.	EFT		N/A	FMV
(11)			SOUTH ASIA	365 - PT V	33,768.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	366 - PT V	144,942.	CHECK		N/A	FMV
(13)			SOUTH ASIA	367 - PT V	46,408.	CHECK		N/A	FMV
(14)			SOUTH ASIA	368 - PT V	676,332.	EFT		N/A	FMV
(15)			SOUTH ASIA	369 - PT V	18,195.	EFT		N/A	FMV
(16)			SOUTH ASIA	370 - PT V	46,360.	EFT		N/A	FMV

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

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Part II	Grants and Other As Part IV, line 15, for a Part II can be duplicat	ny recipient who rece	eived more than \$5,00						990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	371 - PT V	13,987.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	372 - PT V	21,332.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	373 - PT V	24,245.	CHECK		N/A	FMV
(4)			SUB-SAHARAN AFRICA	374 - PT V	42,383.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	375 - PT V	17,600.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	376 - PT V	14,464.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	377 - PT V	6,420.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	378 - PT V	20,343.	EFT		N/A	FMV
(9)			SOUTH ASIA	379 - PT V	6,954.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	380 - PT V	45,834.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	381 - PT V	20,687.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	382 - PT V	13,349.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	383 - PT V	58,304.	CHECK		N/A	FMV
(14)			SUB-SAHARAN AFRICA	384 - PT V	39,516.	EFT		N/A	FMV
(15)			SOUTH ASIA	385 - PT V	6,401.	EFT		N/A	FMV
(16)			SOUTH ASIA	386 - PT V	9,667.	EFT		N/A	FMV
	r total number of recipient						exempt		
by th 3 Ente	ne IRS, or for which the gra r total number of other org	ntee or counsel has pro anizations or entities	ovided a section 501(c)(3	s) equivalency letter			··· > ——		

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method or valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	387 - PT V	52,785.	CHECK		N/A	FMV
(2)			SUB-SAHARAN AFRICA	388 - PT V	45,469.	MONEY ORDER		N/A	FMV
(3)			SOUTH ASIA	389 - PT V	5,724.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	390 - PT V	55,029.	MONEY ORDER		N/A	FMV
(5)			MIDDLE EAST/NORTH AFRICA	391 - PT V	61,481.	EFT		N/A	FMV
(6)			SOUTH ASIA	392 - PT V	22,783.	EFT		N/A	FMV
(7)			SOUTH ASIA	393 - PT V	552,814.	EFT		N/A	FMV
(8)			SOUTH ASIA	394 - PT V	21,641.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	395 - PT V	55,393.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	396 - PT V	9,914.	MONEY ORDER		N/A	FMV
(11)			MIDDLE EAST/NORTH AFRICA	397 - PT V	57,917.	EFT		N/A	FMV
(12)			SOUTH AMERICA	398 - PT V	25,505.	CHECK		N/A	FMV
(13)			SOUTH ASIA	399 - PT V	9,088.	EFT		N/A	FMV
(14)			SUB-SAHARAN AFRICA	400 - PT V	26,158.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	401 - PT V	26,499.	CHECK		N/A	FMV
(16)			SUB-SAHARAN AFRICA	402 - PT V	24,719.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal, other)
4\									
1)			SUB-SAHARAN AFRICA	403 - PT V	14,095.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	404 - PT V	11,923.	CHECK		N/A	FMV
3)			SUB-SAHARAN AFRICA	405 - PT V	15,001.	CHECK		N/A	FMV
4)			SUB-SAHARAN AFRICA	406 - PT V	37,657.	CHECK		N/A	FMV
5)			SUB-SAHARAN AFRICA	407 - PT V	17,475.	CHECK		N/A	FMV
6)			SOUTH AMERICA	408 - PT V	27,965.	CASH		N/A	FMV
7)						EFT			
			MIDDLE EAST/NORTH AFRICA	409 - PT V	42,157.	EFT		N/A	FMV
B)			SOUTH ASIA	410 - PT V	142,885.	EFT		N/A	FMV
9)			SOUTH ASIA	411 - PT V	96,843.	EFT		N/A	FMV
10)			CENT. AMERICA/CARIBBEAN	412 - PT V	171,841.	CHECK		N/A	FMV
11)			SUB-SAHARAN AFRICA	413 - PT V	8,996.	CHECK		N/A	FMV
12)			SUB-SAHARAN AFRICA	414 - PT V	37,931.	CHECK		N/A	FMV
13)			SUB-SAHARAN AFRICA	415 - PT V	19,171.	EFT		N/A	FMV
14)			SUB-SAHARAN AFRICA	416 - PT V	10,922.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	417 - PT V	16,474.	CHECK		N/A	FMV
16)			SUB-SAHARAN AFRICA	418 - PT V	6,787.	CHECK		N/A	FMV

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

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Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,									
	Part IV, line 15, for a			00. Check this bo	ox if no one recipi	ient received n	nore than \$5,00	00	▶□	
	Part II can be duplicat	ted if additional space	is needed.							
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal,	
						+			other)	
(1)			COURT ACTA	419 - PT V	9,785.	EFT		N/A	FMV	
(1)			SOUTH ASIA	419 - PT V	9,785.	EFT		N/A	FMV	
(2)			SUB-SAHARAN AFRICA	420 - PT V	9,908.	CHECK		N/A	FMV	
(3)			SUB-SAHARAN AFRICA	421 - PT V	55,292.	EFT		N/A	FMV	
(4)			SUB-SAHARAN AFRICA	422 - PT V	24,474.	EFT		N/A	FMV	
<i>(5</i>)										
(5)			SUB-SAHARAN AFRICA	423 - PT V	260,305.	CHECK		N/A	FMV	
(6)			SUB-SAHARAN AFRICA	424 - PT V	15,487.	EFT		N/A	FMV	
(7)			SUB-SAHARAN AFRICA	425 - PT V	133,894.	CHECK		N/A	FMV	
(8)			SOUTH ASIA	426 - PT V	7,176.	EFT		N/A	FMV	
(0)										
(9)			SOUTH ASIA	427 - PT V	106,223.	EFT		N/A	FMV	
(10)			SOUTH ASIA	428 - PT V	17,885.	EFT		N/A	FMV	
(.0)			SOUTH ASIA	420 - P1 V	17,003.	EFI		N/A	FMV	
(11)			SOUTH ASIA	429 - PT V	17,457.	EFT		N/A	FMV	
					, -					
(12)			SOUTH ASIA	430 - PT V	10,548.	EFT		N/A	FMV	
(13)			SOUTH ASIA	431 - PT V	7,199.	EFT		N/A	FMV	
(14)			SOUTH ASIA	432 - PT V	8,599.	EFT		N/A	FMV	
(45)										
(15)			SUB-SAHARAN AFRICA	433 - PT V	8,861.	EFT		N/A	FMV	

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

CENT. AMERICA/CARIBBEAN

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FMV

N/A

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434 - PT V

587,956.

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	435 - PT V	334,431.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	436 - PT V	28,194.	EFT		N/A	FMV
(3)			SOUTH AMERICA	437 - PT V	272,174.	EFT		N/A	FMV
(4)			SOUTH ASIA	438 - PT V	5,511.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	439 - PT V	12,351.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	440 - PT V	14,862.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	441 - PT V	15,324.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	442 - PT V	10,953.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	443 - PT V	11,943.	EFT		N/A	FMV
(10)			SOUTH ASIA	444 - PT V	9,993.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	445 - PT V	8,574.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	446 - PT V	24,166.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	447 - PT V	27,953.	EFT		N/A	FMV
(14)			SUB-SAHARAN AFRICA	448 - PT V	12,706.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	449 - PT V	56,941.	EFT		N/A	FMV
(16)			SOUTH ASIA	450 - PT V	385,540.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal, other)
1)			SUB-SAHARAN AFRICA	451 - PT V	7,325.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	452 - PT V	36,265.	CASH		N/A	FMV
3)			SUB-SAHARAN AFRICA	453 - PT V	17,794.	CHECK		N/A	FMV
4)			SOUTH ASIA	454 - PT V	58,183.	CHECK		N/A	FMV
5)			SOUTH ASIA	455 - PT V	1,135,302.	CHECK		N/A	FMV
6)			CENT. AMERICA/CARIBBEAN	456 - PT V	74,909.	CHECK		N/A	FMV
7)			CENT. AMERICA/CARIBBEAN	457 - PT V	143,154.	CHECK		N/A	FMV
8)			SOUTH AMERICA	458 - PT V	27,659.	CHECK		N/A	FMV
9)			SOUTH AMERICA	459 - PT V	12,224.	MONEY ORDER		N/A	FMV
10)			SOUTH ASIA	460 - PT V	10,932.	EFT		N/A	FMV
11)			SUB-SAHARAN AFRICA	461 - PT V	25,022.	EFT		N/A	FMV
12)			RUSSIA	462 - PT V	6,412.	EFT		N/A	FMV
13)			RUSSIA	463 - PT V	9,601.	EFT		N/A	FMV
14)			RUSSIA	464 - PT V	5,625.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	465 - PT V	12,902.	EFT		N/A	FMV
16)			SUB-SAHARAN AFRICA	466 - PT V	56,194.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			SOUTH ASIA	467 - PT V	25,809.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	468 - PT V	27,204.	CHECK		N/A	FMV
3)			SOUTH ASIA	469 - PT V	7,235.	EFT		N/A	FMV
4)			SOUTH ASIA	470 - PT V	6,235.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	471 - PT V	5,003.	EFT		N/A	FMV
6)			SOUTH ASIA	472 - PT V	7,033.	EFT		N/A	FMV
7)			SOUTH ASIA	473 - PT V	47,173.	EFT		N/A	FMV
8)			SUB-SAHARAN AFRICA	474 - PT V	8,699.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	475 - PT V	21,604.	EFT		N/A	FMV
10)			SUB-SAHARAN AFRICA	476 - PT V	51,897.	EFT		N/A	FMV
11)			SOUTH ASIA	477 - PT V	8,194.	EFT		N/A	FMV
12)			SOUTH ASIA	478 - PT V	102,385.	EFT		N/A	FMV
13)			RUSSIA	479 - PT V	6,016.	EFT		N/A	FMV
14)			SUB-SAHARAN AFRICA	480 - PT V	12,885.	EFT		N/A	FMV
15)			SOUTH ASIA	481 - PT V	50,007.	EFT		N/A	FMV
16)			SUB-SAHARAN AFRICA	482 - PT V	168,844.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			SUB-SAHARAN AFRICA	483 - PT V	13,579.	CHECK		N/A	FMV
(2)			SUB-SAHARAN AFRICA	484 - PT V	5,265.	CHECK		N/A	FMV
(3)			RUSSIA	485 - PT V	5,161.	EFT		N/A	FMV
(4)			RUSSIA	486 - PT V	7,538.	EFT		N/A	FMV
(5)			RUSSIA	487 - PT V	8,605.	EFT		N/A	FMV
(6)			RUSSIA	488 - PT V	8,103.	EFT		N/A	FMV
(7)			RUSSIA	489 - PT V	9,001.	EFT		N/A	FMV
8)			SUB-SAHARAN AFRICA	490 - PT V	64,274.	CHECK		N/A	FMV
9)			SUB-SAHARAN AFRICA	491 - PT V	64,162.	CHECK		N/A	FMV
10)			SOUTH ASIA	492 - PT V	5,030.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	493 - PT V	24,869.	CHECK		N/A	FMV
(12)			SUB-SAHARAN AFRICA	494 - PT V	24,899.	CHECK		N/A	FMV
13)			RUSSIA	495 - PT V	8,913.	EFT		N/A	FMV
14)			SUB-SAHARAN AFRICA	496 - PT V	12,448.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	497 - PT V	21,751.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	498 - PT V	24,045.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM appraisal other)
1)			SOUTH ASIA	499 - PT V	22,966.	EFT		N/A	FMV
2)			SOUTH ASIA	500 - PT V	356,801.	EFT		N/A	FMV
3)			SOUTH ASIA	501 - PT V	12,624.	EFT		N/A	FMV
4)			SOUTH ASIA	502 - PT V	545,706.	EFT		N/A	FMV
5)			SOUTH ASIA	503 - PT V	47,520.	EFT		N/A	FMV
i)			SOUTH ASIA	504 - PT V	50,699.	EFT		N/A	FMV
)			SOUTH ASIA	505 - PT V	53,766.	EFT		N/A	FMV
·)			SUB-SAHARAN AFRICA	506 - PT V	6,245.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	507 - PT V	12,337.	EFT		N/A	FMV
0)			SUB-SAHARAN AFRICA	508 - PT V	17,339.	EFT		N/A	FMV
1)			SUB-SAHARAN AFRICA	509 - PT V	16,363.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	510 - PT V	83,644.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	511 - PT V	17,815.	CHECK		N/A	FMV
4)			SUB-SAHARAN AFRICA	512 - PT V	9,628.	CHECK		N/A	FMV
5)			SUB-SAHARAN AFRICA	513 - PT V	622,088.	EFT		N/A	FMV
16)			SUB-SAHARAN AFRICA	514 - PT V	14,345.	EFT		N/A	FMV

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt
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1	Part II can be duplicated if (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal,
									other)
1)			SUB-SAHARAN AFRICA	515 - PT V	11,115.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	516 - PT V	17,328.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	517 - PT V	11,794.	EFT		N/A	FMV
4)			SUB-SAHARAN AFRICA	518 - PT V	32,488.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	519 - PT V	9,712.	EFT		N/A	FMV
6)			SUB-SAHARAN AFRICA	520 - PT V	30,345.	CHECK		N/A	FMV
7)			SUB-SAHARAN AFRICA	521 - PT V	24,376.	EFT		N/A	FMV
			DOD BRIEFICH TERRICIT	321 11 0	21,570.	BIT		14/21	1110
3)			SOUTH ASIA	522 - PT V	11,702.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	523 - PT V	7,848.	EFT		N/A	FMV
10)			SUB-SAHARAN AFRICA	524 - PT V	10,000.	EFT		N/A	FMV
l1)			SUB-SAHARAN AFRICA	525 - PT V	18,910.	MONEY ORDER		N/A	FMV
12)			SUB-SAHARAN AFRICA	526 - PT V	18,659.	EFT		N/A	FMV
13)			SOUTH ASIA	527 - PT V	9,943.	EFT		N/A	FMV
14)			MIDDLE EAST/NORTH AFRICA	528 - PT V	18,757.	CHECK		N/A	FMV
15)			SOUTH ASIA	529 - PT V	13,788.	EFT		N/A	FMV
16)									

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FMV appraisal, other)
1)			SUB-SAHARAN AFRICA	531 - PT V	62,177.	CHECK		N/A	FMV
2)			MIDDLE EAST/NORTH AFRICA	532 - PT V	214,750.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	533 - PT V	66,187.	EFT		N/A	FMV
4)			SUB-SAHARAN AFRICA	534 - PT V	33,245.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	535 - PT V	29,071.	EFT		N/A	FMV
6)			SUB-SAHARAN AFRICA	536 - PT V	38,977.	CHECK		N/A	FMV
7)			CENT. AMERICA/CARIBBEAN	537 - PT V	34,181.	CHECK		N/A	FMV
8)			RUSSIA	538 - PT V	70,350.	EFT		N/A	FMV
9)			SOUTH ASIA	539 - PT V	6,910.	EFT		N/A	FMV
10)			SOUTH ASIA	540 - PT V	7,354.	EFT		N/A	FMV
11)			SOUTH ASIA	541 - PT V	18,436.	EFT		N/A	FMV
12)			SOUTH ASIA	542 - PT V	12,045.	EFT		N/A	FMV
13)			SUB-SAHARAN AFRICA	543 - PT V	93,101.	EFT		N/A	FMV
14)			SUB-SAHARAN AFRICA	544 - PT V	30,424.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	545 - PT V	99,627.	EFT		N/A	FMV
16)			SUB-SAHARAN AFRICA	546 - PT V	15,606.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuatio (book, FN appraisa other)
)			SUB-SAHARAN AFRICA	547 - PT V	5,088.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	548 - PT V	40,057.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	549 - PT V	165,030.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	550 - PT V	22,280.	EFT		N/A	FMV
)			SOUTH ASIA	551 - PT V	32,072.	EFT		N/A	FMV
)			SOUTH ASIA	552 - PT V	21,740.	EFT		N/A	FMV
)			SOUTH ASIA	553 - PT V	413,088.	EFT		N/A	FMV
)			MIDDLE EAST/NORTH AFRICA	554 - PT V	16,411.	CHECK		N/A	FMV
)			MIDDLE EAST/NORTH AFRICA	555 - PT V	101,060.	EFT		N/A	FMV
0)			SUB-SAHARAN AFRICA	556 - PT V	75,877.	EFT		N/A	FMV
1)			SUB-SAHARAN AFRICA	557 - PT V	34,596.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	558 - PT V	319,510.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	559 - PT V	21,506.	EFT		N/A	FMV
4)			SUB-SAHARAN AFRICA	560 - PT V	31,617.	CHECK		N/A	FMV
5)			SOUTH ASIA	561 - PT V	59,633.	EFT		N/A	FMV
6)			SOUTH ASIA	562 - PT V	35,427.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuatio (book, FM appraisa other)
1)			SOUTH ASIA	563 - PT V	24,130.	EFT		N/A	FMV
2)			SOUTH ASIA	564 - PT V	70,131.	EFT		N/A	FMV
)			SOUTH ASIA	565 - PT V	19,238.	EFT		N/A	FMV
)			SOUTH ASIA	566 - PT V	100,417.	EFT		N/A	FMV
)			SOUTH ASIA	567 - PT V	31,792.	EFT		N/A	FMV
)			SOUTH ASIA	568 - PT V	16,989.	EFT		N/A	FMV
)			SOUTH ASIA	569 - PT V	35,151.	EFT		N/A	FMV
)			SOUTH ASIA	570 - PT V	467,070.	EFT		N/A	FMV
			SOUTH ASIA	571 - PT V	186,358.	EFT		N/A	FMV
D)			SOUTH ASIA	572 - PT V	17,483.	EFT		N/A	FMV
1)			SOUTH ASIA	573 - PT V	5,576.	EFT		N/A	FMV
2)			MIDDLE EAST/NORTH AFRICA	574 - PT V	28,516.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	575 - PT V	114,385.	EFT		N/A	FMV
4)			SOUTH AMERICA	576 - PT V	156,417.	EFT		N/A	FMV
5)			SOUTH AMERICA	577 - PT V	194,745.	EFT		N/A	FMV
6)			RUSSIA	578 - PT V	13,614.	EFT		N/A	FMV

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	Part IV, line 15, for any re Part II can be duplicated if			00. Check this bo	ox if no one recipi	ent received m	nore than \$5,00		990, ▶□
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			RUSSIA	579 - PT V	53,590.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	580 - PT V	79,000.	CHECK		N/A	FMV
(3)			SUB-SAHARAN AFRICA	581 - PT V	12,500.	CHECK		N/A	FMV
(4)			SUB-SAHARAN AFRICA	582 - PT V	29,866.	EFT		N/A	FMV
(5)			RUSSIA	583 - PT V	8,007.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	584 - PT V	26,818.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	585 - PT V	58,833.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	586 - PT V	35,614.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	587 - PT V	5,869.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	588 - PT V	23,529.	CHECK		N/A	FMV
(11)			SUB-SAHARAN AFRICA	589 - PT V	13,164.	EFT		N/A	FMV
(12)			SOUTH ASIA	590 - PT V	27,549.	EFT		N/A	FMV
(13)			SOUTH ASIA	591 - PT V	27,202.	EFT		N/A	FMV
(14)			SUB-SAHARAN AFRICA	592 - PT V	72,020.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	593 - PT V	173,221.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	594 - PT V	20,941.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	595 - PT V	155,152.	EFT		N/A	FMV
(2)			SOUTH AMERICA	596 - PT V	367,348.	EFT		N/A	FMV
(3)			CENT. AMERICA/CARIBBEAN	597 - PT V	32,651.	CHECK		N/A	FMV
(4)			CENT. AMERICA/CARIBBEAN	598 - PT V	26,890.	CHECK		N/A	FMV
(5)			SOUTH AMERICA	599 - PT V	74,174.	EFT		N/A	FMV
(6)			CENT. AMERICA/CARIBBEAN	600 - PT V	5,775.	CHECK		N/A	FMV
(7)			CENT. AMERICA/CARIBBEAN	601 - PT V	6,343.	CHECK		N/A	FMV
(8)			SUB-SAHARAN AFRICA	602 - PT V	133,346.	MONEY ORDER		N/A	FMV
(9)			SUB-SAHARAN AFRICA	603 - PT V	139,872.	EFT		N/A	FMV
(10)			RUSSIA	604 - PT V	7,692.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	605 - PT V	13,924.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	606 - PT V	11,300.	EFT		N/A	FMV
(13)			MIDDLE EAST/NORTH AFRICA	607 - PT V	387,908.	CHECK		N/A	FMV
(14)			MIDDLE EAST/NORTH AFRICA	608 - PT V	167,630.	CHECK		N/A	FMV
(15)			SOUTH ASIA	609 - PT V	8,032.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	610 - PT V	273,507.	EFT		N/A	FMV

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal,
		(ii applicable)							other)
(1)			SUB-SAHARAN AFRICA	611 - PT V	96,844.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	612 - PT V	118,980.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	613 - PT V	131,731.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	614 - PT V	20,126.	EFT		N/A	FMV
(5)			MIDDLE EAST/NORTH AFRICA	615 - PT V	10,167.	EFT		N/A	FMV
(6)			SOUTH ASIA	616 - PT V	9,599.	EFT		N/A	FMV
(7)			SOUTH ASIA	617 - PT V	32,660.	EFT		N/A	FMV
(8)			SOUTH ASIA	618 - PT V	8,191.	EFT		N/A	FMV
(9)			SOUTH ASIA	619 - PT V	10,248.	CHECK		N/A	FMV
(10)			SOUTH ASIA	620 - PT V	58,230.	EFT		N/A	FMV
(11)			SOUTH ASIA	621 - PT V	56,783.	EFT		N/A	FMV
(12)			SOUTH ASIA	622 - PT V	130,690.	EFT		N/A	FMV
(13)			SOUTH ASIA	623 - PT V	12,462.	EFT		N/A	FMV
(14)			SOUTH ASIA	624 - PT V	8,025.	EFT		N/A	FMV
(15)									
			SOUTH ASIA	625 - PT V	5,041.	EFT		N/A	FMV
(16)			SOUTH ASIA	626 - PT V	9,209.	EFT		N/A	FMV

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1 (a) Name of organization (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant 627 - PT V 628 - PT V 629 - PT V 630 - PT V 631 - PT V	(e) Amount of cash grant 6,276. 9,642. 18,591. 16,387. 7,687.	(f) Manner of cash disbursement EFT EFT CHECK EFT EFT	(g) Amount of non-cash assistance	(h) Description of non-cash assistance N/A N/A N/A N/A	(i) Method of valuation (book, FMV, appraisal, other) FMV FMV FMV FMV
(2) (3) (4) (5) (6) (7) (8) (9) (10)		SOUTH ASIA SOUTH ASIA CENT. AMERICA/CARIBBEAN SOUTH ASIA SUB-SAHARAN AFRICA	628 - PT V 629 - PT V 630 - PT V 631 - PT V	9,642. 18,591. 16,387. 7,687.	EFT CHECK EFT		N/A N/A	FMV FMV
(3) (4) (5) (6) (7) (8) (9) (10)		SOUTH ASIA CENT. AMERICA/CARIBBEAN SOUTH ASIA SUB-SAHARAN AFRICA	629 - PT V 630 - PT V 631 - PT V 632 - PT V	18,591. 16,387. 7,687.	EFT CHECK EFT		N/A N/A	FMV
(4) (5) (6) (7) (8) (9) (10)		CENT. AMERICA/CARIBBEAN SOUTH ASIA SUB-SAHARAN AFRICA	630 - PT V 631 - PT V 632 - PT V	16,387. 7,687.	CHECK		N/A	FMV
(5) (6) (7) (8) (9) (10)		SOUTH ASIA SUB-SAHARAN AFRICA	631 - PT V	7,687.	EFT			
(6) (7) (8) (9) (10) (11)		SUB-SAHARAN AFRICA	632 - PT V				N/A	FMV
(7) (8) (9) (10) (11)				11,136.	EFT			
(8) (9) (10) (11)		MIDDLE EAST/NORTH AFRICA	633 - DT V				N/A	FMV
(9) (10) (11)			033 F1 V	5,037.	EFT		N/A	FMV
(10) (11)		SUB-SAHARAN AFRICA	634 - PT V	18,253.	EFT		N/A	FMV
(11)		SUB-SAHARAN AFRICA	635 - PT V	33,598.	EFT		N/A	FMV
		SUB-SAHARAN AFRICA	636 - PT V	40,617.	EFT		N/A	FMV
		MIDDLE EAST/NORTH AFRICA	637 - PT V	6,526.	CHECK		N/A	FMV
(12)		MIDDLE EAST/NORTH AFRICA	638 - PT V	23,116.	CHECK		N/A	FMV
(13)		SUB-SAHARAN AFRICA	639 - PT V	70,216.	EFT		N/A	FMV
(14)		SOUTH ASIA	640 - PT V	145,484.	EFT		N/A	FMV
(15)		SOUTH AMERICA	641 - PT V	89,748.	CHECK		N/A	FMV
(16)		SOUTH ASIA	642 - PT V	8,516.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			SOUTH ASIA	643 - PT V	12,044.	EFT		N/A	FMV
2)			SOUTH ASIA	644 - PT V	168,852.	EFT		N/A	FMV
3)			SOUTH ASIA	645 - PT V	5,230.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	646 - PT V	51,934.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	647 - PT V	10,307.	EFT		N/A	FMV
6)			SOUTH ASIA	648 - PT V	521,174.	EFT		N/A	FMV
7)			SOUTH ASIA	649 - PT V	21,201.	EFT		N/A	FMV
8)			SUB-SAHARAN AFRICA	650 - PT V	99,021.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	651 - PT V	45,418.	EFT		N/A	FMV
10)			SOUTH ASIA	652 - PT V	7,002.	EFT		N/A	FMV
11)			SOUTH ASIA	653 - PT V	7,475.	EFT		N/A	FMV
12)			SOUTH ASIA	654 - PT V	45,450.	EFT		N/A	FMV
13)			SOUTH ASIA	655 - PT V	21,949.	EFT		N/A	FMV
14)			SOUTH ASIA	656 - PT V	5,268.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	657 - PT V	24,233.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	658 - PT V	16,722.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	659 - PT V	11,133.	EFT		N/A	FMV
(2)			SOUTH ASIA	660 - PT V	11,678.	EFT		N/A	FMV
(3)			MIDDLE EAST/NORTH AFRICA	661 - PT V	32,231.	CHECK		N/A	FMV
(4)			MIDDLE EAST/NORTH AFRICA	662 - PT V	6,400.	CHECK		N/A	FMV
(5)			SOUTH ASIA	663 - PT V	9,205.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	664 - PT V	37,584.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	665 - PT V	68,015.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	666 - PT V	28,228.	CHECK		N/A	FMV
(9)			RUSSIA	667 - PT V	5,985.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	668 - PT V	50,050.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	669 - PT V	26,202.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	670 - PT V	13,278.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	671 - PT V	98,037.	EFT		N/A	FMV
(14)			SOUTH ASIA	672 - PT V	182,858.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	673 - PT V	13,177.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	674 - PT V	16,316.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			SUB-SAHARAN AFRICA	675 - PT V	5,615.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	676 - PT V	12,334.	EFT		N/A	FMV
(3)			SOUTH ASIA	677 - PT V	5,503.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	678 - PT V	52,391.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	679 - PT V	22,280.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	680 - PT V	22,280.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	681 - PT V	54,993.	EFT		N/A	FMV
(8)			SOUTH ASIA	682 - PT V	9,759.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	683 - PT V	51,398.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	684 - PT V	9,543.	CHECK		N/A	FMV
(11)			SUB-SAHARAN AFRICA	685 - PT V	12,210.	MONEY ORDER		N/A	FMV
(12)			SUB-SAHARAN AFRICA	686 - PT V	34,136.	CHECK		N/A	FMV
(13)			SUB-SAHARAN AFRICA	687 - PT V	31,667.	EFT		N/A	FMV
(14)			SUB-SAHARAN AFRICA	688 - PT V	25,147.	CHECK		N/A	FMV
(15)			SOUTH ASIA	689 - PT V	29,827.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	690 - PT V	16,349.	EFT		N/A	FMV

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1	Part II can be duplicated i	(b) IRS code		(d) Dumass of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method of valuation
'	organization	section and EIN (if applicable)	(c) Region	(d) Purpose of grant	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	691 - PT V	7,360.	CHECK		N/A	FMV
(2)			SOUTH ASIA	692 - PT V	5,473.	EFT		N/A	FMV
(3)			SOUTH ASIA	693 - PT V	12,910.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	694 - PT V	11,027.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	695 - PT V	21,356.	CHECK		N/A	FMV
(6)			SUB-SAHARAN AFRICA	696 - PT V	12,790.	CHECK		N/A	FMV
(7)			SOUTH ASIA	697 - PT V	57,885.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	698 - PT V	58,009.	CHECK		N/A	FMV
(9)			MIDDLE EAST/NORTH AFRICA	699 - PT V	109,495.	EFT		N/A	FMV
(10)			MIDDLE EAST/NORTH AFRICA	700 - PT V	19,846.	EFT		N/A	FMV
(11)			MIDDLE EAST/NORTH AFRICA	701 - PT V	37,131.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	702 - PT V	64,958.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	703 - PT V	15,000.	EFT		N/A	FMV
(14)			MIDDLE EAST/NORTH AFRICA	704 - PT V	48,921.	EFT		N/A	FMV
(15)			SOUTH ASIA	705 - PT V	6,167.	EFT		N/A	FMV
(16)			SOUTH ASIA	706 - PT V	7,349.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM appraisa other)
)			SOUTH ASIA	707 - PT V	5,478.	EFT		N/A	FMV
)			SOUTH ASIA	708 - PT V	5,729.	EFT		N/A	FMV
)			SOUTH ASIA	709 - PT V	8,712.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	710 - PT V	33,019.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	711 - PT V	18,199.	CHECK		N/A	FMV
)			CENT. AMERICA/CARIBBEAN	712 - PT V	658,869.	CHECK		N/A	FMV
			SUB-SAHARAN AFRICA	713 - PT V	8,493.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	714 - PT V	34,883.	CHECK		N/A	FMV
			SUB-SAHARAN AFRICA	715 - PT V	21,244.	CHECK		N/A	FMV
))			SUB-SAHARAN AFRICA	716 - PT V	32,479.	CHECK		N/A	FMV
1)			SUB-SAHARAN AFRICA	717 - PT V	18,199.	CHECK		N/A	FMV
2)			SUB-SAHARAN AFRICA	718 - PT V	44,921.	EFT		N/A	FMV
3)			SOUTH ASIA	719 - PT V	6,608.	EFT		N/A	FMV
1)			SOUTH ASIA	720 - PT V	6,820.	EFT		N/A	FMV
5)			SOUTH ASIA	721 - PT V	6,291.	EFT		N/A	FMV
6)			SOUTH ASIA	722 - PT V	35,756.	CHECK		N/A	FMV

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1	Part II can be duplicated it	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	
	organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV, appraisal, other)
(1)			SOUTH ASIA	723 - PT V	52,046.	EFT		N/A	FMV
(2)			SOUTH ASIA	724 - PT V	54,047.	EFT		N/A	FMV
(3)			SOUTH ASIA	725 - PT V	12,824.	EFT		N/A	FMV
(4)			SOUTH ASIA	726 - PT V	16,024.	EFT		N/A	FMV
(5)			SOUTH ASIA	727 - PT V	9,160.	EFT		N/A	FMV
(6)			SOUTH ASIA	728 - PT V	9,882.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	729 - PT V	26,712.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	730 - PT V	29,156.	CHECK		N/A	FMV
(9)			SUB-SAHARAN AFRICA	731 - PT V	7,819.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	732 - PT V	53,292.	EFT		N/A	FMV
(11)			SOUTH ASIA	733 - PT V	21,506.	CHECK		N/A	FMV
(12)			SUB-SAHARAN AFRICA	734 - PT V	21,483.	CHECK		N/A	FMV
(13)			SUB-SAHARAN AFRICA	735 - PT V	14,234.	CHECK		N/A	FMV
(14)			SUB-SAHARAN AFRICA	736 - PT V	22,300.	CHECK		N/A	FMV
(15)			SUB-SAHARAN AFRICA	737 - PT V	39,462.	CHECK		N/A	FMV
(16)			SOUTH ASIA	738 - PT V	8,201.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FMV appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	739 - PT V	28,569.	CHECK		N/A	FMV
(2)			CENT. AMERICA/CARIBBEAN	740 - PT V	18,926.	CHECK		N/A	FMV
(3)			CENT. AMERICA/CARIBBEAN	741 - PT V	11,210.	CHECK		N/A	FMV
(4)			CENT. AMERICA/CARIBBEAN	742 - PT V	35,817.	CHECK		N/A	FMV
(5)			CENT. AMERICA/CARIBBEAN	743 - PT V	9,118.	CHECK		N/A	FMV
(6)			SOUTH ASIA	744 - PT V	8,705.	EFT		N/A	FMV
7)			MIDDLE EAST/NORTH AFRICA	745 - PT V	41,744.	CHECK		N/A	FMV
8)			SUB-SAHARAN AFRICA	746 - PT V	48,354.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	747 - PT V	25,229.	EFT		N/A	FMV
10)			SUB-SAHARAN AFRICA	748 - PT V	106,095.	EFT		N/A	FMV
11)			SUB-SAHARAN AFRICA	749 - PT V	66,911.	EFT		N/A	FMV
12)			RUSSIA	750 - PT V	6,206.	EFT		N/A	FMV
13)			SUB-SAHARAN AFRICA	751 - PT V	6,924.	EFT		N/A	FMV
14)			SUB-SAHARAN AFRICA	752 - PT V	6,210.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	753 - PT V	107,177.	EFT		N/A	FMV
(16)			SOUTH ASIA	754 - PT V	283,152.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	755 - PT V	11,539.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	756 - PT V	8,100.	CHECK		N/A	FMV
(3)			SUB-SAHARAN AFRICA	757 - PT V	49,714.	CHECK		N/A	FMV
(4)			SUB-SAHARAN AFRICA	758 - PT V	22,805.	CHECK		N/A	FMV
(5)			SUB-SAHARAN AFRICA	759 - PT V	15,018.	CHECK		N/A	FMV
(6)			SUB-SAHARAN AFRICA	760 - PT V	12,609.	CHECK		N/A	FMV
(7)			NORTH AMERICA	761 - PT V	6,920.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	762 - PT V	11,807.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	763 - PT V	215,746.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	764 - PT V	612,753.	EFT		N/A	FMV
(11)			SOUTH ASIA	765 - PT V	15,302.	CHECK		N/A	FMV
(12)			SOUTH ASIA	766 - PT V	7,248.	EFT		N/A	FMV
(13)			CENT. AMERICA/CARIBBEAN	767 - PT V	8,788.	CHECK		N/A	FMV
(14)			CENT. AMERICA/CARIBBEAN	768 - PT V	11,990.	CHECK		N/A	FMV
(15)			CENT. AMERICA/CARIBBEAN	769 - PT V	8,356.	CHECK		N/A	FMV
(16)			CENT. AMERICA/CARIBBEAN	770 - PT V	10,132.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal, other)
)			CENT. AMERICA/CARIBBEAN	771 - PT V	7,574.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	772 - PT V	26,582.	CHECK		N/A	FMV
)			SUB-SAHARAN AFRICA	773 - PT V	22,851.	CHECK		N/A	FMV
)			SOUTH ASIA	774 - PT V	21,390.	CHECK		N/A	FMV
)			SOUTH ASIA	775 - PT V	7,825.	EFT		N/A	FMV
5)			SOUTH ASIA	776 - PT V	5,561.	EFT		N/A	FMV
)			SOUTH ASIA	777 - PT V	14,803.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	778 - PT V	50,257.	CHECK		N/A	FMV
)			SOUTH ASIA	779 - PT V	175,530.	EFT		N/A	FMV
0)			SOUTH ASIA	780 - PT V	6,087.	EFT		N/A	FMV
1)			SOUTH ASIA	781 - PT V	6,265.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	782 - PT V	14,406.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	783 - PT V	12,106.	CHECK		N/A	FMV
4)			SOUTH ASIA	784 - PT V	13,528.	EFT		N/A	FMV
5)			SOUTH ASIA	785 - PT V	20,367.	CHECK		N/A	FMV
16)			SOUTH ASIA	786 - PT V	29,334.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			SOUTH ASIA	787 - PT V	5,682.	EFT		N/A	FMV
(2)			SOUTH ASIA	788 - PT V	484,288.	EFT		N/A	FMV
(3)			SOUTH ASIA	789 - PT V	26,454.	EFT		N/A	FMV
(4)			MIDDLE EAST/NORTH AFRICA	790 - PT V	32,778.	CHECK		N/A	FMV
(5)			SUB-SAHARAN AFRICA	791 - PT V	30,615.	CHECK		N/A	FMV
(6)			SUB-SAHARAN AFRICA	792 - PT V	10,365.	CHECK		N/A	FMV
(7)			SOUTH ASIA	793 - PT V	6,172.	EFT		N/A	FMV
(8)			SOUTH ASIA	794 - PT V	5,230.	EFT		N/A	FMV
(9)			SOUTH ASIA	795 - PT V	8,338.	EFT		N/A	FMV
(10)			SOUTH ASIA	796 - PT V	6,254.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	797 - PT V	18,936.	CHECK		N/A	FMV
(12)			SOUTH ASIA	798 - PT V	8,922.	EFT		N/A	FMV
(13)			SOUTH ASIA	799 - PT V	77,903.	EFT		N/A	FMV
(14)			SOUTH ASIA	800 - PT V	42,363.	EFT		N/A	FMV
(15)			SOUTH ASIA	801 - PT V	57,617.	EFT		N/A	FMV
(16)			SOUTH ASIA	802 - PT V	21,735.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
1)			SOUTH ASIA	803 - PT V	12,109.	EFT		N/A	FMV
2)			SOUTH ASIA	804 - PT V	8,551.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	805 - PT V	6,807.	CASH		N/A	FMV
4)			SOUTH ASIA	806 - PT V	7,361.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	807 - PT V	14,556.	EFT		N/A	FMV
6)			SUB-SAHARAN AFRICA	808 - PT V	7,815.	EFT		N/A	FMV
7)			SUB-SAHARAN AFRICA	809 - PT V	18,895.	EFT		N/A	FMV
8)			SUB-SAHARAN AFRICA	810 - PT V	30,399.	CHECK		N/A	FMV
9)			SUB-SAHARAN AFRICA	811 - PT V	12,554.	CHECK		N/A	FMV
10)			SOUTH ASIA	812 - PT V	11,335.	EFT		N/A	FMV
11)			SOUTH ASIA	813 - PT V	12,549.	EFT		N/A	FMV
12)			SOUTH ASIA	814 - PT V	6,466.	EFT		N/A	FMV
13)			SOUTH ASIA	815 - PT V	12,716.	EFT		N/A	FMV
14)			SOUTH ASIA	816 - PT V	136,001.	EFT		N/A	FMV
15)			SOUTH ASIA	817 - PT V	16,096.	EFT		N/A	FMV
16)			SOUTH ASIA	818 - PT V	8,878.	EFT		N/A	FMV

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal,
		, ,							other)
(1)			SOUTH AMERICA	819 - PT V	17,143.	CHECK		N/A	FMV
(2)			SUB-SAHARAN AFRICA	820 - PT V	27,404.	MONEY ORDER		N/A	FMV
(3)			SUB-SAHARAN AFRICA	821 - PT V	9,061.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	822 - PT V	87,757.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	823 - PT V	31,461.	EFT		N/A	FMV
(6)			SOUTH ASIA	824 - PT V	39,484.	EFT		N/A	FMV
(7)			SOUTH ASIA	825 - PT V	31,104.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	826 - PT V	26,567.	CHECK		N/A	FMV
(9)			SUB-SAHARAN AFRICA	827 - PT V	26,818.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	828 - PT V	181,236.	EFT		N/A	FMV
(11)			SOUTH ASIA	829 - PT V	31,243.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	830 - PT V	26,496.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	831 - PT V	51,540.	EFT		N/A	FMV
(14)			CENT. AMERICA/CARIBBEAN	832 - PT V	54,694.	CHECK		N/A	FMV
(15)			SUB-SAHARAN AFRICA	833 - PT V	149,909.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	834 - PT V	28,969.	EFT		N/A	FMV

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	Part IV, line 15, for any re Part II can be duplicated it			JO. Official trills be		ent received r		········	(i) Mothod of
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	835 - PT V	12,786.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	836 - PT V	62,199.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	837 - PT V	8,632.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	838 - PT V	61,722.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	839 - PT V	22,914.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	840 - PT V	70,263.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	841 - PT V	73,411.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	842 - PT V	68,485.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	843 - PT V	85,273.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	844 - PT V	77,309.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	845 - PT V	52,688.	EFT		N/A	FMV
(12)			SUB-SAHARAN AFRICA	846 - PT V	340,000.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	847 - PT V	273,276.	EFT		N/A	FMV
(14)			SUB-SAHARAN AFRICA	848 - PT V	19,575.	CHECK		N/A	FMV
(15)			SUB-SAHARAN AFRICA	849 - PT V	36,777.	EFT		N/A	FMV
(16)			SOUTH AMERICA	850 - PT V	6,341.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal,
		(ii applicable)							other)
(1)			NORTH AMERICA	851 - PT V	88,970.	EFT		N/A	FMV
(2)			NORTH AMERICA	852 - PT V	208,006.	EFT		N/A	FMV
(3)			NORTH AMERICA	853 - PT V	99,315.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	854 - PT V	384,060.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	855 - PT V	22,745.	EFT		N/A	FMV
(6)			SOUTH ASIA	856 - PT V	9,418.	EFT		N/A	FMV
(7)			SOUTH ASIA	857 - PT V	9,791.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	858 - PT V	19,185.	EFT		N/A	FMV
(9)			MIDDLE EAST/NORTH AFRICA	859 - PT V	17,715.	EFT		N/A	FMV
(10)			MIDDLE EAST/NORTH AFRICA	860 - PT V	22,210.	EFT		N/A	FMV
(11)			MIDDLE EAST/NORTH AFRICA	861 - PT V	10,725.	EFT		N/A	FMV
(12)			MIDDLE EAST/NORTH AFRICA	862 - PT V	250,608.	EFT		N/A	FMV
(13)			SOUTH ASIA	863 - PT V	88,715.	CHECK		N/A	FMV
			SOUTH ASIA	603 - P1 V	00,713.	CHECK		N/A	PPIV
(14)			SOUTH ASIA	864 - PT V	8,598.	EFT		N/A	FMV
(15)			SOUTH ASIA	865 - PT V	12,001.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	866 - PT V	27,836.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST/NORTH AFRICA	867 - PT V	92,135.	EFT		N/A	FMV
(2)			MIDDLE EAST/NORTH AFRICA	868 - PT V	27,918.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	869 - PT V	87,515.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	870 - PT V	36,585.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	871 - PT V	26,695.	CASH		N/A	FMV
6)			SUB-SAHARAN AFRICA	872 - PT V	23,532.	CASH		N/A	FMV
7)			SUB-SAHARAN AFRICA	873 - PT V	12,315.	CHECK		N/A	FMV
(8)			SOUTH ASIA	874 - PT V	38,992.	EFT		N/A	FMV
9)			SOUTH ASIA	875 - PT V	271,813.	EFT		N/A	FMV
(10)			SOUTH ASIA	876 - PT V	15,583.	CHECK		N/A	FMV
(11)			SOUTH ASIA	877 - PT V	35,458.	EFT		N/A	FMV
12)			EUROPE	878 - PT V	100,000.	EFT		N/A	FMV
13)			SOUTH ASIA	879 - PT V	1,525,504.	EFT		N/A	FMV
[14]			SOUTH ASIA	880 - PT V	631,064.	EFT		N/A	FMV
(15)			SOUTH ASIA	881 - PT V	22,826.	EFT		N/A	FMV
(16)			SOUTH ASIA	882 - PT V	1,024,120.	CHECK		N/A	FMV

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Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	eived more than \$5,00						▶□
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	883 - PT V	93,584.	CHECK		N/A	FMV
(2)			SUB-SAHARAN AFRICA	884 - PT V	9,376.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	885 - PT V	20,167.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	886 - PT V	16,722.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	887 - PT V	14,406.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	888 - PT V	22,577.	CHECK		N/A	FMV
(7)			SUB-SAHARAN AFRICA	889 - PT V	18,634.	CHECK		N/A	FMV
(8)			SOUTH ASIA	890 - PT V	66,568.	CHECK		N/A	FMV
(9)			SUB-SAHARAN AFRICA	891 - PT V	8,463.	EFT		N/A	FMV
(10)			SOUTH ASIA	892 - PT V	51,946.	EFT		N/A	FMV
(11)			SOUTH ASIA	893 - PT V	11,769.	CHECK		N/A	FMV
(12)			SOUTH ASIA	894 - PT V	70,292.	EFT		N/A	FMV
(13)			SOUTH ASIA	895 - PT V	259,042.	CHECK		N/A	FMV
(14)			SUB-SAHARAN AFRICA	896 - PT V	12,772.	CHECK		N/A	FMV
(15)			SOUTH ASIA	897 - PT V	59,770.	EFT		N/A	FMV
(16)			SOUTH AMERICA	898 - PT V	22,897.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal,
									other)
(1)			SOUTH ASIA	899 - PT V	21,071.	EFT		N/A	FMV
. = .									
(2)			SOUTH ASIA	900 - PT V	9,247.	EFT		N/A	FMV
(3)			RUSSIA	901 - PT V	7,184.	EFT		N/A	FMV
(4)									
(4)			SUB-SAHARAN AFRICA	902 - PT V	18,570.	CHECK		N/A	FMV
(5)			SUB-SAHARAN AFRICA	903 - PT V	10,350.	CHECK		N/A	FMV
(C)									
(6)			SUB-SAHARAN AFRICA	904 - PT V	132,817.	CHECK		N/A	FMV
(7)			SUB-SAHARAN AFRICA	905 - PT V	131,478.	MONEY ORDER		N/A	FMV
(0)									
(8)			SOUTH ASIA	906 - PT V	70,623.	CHECK		N/A	FMV
(9)			SOUTH ASIA	907 - PT V	14,310.	EFT		N/A	FMV
(10)									
(10)			SOUTH ASIA	908 - PT V	6,831.	EFT		N/A	FMV
(11)			SOUTH ASIA	909 - PT V	5,700.	EFT		N/A	FMV
(12)			ava avvanav anna	010 777 17	15.050	avenav.		27./2	71.57
(12)			SUB-SAHARAN AFRICA	910 - PT V	15,958.	CHECK		N/A	FMV
(13)			SOUTH ASIA	911 - PT V	7,769.	EFT		N/A	FMV
(14)			SUB-SAHARAN AFRICA	912 - PT V	132,400.	CHECK		N/A	FMV
(,			DOD-DANAKAN AFRICA	512 - P1 V	132,400.	CHECK		IV/ A	E IVI V
(15)			SUB-SAHARAN AFRICA	913 - PT V	7,234.	CHECK		N/A	FMV
(16)			SUB-SAHARAN AFRICA	914 - PT V	9,180.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
[1)			SOUTH ASIA	915 - PT V	29,391.	EFT		N/A	FMV
2)			SOUTH ASIA	916 - PT V	37,102.	EFT		N/A	FMV
3)			SUB-SAHARAN AFRICA	917 - PT V	37,479.	CHECK		N/A	FMV
4)			SUB-SAHARAN AFRICA	918 - PT V	43,308.	CHECK		N/A	FMV
5)			SOUTH ASIA	919 - PT V	5,587.	EFT		N/A	FMV
(6)			SOUTH ASIA	920 - PT V	12,133.	EFT		N/A	FMV
7)			SOUTH ASIA	921 - PT V	61,293.	EFT		N/A	FMV
(8)			SOUTH ASIA	922 - PT V	13,490.	EFT		N/A	FMV
9)			SOUTH ASIA	923 - PT V	96,406.	EFT		N/A	FMV
10)			SUB-SAHARAN AFRICA	924 - PT V	30,697.	EFT		N/A	FMV
11)			SUB-SAHARAN AFRICA	925 - PT V	100,600.	EFT		N/A	FMV
12)			RUSSIA	926 - PT V	254,591.	EFT		N/A	FMV
13)			SOUTH ASIA	927 - PT V	11,780.	EFT		N/A	FMV
14)			SOUTH AMERICA	928 - PT V	200,301.	EFT		N/A	FMV
15)			SOUTH AMERICA	929 - PT V	20,165.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	930 - PT V	85,207.	EFT		N/A	FMV

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Contact (1 on 1 000) 2011	i ago =

	Part IV, line 15, for any re Part II can be duplicated it	additional space	is needed.		·				(i) Method of
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	931 - PT V	59,268.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	932 - PT V	7,658.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	933 - PT V	168,196.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	934 - PT V	13,291.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	935 - PT V	437,854.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	936 - PT V	489,776.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	937 - PT V	5,364.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	938 - PT V	5,364.	EFT		N/A	FMV
(9)			SOUTH ASIA	939 - PT V	215,343.	EFT		N/A	FMV
(10)			SOUTH ASIA	940 - PT V	8,522.	EFT		N/A	FMV
(11)			SOUTH ASIA	941 - PT V	47,545.	CHECK		N/A	FMV
(12)			SOUTH ASIA	942 - PT V	51,044.	EFT		N/A	FMV
(13)			SOUTH AMERICA	943 - PT V	216,803.	EFT		N/A	FMV
(14)			SUB-SAHARAN AFRICA	944 - PT V	6,889.	EFT		N/A	FMV
(15)			SOUTH ASIA	945 - PT V	6,715.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	946 - PT V	12,109.	EFT		N/A	FMV

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Contact (1 on 1 000) 2011	i ago =

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	947 - PT V	60,861.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	948 - PT V	53,232.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	949 - PT V	5,788.	CASH		N/A	FMV
(4)			SUB-SAHARAN AFRICA	950 - PT V	64,090.	EFT		N/A	FMV
(5)			SOUTH ASIA	951 - PT V	61,800.	EFT		N/A	FMV
(6)			SOUTH ASIA	952 - PT V	31,147.	EFT		N/A	FMV
(7)			SOUTH ASIA	953 - PT V	27,392.	EFT		N/A	FMV
(8)			SOUTH ASIA	954 - PT V	32,916.	EFT		N/A	FMV
(9)			SOUTH ASIA	955 - PT V	49,267.	EFT		N/A	FMV
(10)			SOUTH ASIA	956 - PT V	21,520.	EFT		N/A	FMV
(11)			SUB-SAHARAN AFRICA	957 - PT V	36,877.	MONEY ORDER		N/A	FMV
(12)			SOUTH ASIA	958 - PT V	118,329.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	959 - PT V	38,360.	EFT		N/A	FMV
(14)			SOUTH ASIA	960 - PT V	706,337.	EFT		N/A	FMV
(15)			SOUTH ASIA	961 - PT V	33,753.	EFT		N/A	FMV
(16)			SOUTH ASIA	962 - PT V	413,344.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	963 - PT V	11,869.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	964 - PT V	43,692.	EFT		N/A	FMV
(3)			SOUTH ASIA	965 - PT V	20,241.	EFT		N/A	FMV
(4)			SOUTH ASIA	966 - PT V	60,344.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	967 - PT V	52,846.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	968 - PT V	37,687.	EFT		N/A	FMV
(7)			SOUTH ASIA	969 - PT V	8,524.	EFT		N/A	FMV
(8)			SOUTH ASIA	970 - PT V	30,994.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	971 - PT V	52,373.	EFT		N/A	FMV
(10)			SOUTH ASIA	972 - PT V	7,194.	EFT		N/A	FMV
(11)			SOUTH ASIA	973 - PT V	2,082,252.	CHECK		N/A	FMV
(12)			SOUTH ASIA	974 - PT V	244,068.	EFT		N/A	FMV
(13)			SOUTH ASIA	975 - PT V	530,945.	CHECK		N/A	FMV
(14)			SOUTH ASIA	976 - PT V	18,899.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	977 - PT V	75,419.	EFT		N/A	FMV
(16)			SOUTH ASIA	978 - PT V	7,536.	EFT		N/A	FMV

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	Part IV, line 15, for any re Part II can be duplicated if			00. Check this bo	ox if no one recipi	ent received n	nore than \$5,00	00	▶□
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	979 - PT V	5,415.	EFT		N/A	FMV
(2)			SOUTH ASIA	980 - PT V	6,021.	EFT		N/A	FMV
(3)			SOUTH ASIA	981 - PT V	6,217.	CHECK		N/A	FMV
(4)			SOUTH ASIA	982 - PT V	97,057.	EFT		N/A	FMV
(5)			SOUTH ASIA	983 - PT V	42,467.	EFT		N/A	FMV
(6)			SOUTH ASIA	984 - PT V	12,320.	EFT		N/A	FMV
(7)			SOUTH ASIA	985 - PT V	418,888.	EFT		N/A	FMV
(8)			SOUTH ASIA	986 - PT V	5,200.	EFT		N/A	FMV
(9)			SOUTH ASIA	987 - PT V	7,816.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	988 - PT V	40,335.	EFT		N/A	FMV
(11)			SOUTH ASIA	989 - PT V	17,719.	EFT		N/A	FMV
(12)			SOUTH ASIA	990 - PT V	10,802.	EFT		N/A	FMV
(13)			SOUTH ASIA	991 - PT V	16,320.	EFT		N/A	FMV
(14)			SOUTH ASIA	992 - PT V	12,392.	EFT		N/A	FMV
(15)			SOUTH ASIA	993 - PT V	7,760.	EFT		N/A	FMV
(16)			SOUTH ASIA	994 - PT V	37,440.	EFT		N/A	FMV

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	Part IV, line 15, for any re Part II can be duplicated if			. Check this bo	ox ii no one recipi	ent received n	nore than \$5,00		▶∟
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	995 - PT V	46,180.	EFT		N/A	FMV
(2)			SOUTH ASIA	996 - PT V	107,433.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	997 - PT V	42,740.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	998 - PT V	68,133.	EFT		N/A	FMV
(5)			SOUTH ASIA	999 - PT V	43,731.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	1000 - PT V	392,644.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	1001 - PT V	27,943.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	1002 - PT V	33,415.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	1003 - PT V	28,671.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	1004 - PT V	33,752.	EFT		N/A	FMV
(11)			SOUTH ASIA	1005 - PT V	9,119.	EFT		N/A	FMV
(12)			CENT. AMERICA/CARIBBEAN	1006 - PT V	115,570.	CHECK		N/A	FMV
(13)			SUB-SAHARAN AFRICA	1007 - PT V	12,412.	EFT		N/A	FMV
(14)			SOUTH ASIA	1008 - PT V	86,602.	EFT		N/A	FMV
(15)			SUB-SAHARAN AFRICA	1009 - PT V	56,669.	EFT		N/A	FMV
(16)			SOUTH AMERICA	1010 - PT V	21,427.	EFT		N/A	FMV

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal, other)
(1)			SOUTH ASIA	1011 - PT V	60,949.	EFT		N/A	FMV
(2)			SOUTH AMERICA	1012 - PT V	239,468.	EFT		N/A	FMV
(3)			SOUTH ASIA	1013 - PT V	21,106.	EFT		N/A	FMV
(4)			RUSSIA	1014 - PT V	9,236.	EFT		N/A	FMV
(5)			MIDDLE EAST/NORTH AFRICA	1015 - PT V	26,879.	CHECK		N/A	FMV
(6)			SOUTH ASIA	1016 - PT V	12,273.	EFT		N/A	FMV
(7)			SOUTH ASIA	1017 - PT V	8,643.	EFT		N/A	FMV
(8)			SOUTH ASIA	1018 - PT V	14,957.	EFT		N/A	FMV
(9)			SOUTH ASIA	1019 - PT V	56,075.	EFT		N/A	FMV
(10)			RUSSIA	1020 - PT V	5,702.	EFT		N/A	FMV
[11)			SOUTH ASIA	1021 - PT V	396,756.	EFT		N/A	FMV
(12)			SOUTH ASIA	1022 - PT V	20,808.	EFT		N/A	FMV
(13)			MIDDLE EAST/NORTH AFRICA	1023 - PT V	42,136.	CHECK		N/A	FMV
(14)			SOUTH ASIA	1024 - PT V	42,517.	CHECK		N/A	FMV
(15)			SOUTH ASIA	1025 - PT V	38,130.	CHECK		N/A	FMV
(16)			SOUTH ASIA	1026 - PT V	79,059.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method o valuation (book, FMV, appraisal, other)
1)			SOUTH ASIA	1027 - PT V	139,596.	EFT		N/A	FMV
2)			SOUTH ASIA	1028 - PT V	5,299.	EFT		N/A	FMV
3)			SOUTH ASIA	1029 - PT V	132,153.	EFT		N/A	FMV
4)			SOUTH ASIA	1030 - PT V	5,677.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	1031 - PT V	8,174.	EFT		N/A	FMV
6)			RUSSIA	1032 - PT V	8,180.	EFT		N/A	FMV
7)			SOUTH ASIA	1033 - PT V	8,314.	EFT		N/A	FMV
8)			SOUTH ASIA	1034 - PT V	9,087.	EFT		N/A	FMV
9)			SOUTH ASIA	1035 - PT V	37,442.	EFT		N/A	FMV
10)			SOUTH ASIA	1036 - PT V	442,630.	EFT		N/A	FMV
11)			SUB-SAHARAN AFRICA	1037 - PT V	6,873.	CHECK		N/A	FMV
12)			SOUTH ASIA	1038 - PT V	9,017.	EFT		N/A	FMV
13)			SUB-SAHARAN AFRICA	1039 - PT V	35,733.	EFT		N/A	FMV
14)			SOUTH ASIA	1040 - PT V	10,907.	EFT		N/A	FMV
15)			SOUTH ASIA	1041 - PT V	12,007.	EFT		N/A	FMV
16)			SOUTH ASIA	1042 - PT V	9,104.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuatio (book, FM appraisa other)
)			SOUTH ASIA	1043 - PT V	16,884.	EFT		N/A	FMV
)			SOUTH ASIA	1044 - PT V	5,644.	EFT		N/A	FMV
			SOUTH ASIA	1045 - PT V	9,587.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	1046 - PT V	21,593.	CHECK		N/A	FMV
			RUSSIA	1047 - PT V	15,024.	EFT		N/A	FMV
			SOUTH ASIA	1048 - PT V	102,409.	EFT		N/A	FMV
			SOUTH ASIA	1049 - PT V	37,071.	EFT		N/A	FMV
			SOUTH ASIA	1050 - PT V	112,267.	EFT		N/A	FMV
			SOUTH ASIA	1051 - PT V	806,110.	EFT		N/A	FMV
0)			SOUTH ASIA	1052 - PT V	34,389.	EFT		N/A	FMV
1)			SOUTH ASIA	1053 - PT V	90,107.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	1054 - PT V	177,656.	EFT		N/A	FMV
3)			SOUTH AMERICA	1055 - PT V	152,016.	EFT		N/A	FMV
1)			SUB-SAHARAN AFRICA	1056 - PT V	174,575.	EFT		N/A	FMV
i)			SOUTH ASIA	1057 - PT V	24,925.	EFT		N/A	FMV
6)			SOUTH ASIA	1058 - PT V	54,879.	EFT		N/A	FMV

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13-1685039 COOPERATIVE FOR ASSISTANCE AND RELIEF

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ge **2** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed. (i) Method of (f) Manner of (b) IRS code (g) Amount of (h) Description 1 (c) Region (d) Purpose of valuation (a) Name of (e) Amount of cash disbursement non-cash of non-cash section and EIN grant cash grant (book, FMV, organization assistance assistance (if applicable) appraisal, other) (1) 113,670. EFT SOUTH ASIA 1059 - PT V N/A FMV (2) 1060 - PT V 26,285 SUB-SAHARAN AFRICA EFT N/A FMV (3) SUB-SAHARAN AFRICA 1061 - PT V 23,562 EFT N/A VMT (4) SOUTH AMERICA 1062 - PT V 24.784 FMV (5) 30,278 UB-SAHARAN AFRICA 1063 - PT V EFT N/A FMV (6) 1064 - PT V 410,418 N/A SOUTH ASIA EFT FMV (7) 1065 - PT V 15,961 EFT N/A FMV SOUTH ASIA (8) 1066 - PT V 132,657 CHECK N/A SUB-SAHARAN AFRICA FMV (9) SUB-SAHARAN AFRICA 1067 - PT V 69,496 CHECK N/A FMV (10)CENT. AMERICA/CARIBBEAN 1068 - PT V 7,440 CHECK N/A FMV (11)1069 - PT V 8,981 CHECK N/A SUB-SAHARAN AFRICA FMV (12)1070 - PT V 178,761 EFT N/A SUB-SAHARAN AFRICA FMV (13)MIDDLE EAST/NORTH AFRICA 1071 - PT V 103,480 CHECK FMV (14)SOUTH ASIA 1072 - PT V 22,323 EFT N/A FMV (15)1073 - PT V 21,608 SOUTH ASIA EFT N/A FMV (16)SUB-SAHARAN AFRICA 1074 - PT V 44,050. N/A FMV

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method o valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	1075 - PT V	96,260.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	1076 - PT V	21,467.	EFT		N/A	FMV
(3)			SOUTH ASIA	1077 - PT V	24,211.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	1078 - PT V	80,125.	EFT		N/A	FMV
(5)			SOUTH ASIA	1079 - PT V	90,816.	CHECK		N/A	FMV
(6)			RUSSIA	1080 - PT V	9,725.	EFT		N/A	FMV
(7)			RUSSIA	1081 - PT V	6,605.	EFT		N/A	FMV
(8)			SOUTH ASIA	1082 - PT V	137,106.	EFT		N/A	FMV
(9)			SOUTH ASIA	1083 - PT V	64,874.	EFT		N/A	FMV
(10)			SOUTH ASIA	1084 - PT V	84,454.	EFT		N/A	FMV
(11)			SOUTH ASIA	1085 - PT V	41,745.	EFT		N/A	FMV
(12)			SOUTH ASIA	1086 - PT V	29,614.	EFT		N/A	FMV
(13)			SOUTH ASIA	1087 - PT V	15,345.	EFT		N/A	FMV
(14)			SOUTH ASIA	1088 - PT V	17,772.	EFT		N/A	FMV
(15)			SOUTH ASIA	1089 - PT V	43,161.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	1090 - PT V	8,976.	CHECK		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	1091 - PT V	14,047.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	1092 - PT V	149,260.	CHECK		N/A	FMV
(3)			SUB-SAHARAN AFRICA	1093 - PT V	7,076.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	1094 - PT V	141,731.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	1095 - PT V	40,606.	CHECK		N/A	FMV
(6)			CENT. AMERICA/CARIBBEAN	1096 - PT V	18,916.	CHECK		N/A	FMV
(7)			CENT. AMERICA/CARIBBEAN	1097 - PT V	127,639.	CHECK		N/A	FMV
(8)			SUB-SAHARAN AFRICA	1098 - PT V	10,325.	CHECK		N/A	FMV
(9)			SOUTH ASIA	1099 - PT V	7,648.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	1100 - PT V	14,522.	CHECK		N/A	FMV
(11)			SUB-SAHARAN AFRICA	1101 - PT V	75,518.	EFT		N/A	FMV
(12)			RUSSIA	1102 - PT V	8,420.	EFT		N/A	FMV
(13)			SOUTH ASIA	1103 - PT V	15,356.	EFT		N/A	FMV
(14)			SOUTH ASIA	1104 - PT V	331,456.	EFT		N/A	FMV
(15)			SOUTH ASIA	1105 - PT V	25,189.	EFT		N/A	FMV
(16)			SOUTH ASIA	1106 - PT V	33,923.	EFT		N/A	FMV

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(1)	(a) Name of organization	(b) IRS code							
(1)		section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SOUTH ASIA	1107 - PT V	27,850.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	1108 - PT V	10,904.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	1109 - PT V	8,271.	EFT		N/A	FMV
(4)			SUB-SAHARAN AFRICA	1110 - PT V	16,821.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	1111 - PT V	43,508.	EFT		N/A	FMV
(6)			SUB-SAHARAN AFRICA	1112 - PT V	10,626.	EFT		N/A	FMV
(7)			SUB-SAHARAN AFRICA	1113 - PT V	33,169.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	1114 - PT V	24,053.	CHECK		N/A	FMV
(9)			SOUTH ASIA	1115 - PT V	8,759.	EFT		N/A	FMV
(10)			SOUTH ASIA	1116 - PT V	167,814.	EFT		N/A	FMV
(11)			MIDDLE EAST/NORTH AFRICA	1117 - PT V	39,548.	CHECK		N/A	FMV
(12)			SOUTH ASIA	1118 - PT V	9,912.	EFT		N/A	FMV
(13)			SUB-SAHARAN AFRICA	1119 - PT V	30,587.	CHECK		N/A	FMV
(14)			SUB-SAHARAN AFRICA	1120 - PT V	6,701.	CHECK		N/A	FMV
(15)			SUB-SAHARAN AFRICA	1121 - PT V	65,389.	EFT		N/A	FMV
(16)			SUB-SAHARAN AFRICA	1122 - PT V	45,815.	EFT		N/A	FMV

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13-1685039 COOPERATIVE FOR ASSISTANCE AND RELIEF

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed. (i) Method of (f) Manner of (g) Amount of (h) Description 1 (b) IRS code (a) Name of (c) Region (d) Purpose of (e) Amount of valuation cash disbursement non-cash of non-cash section and EIN grant cash grant (book, FMV, organization assistance (if applicable) assistance appraisal, other) (1) 18,219 CHECK SUB-SAHARAN AFRICA 1123 - PT V N/A FMV (2) 1124 - PT V 18,788 SUB-SAHARAN AFRICA EFT N/A FMV (3) UB-SAHARAN AFRICA 1125 - PT V 11,081 EFT N/A VMT (4) IIDDLE EAST/NORTH AFRICA 1126 - PT V 13,031 (5) 1127 - PT V UB-SAHARAN AFRICA 33,527 CHECK N/A FMV (6) 1128 - PT V 12,935 N/A SUB-SAHARAN AFRICA EFT FMV (7) 1129 - PT V 31,928 EFT N/A FMV SUB-SAHARAN AFRICA (8) 1130 - PT V 18,576. EFT N/A SUB-SAHARAN AFRICA FMV (9) SOUTH ASIA 1131 - PT V 68,089 EFT N/A FMV (10)1132 - PT V 10,915 SOUTH ASIA CHECK N/A FMV (11)1133 - PT V 7,546 EFT N/A SUB-SAHARAN AFRICA VMT (12)1134 - PT V 45,404 CHECK N/A ENT. AMERICA/CARIBBEAN FMV (13)SUB-SAHARAN AFRICA 1135 - PT V 37,923 EFT FMV (14)MIDDLE EAST/NORTH AFRICA 1136 - PT V 8,909 EFT N/A FMV (15)1137 - PT V 14,277 ENT. AMERICA/CARIBBEAN CHECK N/A FMV (16) SOUTH AMERICA 1138 - PT V 5,017. N/A FMV 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entities

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13-1685039 COOPERATIVE FOR ASSISTANCE AND RELIEF

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ge **2** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed. (i) Method of (f) Manner of (b) IRS code (g) Amount of (h) Description 1 (c) Region (d) Purpose of valuation (a) Name of (e) Amount of cash disbursement non-cash of non-cash section and EIN grant cash grant (book, FMV, organization assistance assistance (if applicable) appraisal, other) (1) 1139 - PT V 56,174 CHECK N/A SOUTH ASIA FMV (2) 1140 - PT V 25,293 SOUTH ASIA CHECK N/A FMV (3) SOUTH ASIA 1141 - PT V 61,387 CHECK N/A VMT (4) 1142 - PT V 594,511 FMV (5) 23,803 SOUTH ASIA 1143 - PT V EFT N/A FMV (6) 1144 - PT V 6,093 N/A SUB-SAHARAN AFRICA EFT FMV (7) SOUTH AMERICA 1145 - PT V 43,089 EFT N/A FMV (8) 1146 - PT V 28,375 EFT N/A SUB-SAHARAN AFRICA FMV (9) SUB-SAHARAN AFRICA 1147 - PT V 5,399 EFT N/A FMV (10)1148 - PT V 7,016 RUSSIA EFT N/A FMV (11)1149 - PT V 7,895 N/A SOUTH ASIA EFT FMV (12)1150 - PT V 15,495. N/A SUB-SAHARAN AFRICA EFT FMV (13)RUSSIA 1151 - PT V 10,281 EFT FMV (14)RUSSIA 1152 - PT V 6,048 EFT N/A FMV (15)1153 - PT V 6,288 EFT N/A RUSSIA FMV (16)SOUTH ASIA 1154 - PT V 5,348. EFT N/A FMV

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

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method (valuation (book, FMV appraisal, other)
(1)			SOUTH ASIA	1155 - PT V	474,347.	EFT		N/A	FMV
(2)			SUB-SAHARAN AFRICA	1156 - PT V	104,996.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	1157 - PT V	189,307.	EFT		N/A	FMV
(4)			SOUTH AMERICA	1158 - PT V	611,423.	EFT		N/A	FMV
(5)			SUB-SAHARAN AFRICA	1159 - PT V	7,658.	EFT		N/A	FMV
(6)			SOUTH ASIA	1160 - PT V	20,225.	EFT		N/A	FMV
7)			SOUTH ASIA	1161 - PT V	10,619.	EFT		N/A	FMV
8)			SUB-SAHARAN AFRICA	1162 - PT V	18,793.	EFT		N/A	FMV
9)			SUB-SAHARAN AFRICA	1163 - PT V	18,793.	EFT		N/A	FMV
10)			SUB-SAHARAN AFRICA	1164 - PT V	16,070.	EFT		N/A	FMV
11)			SUB-SAHARAN AFRICA	1165 - PT V	22,664.	EFT		N/A	FMV
12)			SUB-SAHARAN AFRICA	1166 - PT V	16,070.	EFT		N/A	FMV
13)			SUB-SAHARAN AFRICA	1167 - PT V	16,404.	EFT		N/A	FMV
14)			SOUTH ASIA	1168 - PT V	58,776.	EFT		N/A	FMV
15)			SUB-SAHARAN AFRICA	1169 - PT V	53,488.	EFT		N/A	FMV
(16)			SOUTH ASIA	1170 - PT V	12,716.	EFT		N/A	FMV

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Schedule F (Form 990) 2011	P

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Metho valuatio (book, FN appraise other)
I)			SUB-SAHARAN AFRICA	1171 - PT V	34,880.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	1172 - PT V	5,615.	EFT		N/A	FMV
)			SOUTH ASIA	1173 - PT V	139,448.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	1174 - PT V	41,917.	CHECK		N/A	FMV
)			SOUTH ASIA	1175 - PT V	47,852.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	1176 - PT V	52,496.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	1177 - PT V	46,725.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	1178 - PT V	29,301.	CHECK		N/A	FMV
			SUB-SAHARAN AFRICA	1179 - PT V	44,631.	EFT		N/A	FMV
))			SUB-SAHARAN AFRICA	1180 - PT V	14,351.	EFT		N/A	FMV
1)			SUB-SAHARAN AFRICA	1181 - PT V	13,635.	EFT		N/A	FMV
2)			SUB-SAHARAN AFRICA	1182 - PT V	140,731.	EFT		N/A	FMV
3)			SOUTH ASIA	1183 - PT V	6,584.	EFT		N/A	FMV
1)			SOUTH ASIA	1184 - PT V	41,016.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	1185 - PT V	30,474.	CHECK		N/A	FMV
6)			SUB-SAHARAN AFRICA	1186 - PT V	50,989.	EFT		N/A	FMV

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	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM) appraisal other)
)			SUB-SAHARAN AFRICA	1187 - PT V	6,991.	MONEY ORDER		N/A	FMV
			SUB-SAHARAN AFRICA	1188 - PT V	7,152.	EFT		N/A	FMV
			SOUTH ASIA	1189 - PT V	32,714.	EFT		N/A	FMV
			SOUTH ASIA	1190 - PT V	14,099.	EFT		N/A	FMV
			SOUTH ASIA	1191 - PT V	26,222.	EFT		N/A	FMV
			RUSSIA	1192 - PT V	76,265.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	1193 - PT V	28,975.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	1194 - PT V	18,007.	EFT		N/A	FMV
			SUB-SAHARAN AFRICA	1195 - PT V	11,722.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	1196 - PT V	99,460.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	1197 - PT V	14,029.	EFT		N/A	FMV
<u>)</u>			SUB-SAHARAN AFRICA	1198 - PT V	9,250.	EFT		N/A	FMV
5)			SUB-SAHARAN AFRICA	1199 - PT V	24,596.	EFT		N/A	FMV
.)			SUB-SAHARAN AFRICA	1200 - PT V	33,590.	EFT		N/A	FMV
)			SUB-SAHARAN AFRICA	1201 - PT V	58,334.	EFT		N/A	FMV
6)			SOUTH ASIA	1202 - PT V	5,295.	EFT		N/A	FMV

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST/NORTH AFRICA	1203 - PT V	17,669.	CHECK		N/A	FMV
(2)			SUB-SAHARAN AFRICA	1204 - PT V	10,714.	EFT		N/A	FMV
(3)			SUB-SAHARAN AFRICA	1205 - PT V	56,285.	EFT		N/A	FMV
(4)			MIDDLE EAST/NORTH AFRICA	1206 - PT V	28,729.	CHECK		N/A	FMV
(5)			MIDDLE EAST/NORTH AFRICA	1207 - PT V	5,864.	CHECK		N/A	FMV
(6)			SUB-SAHARAN AFRICA	1208 - PT V	11,748.	CHECK		N/A	FMV
(7)			RUSSIA	1209 - PT V	6,593.	EFT		N/A	FMV
(8)			SUB-SAHARAN AFRICA	1210 - PT V	14,732.	EFT		N/A	FMV
(9)			SUB-SAHARAN AFRICA	1211 - PT V	10,165.	EFT		N/A	FMV
(10)			SUB-SAHARAN AFRICA	1212 - PT V	14,360.	CHECK		N/A	FMV
(11)			SUB-SAHARAN AFRICA	1213 - PT V			32,944,625.	MOSQUITO NET	FMV
(12)									
(13)									
(14)									
(15)									
(16)									

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Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (h) Method of valuation (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description recipients cash grant cash non-cash of non-cash (book, FMV, disbursement assistance assistance appraisal, other) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)(15)(16)(17)(18)

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Part IV Foreign F Page 4

COOPERATIVE FOR ASSISTANCE AND RELIEF

Part	v Foreign Forms				
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X	Yes		No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	X	Yes		No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	X	Yes		No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)		Yes	X	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)		Yes	X	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)		Yes	X	No

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Part V Supplem

Supplemental Information

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

SCHEDULE F, PART I, #2

CARE MONITORS SUB AGREEMENTS TO DETERMINE WHETHER BOTH CARE AND THE SUB

RECIPIENT ARE PERFORMING ACCORDING TO THE AGREED SCOPE OF WORK AND

APPLICABLE CAPACITY IMPROVEMENT PLANS AND COMPLYING WITH APPLICABLE DONOR

RULES AND REGULATIONS. PERIODIC REVIEWS OF MONITORING RESULTS MUST BE

CONDUCTED BY A SUPERVISORY OFFICIAL (E.G., SUCH AS A MEMBER OF THE DMC).

ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE US

CARE ALSO PERIODICALLY EVALUATES THE PERFORMANCE OF SUB AGREEMENTS

TOWARDS THE ACHIEVEMENT OF INTENDED OUTCOMES AND CONTRIBUTIONS TO CARE'S

PROGRAM STRATEGY AND IMPACT. MONITORING THROUGH "ON GOING ACTIVITIES",

ALSO KNOWN AS "DURING-THE-AWARD MONITORING" MAY TAKE VARIOUS FORMS. A

FUNDAMENTAL MONITORING TOOL IS INFORMING THE SUB-RECIPIENT OF THE BASIC

AWARD INFORMATION (E.G., GRANT/CONTRACT AGREEMENT NUMBER, TITLE AND

NUMBER AWARD NAME, NAME OF INSTITUTIONAL DONOR'S AGENCY) AND APPLICABLE

COMPLIANCE REQUIREMENTS.

ADDITIONAL MONITORING TOOLS INCLUDE THE FOLLOWING:

- 1. REVIEWING FINANCIAL AND PERFORMANCE REPORTS SUBMITTED BY THE SUB-RECIPIENT
- 2. PERFORMING SITE VISITS TO THE SUB-RECIPIENT TO REVIEW FINANCIAL AND PROGRAMMATIC RECORDS AND OBSERVE OPERATIONS
- 3. REGULAR CONTACT WITH THE SUB-RECIPIENT AND MAKING APPROPRIATE INQUIRIES CONCERNING PROGRAM ACTIVITIES
- 4. ARRANGING FOR AGREED-UPON PROCEDURES AND ENGAGEMENTS FOR CERTAIN

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Part V **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

ASPECTS OF SUB-RECIPIENT ACTIVITIES SUCH AS ELIGIBILITY DETERMINATION.

DONOR LAWS AND REGULATIONS MAY IMPOSE SUB-RECIPIENT MONITORING REQUIREMENTS SPECIFIC TO A PROGRAM. IN ADDITION, FACTORS SUCH AS THE SIZE OF AWARDS, PERCENTAGE OF THE PASS-THROUGH ENTITY'S TOTAL PROGRAM FUNDS AWARDED TO SUB-RECIPIENTS, THE COMPLEXITY OF THE COMPLIANCE REQUIREMENTS, AND RISK OF SUB-RECIPIENT NON-COMPLIANCE AS ASSESSED BY THE PASS-THROUGH ENTITY MAY INFLUENCE THE NATURE AND EXTENT OF MONITORING PROCEDURES.

GRANT PURPOSES

FORM 990, SCHEDULE F, PART II, COLUMN (D)

- WOMEN EMPOWERMENT PROGRAM 1
- FOOD DISTRIBUTION EMERGENCY RESPONSE
- SOCIAL MARKETING FOR CONDOMS 3
- ACCESSIBLE FREE HEALTH CARE FOR UNDER 5 YR OLDS IN KAMBIA
- SAFE PASSAGE: MAKING MOBILITY SAFE BY REDUCING VULNERABILITY AND

IMPACT OF HIV/AIDS

- TO PROMOTE SAFE MIGRATION AND PROTECT RIGHTS OF FEMALE MIGRANT WORKERS THROUGH MOBILIZATION AND STRENGTHENING RESPONSE OF CIVIL SOCIETY.
- TO PROMOTE SAFE MIGRATION AND PROTECT RIGHTS OF FEMALE MIGRANT WORKERS THROUGH MOBILIZATION AND STRENGTHENING RESPONSE OF CIVIL SOCIETY.
- GIRLS EDUCATION PROJECT IN BIHAR, INDIA

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Part V Supplemental Information

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

- 9 IMPLEMENTATION OF THE RURAL DEVELOPMENT IN THE REGION OF
- RACHA-LECHKHUMI, GEORGIA
- 10 SUSTAINABLE POVERTY REDUCTION AMONG MARGINALIZED COMMUNITIES IN
- GEORGIA, THROUGH STRENGTHENED CIVIL SOCIETY AND LOCAL GOVERNANCE

PROCESSES.

- 11 RURAL DEVELOPMENT IN THE REGION RACHA-LECHKUMI, GEORGIA PROJECT
- 12 REPRODUCTIVE HEALTH PROJECT
- 13 IMPROVE SOCIO-ECONOMIC CONDITIONS OF 3000 WAR AFFECTED YOUTHS AND
- FORMER CHILD SOLDIERS AND RE-INTEGRATE THEM INTO THEIR COMMUNITIES.
- 14 PROMOTING HUMAN RIGHTS, WOMEN'S RIGHTS AND GENDER EQUALITY.
- 15 IMPROVING HUMANITARIAN ACCESS
- 16 TO SUPPORT ARTISANS AND HANDICRAFTS IN RAJASTHAN, INDIA
- 17 ENGAGING MEN INITIATIVE WOMEN AND GIRLS EMPOWERMENT PROGRAM
- 18 WOMEN EMPOWERMENT PROGRAM
- 19 WOMEN AND GIRLS HAVE ESTABLISHED SOCIAL, POLITICAL, ECONOMIC

BALANCES AND MAINTAIN SOCIAL COHESION AT THE COMMUNITY, REGIONAL AND

NATIONAL LEVELS, NOTABLY IN FAVOR OF A BETTER INTEGRATION OF THE MOST

VULNERABLE AND/OR MARGINALIZED.

- 20 IMPROVE THE QUALITY OF LIFE OF THE VICTIMS OF THE LRA CONFLICT IN
- NORTHERN UGANDA
- 21 VOCATIONAL TRAINING FOR WOMEN
- 22 EMERGENCY RESPONSE AND CAPACITY BUILDING FOR EMERGENCY

PREPAREDNESS

23 SOCIAL AND ECONOMIC REINTEGRATION OF DISPLACED AFGHAN WOMEN

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Part V **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

- 24 VOCATIONAL TRAINING FOR WOMEN
- TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS AND 25

THEIR FAMILIES

URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY 2.6

MOBILIZATION

TO DEMONSTRATE EFFECTIVE GOOD PRACTICE MODELS FOR HIV PREVENTION. 2.7

TO ENHANCE CAPACITY AND CONTRIBUTE TO GOVERNMENT & CIVIL SOCIETY

INSTITUTIONS.

YOUTH PASTORALISM AND CULTURE OF PEACE; STRENGTHENING LOCAL

CAPACITIES FOR SUCCESSFUL DECENTRALIZATION; SECURING ECONOMIES OF

PASTORAL HOUSEHOLDS

GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL

INFRASTRUCTURE.

30 INTEGRATED HUMANITARIAN ASSISTANCE FOR FLOOD AFFECTED POPULATIONS

TOWARDS LIVELIHOOD RESTORATION AND MEETING EARLY RECOVERY NEEDS IN KHYBER

PAKHTOONKHWA PROVINCE OF PAKISTAN

- 31 HAITI EARTHQUAKE RESPONSE
- HAITI EARTHQUAKE RESPONSE 32
- 33 SUSTAINABLE ACCESS TO FINANCIAL SERVICES FOR INVESTMENT
- VULNERABLE WOMEN'S EMPOWERMENT PROGRAM 34
- 35 IMPLEMENT COMMUNITY BASED MICROFINANCE
- 36 IMPROVE THE LIVELIHOOD OF POOR INHABITANTS OF FORESTS BY PROMOTING

THE SUSTAINABLE USE OF FOREST PRODUCTS

ADAPTATION LEARNING PROGRAM IN AFRICA 37

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Page 5 Schedule F (Form 990) 2011 **Supplemental Information** Part V Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions). 38 LIVELIHOODS ALLIANCE PROJECT FOOD DISTRIBUTION EMERGENCY RESPONSE 39 PROGRAM DEVELOPMENT WITHIN THE NIGER DELTA ESTABLISHMENT OF REGIONAL DEVELOPMENT FUND FOR AGRICULTURAL 41 DEVELOPMENT IN THE PILOT REGIONS PROMOTE JUSTICE AND RIGHTS OF WOMEN AND GIRLS 42 TRANSBORDER INITIATIVE TO PROMOTE WOMEN'S RIGHTS TO PROPERTY 43 44 ENABLING MOBILIZATION AND POLICY IMPLEMENTATION FOR WOMEN'S RIGHTS URBAN AGRICULTURE AND FOOD SECURITY 45 46 SUPPORT FOR AGRICULTURE PROJECT IN LIBERIA 47 CONTRIBUTE TO IMPROVE NUTRITION AND HEALTH FOR PREGNANT WOMEN AND CHILDREN UNDER 60 MONTHS 48 WOMEN AND GIRLS LEADERSHIP DEVELOPMENT 49 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL ORGANISATIONS TO PROVIDE A CORE PACKAGE OF SERVICES FOR ORPHANS AND VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE CHILDREN DEMOCRACY AND GOVERNANCE 50 51 DEMOCRACY AND GOVERNANCE 52 RECOVERY AND EMERGENCY ASSISTANCE FOR SOMALIA 53 ADAPTATION LEARNING PROGRAM IN AFRICA

Schedule F (Form 990) 2011

GRADUATION WITH RESILIENCE TO ACHIEVE SUSTAINABLE DEVELOPMENT

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COOPERATIVE FOR ASSISTANCE AND RELIEF

Part V Supplemental Information

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

- 55 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL
- INFRASTRUCTURE.
- 56 RECOVERY AND EMERGENCY ASSISTANCE FOR SOMALIA
- 57 PAKISTAN FLOODS RECOVERY PROJECT
- 58 INTEGRATED HUMANITARIAN ASSISTANCE FOR FLOOD AFFECTED POPULATIONS

TOWARDS LIVELIHOOD RESTORATION AND MEETING EARLY RECOVERY NEEDS IN KHYBER

PAKHTOONKHWA PROVINCE OF PAKISTAN

- 59 EMERGENCY FOOD SECURITY, LIVELIHOOD AND NUTRITION SUPPORT TO FLOOD
- AFFECTED POPULATIONS
- 60 IMPROVED ACCESS TO HUMANITARIAN ASSISTANCE AND PROTECTION FOR

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- 166 PATHWAYS TO SECURE LIVELIHOODS: EMPOWERING WOMEN IN AGRICULTURE
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- 194 WATER, SANITATION AND HYGIENE IN SCHOOLS
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390 IMPLEMENT COMMUNITY BASED MICROFINANCE

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- 391 DEVELOP CHILD-CENTERED CONFLICT MITIGATION PROGRAMS
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446 STRENGTHENING SGBV ADVOCACY IN THE GREAT LAKES REGION

447 NATIONAL LEVEL ADVOCACY ON UNSC1325 AND WOMEN EMPOWERMENT

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449 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN

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455 TO REDUCE EXTREME POVERTY, FOOD INSECURITY AND VULNERABILITY IN

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469 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL INFRASTRUCTURE.

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470

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- WOMEN AND GIRLS HAVE ESTABLISHED SOCIAL, POLITICAL, ECONOMIC 471
- BALANCES AND MAINTAIN SOCIAL COHESION AT THE COMMUNITY, REGIONAL AND

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472 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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- 474 FOOD SECURITY INITIATIVES
- PROMOTION OF GIRLS AND ADOLESCENT WOMEN LEADERSHIP 475
- 476 DEVELOPMENT EDUCATION GIRLS EMPOWERMENT
- 477 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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478 1. SOCIAL INCLUSION, 2. ECONOMIC EMPOWERMENT, 3. PRO-POOR

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- 479 JOB CREATION THROUGH ENHANCED SMALL BUSINESS DEVELOPMENT
- PROGRAM DEVELOPMENT WITHIN THE NIGER DELTA 480
- CHILD SURVIVAL AND HEALTH 481
- 482 TO WORK COLLABORATIVELY WITH ALL STAKEHOLDERS IN THE EDUCATIONAL

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STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS 485

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486 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS

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488 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS

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489 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS

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490 PARTNERING FOR CHANGE

491 PARTNERING FOR CHANGE

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- 494 INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT
- STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS 495

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- PROVIDE SAFE DRINKING WATER AND SANITARY FACILITIES TO PEOPLE IN 497
- THE NORTHERN PART OF MOZAMBIQUE IN NAMPULA AND CABO DELGADO PROVINCES
- 498 ACTION RESEARCH ON RATIONAL MANAGEMENT OF PASTORAL RESOURCES IN

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- SOCIAL AND ECONOMIC TRANSFORMATION OF THE ULTRA POOR. ECONOMIC 499
- EMPOWERMENT OF THE EXTREME POOR THROUGH COMMUNITY LED DEVELOPMENT.
- 500 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)
- HOUSEHOLDS IN 11 OF THE POOREST AND MOST MARGINALIZED DISTRICTS IN

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501 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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- 502 ORISSA FLOOD RELIEF PROGRAMME
- STRENGTHENING MATERNAL AND NEWBORN HEALTH, IMPROVING GIRLS 503

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MOBILIZATION

505 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

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506 SECURITE ALIMENTAIRE A TRAVERS LA PROMOTION DE LIRRIGATION

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521 IMPROVE THE QUALITY OF LIFE OF THE VICTIMS OF THE LRA CONFLICT IN

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522 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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523 SOCIAL, POLITICAL AND ECONOMIC EMPOWERMENT FOR MARGINALISED WOMEN

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525 IMPLEMENT THE COMPONENT OF PSYCHOSOCIAL SUPPORT INCLUDING

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526 ENGAGING MEN INITIATIVE - WOMEN AND GIRLS EMPOWERMENT PROGRAM

527 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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528 TO IMPROVE THE ECONOMIC SECURITY OF 10,000 POOR AND VULNERABLE

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529 BANKING ON CHANGE INDIA

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531 SEXUAL AND GENDER BASED VIOLENCE PREVENTION

532 HEALTH AND NUTRITION ASSISTANCE

533 IMPROVE SOCIO-ECONOMIC CONDITIONS OF 3000 WAR AFFECTED YOUTHS AND

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534 WOMEN AFFECTED BY CONFLICTS ARE ABLE TO EXERCISE THEIR HUMAN

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- WOMEN AFFECTED BY CONFLICTS ARE ABLE TO EXERCISE THEIR HUMAN RIGHTS BY ADDRESSING AGENCY, INSTITUTIONAL/STRUCTURAL AND RELATIONAL ASPECTS OF THEIR EMPOWERMENT.
- 536 ENABLE HOUSEHOLDS TO BUILD RESILIENT LIVELIHOODS THAT ARE
 SUSTAINABLE AND PROFITABLE, INCORPORATING NATIONAL RESOURCE MANAGEMENT
 AND RISK REDUCTION FOR HOUSEHOLDS.
- 537 LIFE SAVING INTERVENTIONS FOR WOMEN AND GIRLS IN HAITI
 538 STRENGTHEN COMMUNITY-BASED INITIATIVES FOR POVERTY REDUCTION IN
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL INFRASTRUCTURE.
- 540 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL INFRASTRUCTURE.
- EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR, VULNERABLE AND SOCIALLY EXCLUDED WOMEN IN 3 DISTRICTS OF CHURIA AS WELL AS BUILDING CAPACITY OF PARTNER NGOS PROMOTE SUSTAINABLE SOCIO-ECONOMIC CHANGE FOR THESE WOMEN.
- EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR, VULNERABLE AND SOCIALLY EXCLUDED WOMEN IN 3 DISTRICTS OF CHURIA AS WELL AS BUILDING CAPACITY OF PARTNER NGOS PROMOTE SUSTAINABLE SOCIO-ECONOMIC CHANGE FOR THESE WOMEN.
- WOMEN AND GIRLS LEADERSHIP DEVELOPMENT

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- 544 WOMEN AND GIRLS LEADERSHIP DEVELOPMENT
- 545 COMBAT VIOLENCE AGAINST WOMEN

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- 546 ADAPTATION LEARNING PROGRAM IN AFRICA
- 547 YOUTH PASTORALISM AND CULTURE OF PEACE; STRENGTHENING LOCAL

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548 YOUTH PASTORALISM AND CULTURE OF PEACE; STRENGTHENING LOCAL

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- 549 IMPROVING SAFE WATER SUPPLY IN SOMALILAND
- 550 ENGAGING MEN INITIATIVE WOMEN AND GIRLS EMPOWERMENT PROGRAM
- 551 FLOOD RELIEF AND RECOVERY IN SINDH AND SOUTH PUNJAB
- 552 EARLY RECOVERY SUPPORT TO FLOOD AFFECTED COMMUNITIES IN

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- 553 IMPROVED ACCESS TO HUMANITARIAN ASSISTANCE AND PROTECTION FOR
- FLOOD AFFECTED COMMUNITIES IN TARGETED AREAS OF RETURN AND AREAS OF

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- TO IMPROVE THE ECONOMIC SECURITY OF 10,000 POOR AND VULNERABLE
- HOUSEHOLDS LIVING IN URBAN AND RURAL AREAS IN URBAN AND RURAL AREAS IN

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- 555 PALESTINIAN COMMUNITY ASSISTANCE PROGRAM
- 556 TO REDUCE THE ADVERSE EFFECTS OF HIV/AIDS, POVERTY, EXPLOITATION
- AND ABUSE ON ORPHANS AND CHILDREN IDENTIFIED AS MOST VULNERABLE.
- 557 EMERGENCY WATER AND SANITATION
- 558 EMERGENCY WASH AND FOOD ASSISTANCE TO FAMINE AFFECTED

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- 559 INFANT, YOUTH, CHILD NUTRITION
- 560 ENABLE HOUSEHOLDS TO BUILD RESILIENT LIVELIHOODS THAT ARE

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- 561 PAKISTAN FLOOD EMERGENCY RELIEF PROJECTS
- 562 PAKISTAN FLOOD RELIEF PROJECT
- 563 HUMANITARIAN AND EARLY RECOVERY ASSISTANCE TO FLOOD AFFECTED

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- 565 PAKISTAN FLOOD RELIEF PROJECT
- 566 HUMANITARIAN ASSISTANCE TO CONFLICT AFFECTED FAMILIES IN FLOOD

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567 HUMANITARIAN ASSISTANCE TO CONFLICT AFFECTED FAMILIES IN FLOOD

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- 568 PAKISTAN FLOOD RELIEF PROJECT
- 569 HUMANITARIAN AND EARLY RECOVERY ASSISTANCE TO FLOOD AFFECTED

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570 REVITALIZING EDUCATION & BUILDING PEACE IN POST CONFLICT AND

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571 INTEGRATED HUMANITARIAN ASSISTANCE FOR FLOOD AFFECTED POPULATIONS

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572 INTEGRATED HUMANITARIAN ASSISTANCE FOR FLOOD AFFECTED POPULATIONS

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578 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS

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581 PROJECT TO SUPPORT PRIMARY HEALTH CARE TO VULNERABLE POPULATIONS

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584 SUPPORT MECHANISM FOR PROMOTION OF VILLAGE SAVINGS AND LOAN

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586 WATER, SANITATION AND ECOLOGICAL FERTILIZATION FOR ACHIEVING THE

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587 WATER, SANITATION AND ECOLOGICAL FERTILIZATION FOR ACHIEVING THE

MUGS

588 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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589 EXECUTE EVIDENCE BASED, COORDINATED SOCIAL AND BEHAVIOUR CHANGE

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590 EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR, VULNERABLE

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591 EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR, VULNERABLE

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592 WATER, SANITATION AND HYGIENE IN SCHOOLS

593 YOUTH PASTORALISM AND CULTURE OF PEACE; STRENGTHENING LOCAL

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PASTORAL HOUSEHOLDS

594 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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595 TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS AND

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596 TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS AND

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597 CLIMATE PROOF - DISASTER RISK REDUCTION IN GUATEMALA

598 SUSTAINABLE LIVELIHOODS TO MITIGATE EFFECTS OF CLIMATE CHANGE

599 INFANT AND YOUNG CHILD FEEDING, MATERNAL NUTRITION, LIVELIHOODS

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600 PROMOTING FOOD SECURITY AND ECONOMIC DEVELOPMENT

601 PROMOTING FOOD SECURITY AND ECONOMIC DEVELOPMENT

602 NATURAL RESOURCES MANAGEMENT

603 DEVELOPMENT ASSISTANCE PROJECT

604 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS

INTO MAINSTREAM GEORGIA SOCIETY-SIIMS

605 EXECUTE EVIDENCE BASED, COORDINATED SOCIAL AND BEHAVIOUR CHANGE

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606 EXECUTE EVIDENCE BASED, COORDINATED SOCIAL AND BEHAVIOUR CHANGE

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- INTERNATIONAL NGO INTEGRATED EMERGENCY RESPONSE PROJECT 607
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- 609 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)

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- 610 GLOBAL WATER INITIATIVE
- 611 GLOBAL WATER INITIATIVE
- GLOBAL WATER INITIATIVE 612
- 613 GLOBAL WATER INITIATIVE
- 614 STRENGTHENING LOCAL LEVEL GOVERNANCE IN NATURAL RESOURCE

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- 615 PALESTINIAN COMMUNITY ASSISTANCE PROGRAM
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 616

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- GOVERNANCE AND CONFLICT RESOLUTION 617
- 618 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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619 INCREASED UNDERSTANDING OF GENDER NORMS, PRACTICES AND BEHAVIORS

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CHANGE COMMUNICATIONS CAMPAIGN PREVENTING VIOLENCE AGAINST WOMEN

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620 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

MOBILIZATION

URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY 621

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- 622 IMPROVE HEALTH AND SURVIVAL OF WOMEN, NEWBORNS, AND CHILDREN
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 623

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624 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 625

LOCAL INFRASTRUCTURE.

626 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

627 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 628

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- DEMOCRACY AND GOVERNANCE 630
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 631

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632 PILOTING REDUCING EMISSIONS FROM DEFORESTRATION AND FOREST

DEGRADATION IN ZANZIBAR THROUGH COMMUNITY FOREST MANAGEMENT

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- 647 CLIMATE PROOF - DISASTER RISK REDUCTION IN UGANDA
- TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP) 648

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649 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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- 651 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN
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- 652 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 653

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654 WOMEN AFFECTED BY CONFLICT ARE ENABLED TO EXERCISE WOMEN'S HUMAN

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WOMEN AFFECTED BY CONFLICT ARE ENABLED TO EXERCISE WOMEN'S HUMAN 655

RIGHTS BY ADDRESSING AGENCY, STRUCTURAL AND RELATION ASPECTS OF THEIR

EMPOWERMENT.

GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 656

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657 STRENGTHENING LOCAL LEVEL GOVERNANCE IN NATURAL RESOURCE

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SOCIAL AND BEHAVIOUR CHANGE COMMUNICATIONS.

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661 ENHANCING MARGINALIZED WOMEN'S ENJOYMENT OF ECONOMIC RIGHTS

662 ENHANCING MARGINALIZED WOMEN'S ENJOYMENT OF ECONOMIC RIGHTS

GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 663

LOCAL INFRASTRUCTURE.

664 STRENGTHENING LOCAL LEVEL GOVERNANCE IN NATURAL RESOURCE

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665 WATER, SANITATION AND HYGIENE IN SCHOOLS

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667 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS

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668 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN

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670 STRENGTHENING LOCAL LEVEL GOVERNANCE IN NATURAL RESOURCE

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SUB-COUNTIES IN KABAROLE DISTRICT

671 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN

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GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 672

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- 674 NATIONAL LEVEL ADVOCACY ON UNSC1325 AND WOMEN EMPOWERMENT
- WOMEN EMPOWERMENT FOR PEACE 675
- 676 ENGAGING MEN AND BOYS FOR WOMEN'S EMPOWERMENT
- 677 CASHEW FARM PROJECT
- REDUCE POVERTY, WOMEN ECONOMIC AND SOCIAL EMPOWERMENT 678
- 679 ENGAGING MEN INITIATIVE - WOMEN AND GIRLS EMPOWERMENT PROGRAM
- 680 ENGAGING MEN INITIATIVE - WOMEN AND GIRLS EMPOWERMENT PROGRAM
- WOMEN EMPOWERMENT PROGRAM 681
- 682 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

683 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN

VSLA MECHANISMS

BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL 684

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VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY

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CHILDREN

685	NATURAL RESOURCES MANAGEMENT			
686	RECOVERY AND EMERGENCY ASSISTANCE FOR SOMALIA			
687	WOMEN AND GIRLS LEADERSHIP DEVELOPMENT			
688	INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT			
689	TO IMPROVE LIVELIHOODS OF POOR DALIT WOMEN THROUGH CREATING			
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690	WOMEN EMPOWERMENT PROGRAM			
691	LWT ON GOVERNANCE			
692	GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE			
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693	GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE			
LOCAL II	NFRASTRUCTURE.			
694	EXPANDING AND INCREASING ACCESS TO HIV AND AIDS TREATMENT AND			
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695	SAVE UP: DEVELOP SUSTAINABILITY MODELS FOR SAVINGS LED FINANCIAL			
SERVICES FOR THE POOR				
696	INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT			
697	URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY			
MOBILIZATION				
698	PARTNERING FOR CHANGE			
699	PROTECTION OF LIVELIHOODS AND FOOD ASSISTANCE			
700	TO SUPPORT THE LIVELIHOOD RECOVERY OF SMALL-SCALE FARMERS AND			

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RURAL HOUSEHOLDS BY REPLACING DESTROYED AGRICULTURAL ASSETS AND INPUTS

AND BY PROVIDING ACCESS TO FOOD AND EMPLOYMENT

IMPROVING ASSET BASE OF VULNERABLE FARMERS, BREEDERS, AND

HOUSEHOLDS BY INCREASED FOOD PROTECTION AND SUSTAINED INCOME

702 SUSTAINABLE AGRICULTURE DEVELOPMENT PROJECT

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705 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 706

LOCAL INFRASTRUCTURE.

707 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

708 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 709

LOCAL INFRASTRUCTURE.

EMPOWER WOMEN THROUGH IMPROVED ACCESS AND UTILIZATION OF 710

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712 LOCAL DEVELOPMENT AND GOOD GOVERNANCE

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VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY

BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE

CHILDREN

- ORGANISATIONS TO PROVIDE A CORE PACKAGE OF SERVICES FOR ORPHANS AND VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE CHILDREN
- ORGANISATIONS TO PROVIDE A CORE PACKAGE OF SERVICES FOR ORPHANS AND VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE CHILDREN
- 716 ENABLE HOUSEHOLDS TO BUILD RESILIENT LIVELIHOODS THAT ARE SUSTAINABLE AND PROFITABLE
- 717 NUTRITION FOUNDATIONS FOR MOTHERS AND CHILDREN IN MALAWI
- 718 REDUCE POVERTY AND PROMOTE WOMEN ECONOMIC AND SOCIAL EMPOWERMENT
- 719 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

- 720 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL INFRASTRUCTURE.
- 721 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL INFRASTRUCTURE.
- 722 TO INCREASE WORKERS CAPACITY TO READ AND WRITE, TO INCREASE THE

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PRODUCTIVITY OF THE WORKERS, TO RAISE WORKERS SELF ESTEEM, AND

REPRODUCTIVE HEALTH PRACTICES AWARENESS.

723 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

MOBILIZATION

724 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

MOBILIZATION

725 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

726 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

727 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

728 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

729 REDUCE POVERTY AND PROMOTE WOMEN ECONOMIC AND SOCIAL EMPOWERMENT

730 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE

CHILDREN

731 FOOD SECURITY INITIATIVES

732 SOCIAL MARKETING FOR CONDOMS

733 HARM REDUCTION SERVICES AMONG THE INJECTING DRUG USER (IDU) AND

ALSO PROVIDE TREATMENT AND VOCATIONAL TRAINING SUPPORT THROUGH

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DETOXIFICATION AND VOCATIONAL TRAINING.

SEXUAL AND REPRODUCTIVE HEALTH INTERVENTION FOR DISASTER AFFECTED 734

PEOPLE IN EAST AND WEST HARARGHE ZONE OF OROMIYA REGION, ETHIOPIA

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736 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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738 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

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742 WATER AND SANITATION INFRASTRUCTURE

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- 743 DEVELOPMENT PROJECT ACTIVITIES
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 744

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- DRINKING WATER AND ENVIRONMENT EDUCATION 745
- 746 CONSORTIUM ACTION FOR RAPID RECOVERY OF THE POPULATION AFFECTED

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- CONSORTIUM ACTION FOR RAPID RECOVERY OF THE POPULATION AFFECTED 747
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- BY FLOODS IN SOUTHEAST MADAGASCAR
- 749 CONSORTIUM ACTION FOR RAPID RECOVERY OF THE POPULATION AFFECTED
- BY CYCLONE BINGIZA, MADAGASCAR
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- INTO MAINSTREAM GEORGIA SOCIETY-SIIMS
- 751 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN

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752 LINKING VILLAGE SAVINGS AND LOAN ASSOCIATIONS TO CENTENARY BANK

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- 753 PROMOTING HUMAN RIGHTS, WOMEN'S RIGHTS AND GENDER EQUALITY.
- TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP) 754
- HOUSEHOLDS IN 11 OF THE POOREST AND MOST MARGINALIZED DISTRICTS IN

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755 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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756 BASIC AND SUSTAINABLE WATER AND SANITATION HYGIENE FOR THE

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ORGANISATIONS TO PROVIDE A CORE PACKAGE OF SERVICES FOR ORPHANS AND

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BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE

CHILDREN

760 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE

CHILDREN

761 SUPPORTING PEACEFUL RESOLUTION OF CONFLICT IN SOUTH AFRICA

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763 EMERGENCY WASH AND FOOD ASSISTANCE TO FAMINE AFFECTED

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764 EAST AFRICA CRISIS: FOOD VOUCHERS AND WASH

HARM REDUCTION SERVICES AMONG THE INJECTING DRUG USER (IDU) AND 765

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ALSO PROVIDE TREATMENT AND VOCATIONAL TRAINING SUPPORT THROUGH

DETOXIFICATION AND VOCATIONAL TRAINING.

GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

	- ~ ~			~	
767	AGRICULTURE	PROMOTITON	H()K	BASIC	NEEDS

WATER AND SANITATION INFRASTRUCTURE 768

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770 AGRICULTURE PROMOTION FOR BASIC NEEDS

771 WATER AND SANITATION INFRASTRUCTURE

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773 PARTNERING FOR CHANGE

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776 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 777

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778 STRENGTHENING PEACE PROJECT

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OF WOMEN AND YOUTH IN THE PROCESS OF INFLUENCING A DEMOCRATIC

CONSTITUTION IN NEPAL, LEADING TOWARDS SUSTAINABLE PEACE AND THE

ACHIEVEMENT OF THEIR ASPIRATIONS

780 STRENGTHENING CAPACITY TO DESIGN, MONITOR AND EVALUATE

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781 DEVELOPMENT ASSISTANCE PROJECT

782 ENGAGING MEN INITIATIVE - WOMEN AND GIRLS EMPOWERMENT PROGRAM

783 TO CONTRIBUTE AGAINST POVERTY BY ENSURING ACCESS TO FOOD FOR ALL

AND INCREASED SOCIAL PROTECTION PARTICULARLY THOSE AFFECTED BY FOOD PRICE

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784 SAFE PASSAGE: MAKING MOBILITY SAFE BY REDUCING VULNERABILITY AND

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785 YOUTH AND CHILDREN'S NUTRITION PROJECTS

786 MATERNAL AND NEONATAL MORTALITY AND MORBIDITY REDUCTION IN NARAIL

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787 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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788 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)

HOUSEHOLDS IN 11 OF THE POOREST AND MOST MARGINALIZED DISTRICTS IN

BANGLADESH BY REDUCING THEIR VULNERABILITY TO FOOD INSECURITY.

789 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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790 PREVENT AND REDUCE VIOLENCE AGAINST YOUNG WOMEN AND GIRLS

791 VILLAGE SAVINGS AND LOANS PILOT PROJECT

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- 792 BASIC AND SUSTAINABLE WATER AND SANITATION HYGIENE FOR THE
- MILLENNIUM DEVELOPMENT GOALS
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE
- LOCAL INFRASTRUCTURE.
- 794 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE
- LOCAL INFRASTRUCTURE.
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 795
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- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE
- LOCAL INFRASTRUCTURE.
- 797 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL
- ORGANISATIONS TO PROVIDE A CORE PACKAGE OF SERVICES FOR ORPHANS AND
- VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY
- BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE
- CHILDREN
- GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 798
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- 799 CONTRIBUTE TOWARDS POVERTY REDUCTION AND EMPOWERMENT OF HIGHLY
- MARGINALIZED JANAJATIS (INDIGENOUS PEOPLE) IN NEPAL
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- 801 DISASTER RISK REDUCTION AWARENESS PROGRAM
- 802 DEVELOPMENT ASSISTANCE PROJECT
- 803 SAFE PASSAGE: MAKING MOBILITY SAFE BY REDUCING VULNERABILITY AND

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804 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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805 WOMEN IN DEVELOPMENT

806 ENHANCING MOBILE POPULATIONS' ACCESS TO HIV AND AIDS SERVICES,

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807 PILOTING REDUCING EMISSIONS FROM DEFORESTATION AND FOREST

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808 SOCIAL, POLITICAL AND ECONOMIC EMPOWERMENT FOR MARGINALISED WOMEN

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809 WOMEN AND GIRLS EMPOWERMENT PROGRAM

810 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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811 INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT

812 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

813 SUSTAINABLE IMPROVEMENT IN MATERNAL AND NEW BORN HEALTH

814 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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815 BANKING ON CHANGE INDIA

816 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

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819 PROMOTE COMMERCIAL COMPETITIVENESS OF SELECTIVE PRODUCTS

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820 GOVERNANCE AND VILLAGE SAVINGS AND LOANS ASSOCIATIONS: PROMOTING

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822 COMMUNITY HEALTH PROGRAM

823 COMMUNITY HEALTH PROGRAM

824 EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR, VULNERABLE

AND SOCIALLY EXCLUDED WOMEN IN 3 DISTRICTS OF CHURIA AS WELL AS BUILDING

CAPACITY OF PARTNER NGOS PROMOTE SUSTAINABLE SOCIO-ECONOMIC CHANGE FOR

THESE WOMEN.

825 EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR, VULNERABLE

AND SOCIALLY EXCLUDED WOMEN IN 3 DISTRICTS OF CHURIA AS WELL AS BUILDING

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827 IMPROVE THE QUALITY OF LIFE OF THE VICTIMS OF THE LRA CONFLICT IN

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828	COMMUNITY HEALTH PROGRAM				
829	FLOOD RELIEF AND RECOVERY IN SINDH AND SOUTH PUNJAB				
830	DEVELOPMENT EDUCATION GIRLS EMPOWERMENT				
831	EDUCATION AND DEVELOPMENT				
832	SCALING UP THE RESPONSE TO HIV AND AIDS				
833	PROVIDE SAFE DRINKING WATER AND SANITARY FACILITIES TO PEOPLE IN				
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834	COMMUNITY HEALTH PROGRAM				
835	CASH TRANSFER PROJECT IN SUPPORT OF THE FIGHT AGAINST				
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836	WOMEN AND GIRLS LEADERSHIP DEVELOPMENT				
837	PROMOTION OF GIRLS AND ADOLESCENT WOMEN LEADERSHIP				
838	FOOD SECURITY PROGRAM				
839	FOOD SECURITY PROGRAM				
840	WOMEN AND GIRLS LEADERSHIP DEVELOPMENT				
841	RURAL ACCESS TO NEW OPPORTUNITIES FOR HEALTH AND PROSPERITY				
842	VILLAGE SAVINGS AND LOANS ASSOCIATIONS IN NAMPULA, MOZAMBIQUE				
843	IMPROVE THE LIVELIHOOD OF POOR INHABITANTS OF FORESTS BY				

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844 BRING MEASURABLE AND POSITIVE CHANGE IN THE ECONOMIC, SEXUAL AND

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849 WATER, SANITATION AND HYGIENE IN SCHOOLS

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851 EMERGENCY CAPACITY BUILDING

852 EMERGENCY CAPACITY BUILDING

853 GLOBAL WASH CLUSTER RAPID ASSESSMENT TEAM SUPPORT

854 GLOBAL WATER INITIATIVE

855 WOMEN AND GIRLS LEADERSHIP DEVELOPMENT

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859 PALESTINIAN COMMUNITY ASSISTANCE PROGRAM

860 IMPROVING ASSET BASE OF VULNERABLE FARMERS, BREEDERS, AND

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862 HEALTH AND NUTRITION ASSISTANCE

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865 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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867 PROTECTION OF LIVELIHOODS AND FOOD ASSISTANCE

868 TO SUPPORT THE LIVELIHOOD RECOVERY OF SMALL-SCALE FARMERS AND

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869 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN

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870 GLOBAL WATER INITIATIVE

871 ADAPTATION LEARNING PROGRAM IN AFRICA

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873 DISASTER RISK REDUCTION CLIMATE CHANGE ADAPTATION AND POVERTY

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GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 874

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875 PAKISTAN FLOODS RECOVERY PROJECT

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DEVELOPMENT AND HUMANITARIAN ASSISTANCE THROUGH IMPROVED AND MORE

WIDESPREAD MAINSTREAMING OF CONFLICT SENSITIVE APPROACHES.

STRENGTHENING STATE AND CIVIL SOCIETY CAPACITY FOR COMPREHENSIVE

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878 CLIMATE CHANGE INITIATIVES

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880 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)

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881 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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883 IMPROVE THE STATUS OF UNDERWEIGHT CHILDREN UNDER AGE 2 AND

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885 ENGAGING MEN INITIATIVE - WOMEN AND GIRLS EMPOWERMENT PROGRAM

886 ENGAGING MEN INITIATIVE - WOMEN AND GIRLS EMPOWERMENT PROGRAM

887 ENGAGING MEN INITIATIVE - WOMEN AND GIRLS EMPOWERMENT PROGRAM

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- 888 INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT
- 889 INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT
- 890 1. SOCIAL INCLUSION, 2. ECONOMIC EMPOWERMENT, 3. PRO-POOR

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891 WOMEN AND GIRLS HAVE ESTABLISHED SOCIAL, POLITICAL, ECONOMIC

BALANCES AND MAINTAIN SOCIAL COHESION AT THE COMMUNITY, REGIONAL AND

NATIONAL LEVELS, NOTABLY IN FAVOR OF A BETTER INTEGRATION OF THE MOST

VULNERABLE AND/OR MARGINALIZED.

892 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

MOBILIZATION

- 893 YOUTH AND CHILDREN'S NUTRITION PROJECTS
- 894 FOOD SECURITY FOR THE ULTRA POOR
- FOOD SECURITY FOR THE ULTRA POOR IN THE HOAR REGION IN

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- 896 OVERCOMING SEXUAL AND GENDER BASED VIOLENCE PROJECT
- 897 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

MOBILIZATION

- 898 CONFLICT MITIGATION PERU
- 899 EMPOWERMENT OF LOCAL AND NATIONAL ASSOCIATIONS IN RESPONDING TO

ECONOMIC DEVELOPMENT OPPORTUNITIES AND CLIMATE CHANGE AND DISASTER

VULNERABILITIES

900 CHILD AND YOUTH DEVELOPMENT, INDIVIDUAL AND COMMUNITY CAPACITY

BUILDING, AND HIV/AIDS RELATED AWARENESS, KNOWLEDGE AND SKILLS TO REDUCE

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901 SUSTAINABLE POVERTY REDUCTION AMONGST MARGINALIZED COMMUNITIES

IN GEORGIA, THROUGH STRENGTHENED CIVIL SOCIETY AND LOCAL GOVERNANCE

PROCESSES.

902 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY

BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE

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903 DEVELOPMENT ASSISTANCE PROJECT

904 EMERGENCY CARE AND SUPPORT TO IVORIAN REFUGEES IN GRAND GEDEH

COUNTY, LIBERIA

905 MEN ENGAGEMENT FOR WOMEN EMPOWERMENT

906 HARM REDUCTION SERVICES AMONG THE INJECTING DRUG USER (IDU) AND

ALSO PROVIDE TREATMENT AND VOCATIONAL TRAINING SUPPORT THROUGH

DETOXIFICATION AND VOCATIONAL TRAINING.

907 STRENGTHENING MATERNAL AND NEWBORN HEALTH, IMPROVING GIRLS

EDUCATION, STRENGTHENING QUALITY OF EDUCATION

908 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

909 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

910 TRANSBORDER INITIATIVE TO PROMOTE WOMEN'S RIGHTS TO PROPERTY

911 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

912 RECOVERY AND EMERGENCY ASSISTANCE FOR SOMALIA

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- 913 SOMALILAND & PUNTLAND YOUTH EMPLOYMENT
- BASIC AND SUSTAINABLE WATER AND SANITATION HYGIENE FOR THE 914

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917 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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- INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT 918
- 919 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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- ENHANCED CAPACITY OF CIVIL SOCIETY IN NEPAL TO UNITE AND DEMAND 920
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- 921 CHURIA LIVELIHOOD IMPROVEMENT PROGRAM
- DECREASE THE HARMFUL PRACTICE OF CHILD MARRIAGE IN THREE 922

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MARRIAGE AND OTHER FORMS OF GENDER BASED VIOLENCE

923 1. SOCIAL INCLUSION, 2. ECONOMIC EMPOWERMENT, 3. PRO-POOR

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CIVIL SOCIETY ORGANISATION (CSO) NETWORKS ARE INFLUENCING KEY 925

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COMMUNITY DEVELOPMENT IN AREA ADJACENT TO THE 926 PTPELINE

927 INTEGRATED WASH AND HEALTH RESPONSE TO FLOOD AFFECTED

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929 CONFLICT MITIGATION PERU

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931 SCALING UP INTERVENTIONS TO COMBAT MALARIA IN COTE D'IVOIRE IN

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932 SCALING UP INTERVENTIONS TO COMBAT MALARIA IN COTE D'IVOIRE IN

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933 PROMOTING HUMAN RIGHTS, WOMEN'S RIGHTS AND GENDER EQUALITY.

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GOVERNMENT OF ETHIOPIA PRODUCTIVE SAFETY NET PROGRAM (PSNP) SO THAT THEY

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- 936 GRADUATION WITH RESILIENCE TO ACHIEVE SUSTAINABLE DEVELOPMENT
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- TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP) 939

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- TO ENHANCE CAPACITY AND CONTRIBUTE TO GOVERNMENT & CIVIL SOCIETY

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- 942 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)
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943 STRENGTHENING CONTROL OF TUBERCULOSIS IN ECUADOR WITH EMPHASIS ON

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944 SOUTHERN VOICES CAPACITY BUILDING AIMED AT PROVIDING SUPPORT FOR

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- 945 GOVERNANCE AND CONFLICT RESOLUTION
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947 PROMOTION, EXPANSION AND QUALITY CONTROL OF AGREED AND PROVEN

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948 SUSTAINABLE RESPONSE FOR IMPROVING THE LIVES OF VULNERABLE

CHILDREN

949 TO CONTRIBUTE AGAINST POVERTY BY ENSURING ACCESS TO FOOD FOR ALL

AND INCREASED SOCIAL PROTECTION PARTICULARLY THOSE AFFECTED BY FOOD PRICE

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951 CHURIA LIVELIHOOD IMPROVEMENT PROGRAM

952 INDIA FLOOD RELIEF

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954 INDIA FLOOD RELIEF

955 WOMEN AFFECTED BY CONFLICT ARE ENABLED TO EXERCISE WOMEN'S HUMAN

RIGHTS BY ADDRESSING AGENCY, STRUCTURAL AND RELATIONAL ASPECTS OF THEIR

EMPOWERMENT.

956 WOMEN AFFECTED BY CONFLICT ARE ENABLED TO EXERCISE WOMEN'S HUMAN

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958 EMERGENCY FOOD SECURITY AND NUTRITION SUPPORT TO DISASTER

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960 TO REDUCE EXTREME POVERTY, FOOD INSECURITY AND VULNERABILITY IN

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IMPROVED FOOD ACCESS AND UTILIZATION AND REDUCE VULNERABILITY FOR WOMEN

AND THEIR DEPENDENTS IN ULTRA POOR FAMILIES.

STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

OPPORTUNITIES

962 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)

HOUSEHOLDS IN 11 OF THE POOREST AND MOST MARGINALIZED DISTRICTS IN

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963 EDUCATION LIVELIHOODS PROJECT

964 RURAL ACCESS TO NEW OPPORTUNITIES FOR HEALTH AND PROSPERITY

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LOCAL INFRASTRUCTURE.

966 CHURIA LIVELIHOOD IMPROVEMENT PROGRAM

GLOBAL WATER INITIATIVE 967

968 GLOBAL WATER INITIATIVE

GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE 969

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970 STRENGTHENING STATE AND CIVIL SOCIETY CAPACITY FOR COMPREHENSIVE

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971 POOR RURAL COMMUNITIES IN ARID AND SEMI ARID ZONES TO REDUCE

THEIR VULNERABILITY TO WATER-RELATED SHOCKS AND IMPROVE THEIR QUALITY OF

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972 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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973 EMERGENCY FOOD SECURITY & LIVELIHOOD SUPPORT (CFW, AGRICULTURE,

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LIVESTOCK, FISHERIES ETC.)

- 974 FLOOD RESISTANT SHELTER FOR SOUTH WEST REGION OF BANGLADESH
- 975 EMERGENCY ASSISTANCE SUPPORT FOR WATER LOGGING AFFECTED

POPULATIONS IN BANGLADESH.

976 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

- 977 RURAL ACCESS TO NEW OPPORTUNITIES FOR HEALTH AND PROSPERITY
- 978 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

979 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

980 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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- 981 INCREASED UNDERSTANDING OF GENDER NORMS, PRACTICES AND BEHAVIORS
- REGARDING MARRIAGE THAT CONTRIBUTE TO VIOLENCE AGAINST WOMEN, BEHAVIOR

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DEVELOPED AND IMPLEMENTED.

- 982 1. SOCIAL INCLUSION, 2. ECONOMIC EMPOWERMENT, 3. PRO-POOR
- GOVERNANCE & 4. LEARNING AND INFLUENCING
- 983 BUILDING PRO-POOR, INCLUSIVE AND GENDER SENSITIVE LOCAL

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984 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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985 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)

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987 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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989 SUPPORT TEACHERS AND STAFF AT UDAAN PROJECT, INDIA

990 GIRLS EDUCATION PROGRAM - POWER WITHIN

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992 GOVERNANCE AND CONFLICT RESOLUTION

993 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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994 COMMUNITY INFRASTRUCTURE IMPROVEMENT PROJECT

995 INCREASE ACCESS TO CLEAN, SAFE DRINKING WATER AND IMPROVED

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996 INTEGRATED HUMANITARIAN ASSISTANCE FOR FLOOD AFFECTED POPULATIONS

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998 STRENGTHENING GENDER BASED VIOLENCE ADVOCACY IN THE GREAT LAKES

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999 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

1000 IMPROVE THE RESILIENCY OF SELECTED PARTICIPANTS UNDER THE

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CAN GRADUATE OFF OF THIS SAFETY NET BY LINKING POOR RURAL HOUSEHOLDS TO

MICRO-FINANCE AND MARKETS.

1001 EXPANDING AND INCREASING ACCESS TO HIV AND AIDS TREATMENT AND

CARE

1002 EXPANDING AND INCREASING ACCESS TO HIV AND AIDS TREATMENT AND

CARE

1003 EXPANDING AND INCREASING ACCESS TO HIV AND AIDS TREATMENT AND

CARE

1004 EXPANDING AND INCREASING ACCESS TO HIV AND AIDS TREATMENT AND

CARE

1005 ANIMAL HEALTH PROGRAM IN ORISSA

1006 RURAL DEVELOPMENT AND EMPLOYMENT OPPORTUNITIES

1007 PILOTING REDUCING EMISSIONS FROM DEFORESTRATION AND FOREST

DEGRADATION IN ZANZIBAR THROUGH COMMUNITY FOREST MANAGEMENT

1008 BANKING ON CHANGE INDIA

1009 WOMEN EMPOWERMENT PROGRAM

1010 CONFLICT MITIGATION PERU

1011 COMPREHENSIVE SKILLS TRAINING AND EMPOWERMENT OF AFGHAN REFUGEES

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1012 TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS

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AND THEIR FAMILIES

1013	$EI \cap \cap D$	DELTER	7/ J/ J/	RECOMERY	TNT	TUNTS	V VID	TTTTO	DITM.T 7\D

1014 JOB CREATION THROUGH ENHANCED SMALL BUSINESS DEVELOPMENT

1015 COMMUNITY DEVELOPMENT, ASSISTANCE AND TRAINING FOR ASYLUM

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1016 EDUCATION LIVELIHOODS PROJECT

1017 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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1018 DEVELOP CAPACITY OF CIVIL SOCIETY NETWORKS TO ENGAGE PVSE GROUPS

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1019 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

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1020 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS

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1021 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)

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BANGLADESH BY REDUCING THEIR VULNERABILITY TO FOOD INSECURITY.

1022 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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1023 DRINKING WATER AND ENVIRONMENT EDUCATION

1024 STRENGTHENING POOREST AND VULNERABLE HOUSEHOLDS CAPABILITY TO

IMPROVE FOOD SECURITY

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1025 TO INCREASE WORKERS CAPACITY TO READ AND WRITE, TO INCREASE THE

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1027 STRENGTHENING POOREST AND VULNERABLE HOUSEHOLDS CAPABILITY TO

IMPROVE FOOD SECURITY

1028 STRENGTHENING POOREST AND VULNERABLE HOUSEHOLDS CAPABILITY TO

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1029 REDUCTION OF POVERTY AND HUNGER FOR THE POOREST AND MOST

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1031 WOMEN AND GIRLS EMPOWERMENT PROGRAM

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1033 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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1035 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

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1037 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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1039 WOMEN EMPOWERMENT PROGRAM

1040 GIRLS EDUCATION PROJECT

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1042 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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1043 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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1045 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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1048 EMPOWERMENT OF LOCAL AND NATIONAL ASSOCIATIONS IN RESPONDING TO

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1052 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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1053 1. SOCIAL INCLUSION, 2. ECONOMIC EMPOWERMENT, 3. PRO-POOR

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CAN GRADUATE OFF OF THIS SAFETY NET BY LINKING POOR RURAL HOUSEHOLDS TO

MICRO-FINANCE AND MARKETS.

1055 PROMOTE THE DEVELOPMENT AND ADOPTION OF IMPROVED SURVIVAL

STRATEGIES, COMMITTED TO FOREST CONSERVATION BY INDIVIDUALS,

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1057 INDIA FLOOD RELIEF

1058 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

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1059 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

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1060 WOMEN EMPOWERMENT PROGRAM

1061 WOMEN AND GIRLS HAVE ESTABLISHED SOCIAL, POLITICAL, ECONOMIC

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1062 TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS

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1063 YOUTH PASTORALISM AND CULTURE OF PEACE; STRENGTHENING LOCAL

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1064 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)

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1065 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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1066 RECOVERY AND EMERGENCY ASSISTANCE FOR SOMALIA

1067 RECOVERY AND EMERGENCY ASSISTANCE FOR SOMALIA

1068 HAITI EARTHQUAKE RESPONSE

1069 BASIC AND SUSTAINABLE WATER AND SANITATION HYGIENE FOR THE

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1070 WOMEN'S EMPOWERMENT PROJECTS

1071 IMPROVED DRINKING WATER MANAGEMENT IN AMRAN

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1072 COMMUNITY RESPONSIVE ANTENATAL, DELIVERY, AND LIFE ESSENTIAL

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1073 SOCIAL AND ECONOMIC TRANSFORMATION OF THE ULTRA POOR. ECONOMIC

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1074 SUPPORT MECHANISM FOR PROMOTION OF VILLAGE SAVINGS AND LOAN

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1077 CHILD SURVIVAL AND HEALTH

1078 COMMUNITY HEALTH PROGRAM

1079 SUPPORT FOR FLOOD AFFECTED FAMILIES

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1081 JOB CREATION THROUGH ENHANCED SMALL BUSINESS DEVELOPMENT

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1084 EARLY RECOVERY SUPPORT TO FLOOD AFFECTED COMMUNITIES

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1085 SINDH FLOOD RESPONSE 2011

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1087 GIRLS EDUCATION PROJECT

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1089 ENHANCING MOBILE POPULATIONS' ACCESS TO HIV AND AIDS SERVICES,

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1091	VOCATIONAL TRAINING FOR WOMEN
1092	RECOVERY AND EMERGENCY ASSISTANCE FOR SOMALIA
1093	FOOD SECURITY INITIATIVES
1094	CLIMATE-PROOF DISASTER RISK REDUCTION PROGRAM
1095	WATER SANITATION AND HYGIENE TRANSFORMATIONS FOR ENHANCED
RESILIEN	CE
1096	PROMOTING FOOD SECURITY AND ECONOMIC DEVELOPMENT
1097	PROMOTING FOOD SECURITY AND ECONOMIC DEVELOPMENT
1098	BASIC AND SUSTAINABLE WATER AND SANITATION HYGIENE FOR THE
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1099	GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE
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1100	BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL
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1101	STRENGTHENING GENDER BASED VIOLENCE ADVOCACY IN THE GREAT LAKES
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1102	JOB CREATION THROUGH ENHANCED SMALL BUSINESS DEVELOPMENT
1103	PAKISTAN FLOOD RELIEF PROJECT
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- 1105 PAKISTAN FLOOD EMERGENCY RELIEF PROJECTS
- 1106 PAKISTAN FLOOD EMERGENCY RELIEF PROJECTS
- IMPROVE THE HUMANITARIAN SITUATION OF FLOODS AFFECTED PEOPLE BY 1107

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1108 CONTRIBUTE TO REDUCED POVERTY AND IMPROVED SOCIAL JUSTICE IN

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1109 TO SUPPORT SUSTAINABLE, MARKET-DRIVEN WATER SUPPLY, SANITATION

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1110 EXECUTE EVIDENCE BASED, COORDINATED SOCIAL AND BEHAVIOUR CHANGE

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1111 TO IMPROVE LIVELIHOOD SECURITY OF PASTORALIST COMMUNITY IN GEITA

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1112 EXPANDING AND INCREASING ACCESS TO HIV AND AIDS TREATMENT AND

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1113 STRENGTHENING LOCAL LEVEL GOVERNANCE IN NATURAL RESOURCE

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1114 INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT

1115 DECREASE THE HARMFUL PRACTICE OF CHILD MARRIAGE IN THREE

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- 1116 COMMUNITY INFRASTRUCTURE IMPROVEMENT PROJECT
- 1117 STRENGTHEN WOMEN'S VOICE AND ADVOCACY INITIATIVES IN JORDAN
- 1118 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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- 1119 INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT
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- 1121 REDUCE POVERTY, WOMEN ECONOMIC AND SOCIAL EMPOWERMENT
- 1122 REDUCE POVERTY, WOMEN ECONOMIC AND SOCIAL EMPOWERMENT
- 1123 DROUGHT MITIGATION THROUGH IRRIGATION PROMOTION AND CONSERVATION

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1124 IMPROVE THE QUALITY OF LIFE OF THE VICTIMS OF THE LRA CONFLICT

IN NORTHERN UGANDA

1125 EXPANDING AND INCREASING ACCESS TO HIV AND AIDS TREATMENT AND

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1126 REDUCED VULNERABILITY AMONG COMMUNITIES IN THE JENIN AND TUBAS

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1127 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

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1128 SOCIAL, POLITICAL AND ECONOMIC EMPOWERMENT FOR MARGINALISED

WOMEN AND GIRLS

- 1129 WOMEN AND GIRLS EMPOWERMENT PROGRAM
- 1130 GLOBAL WATER INITIATIVE
- 1131 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY

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1132 INCREASED UNDERSTANDING OF GENDER NORMS, PRACTICES AND BEHAVIORS

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1133 ENTERPRISE, ENVIRONMENT AND EQUITY IN THE VIRUNGA LANDSCAPE OF

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1134 IMPLEMENTATION OF A MODEL OF PARTICIPATORY MANAGEMENT

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- 1135 MICRO-FINANCING FOR RURAL POOR
- 1136 IMPROVING SAFETY MANAGEMENT CAPACITY OF NGOS OPERATING IN THE

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- 1137 CLIMATE CHANGE PROJECT ACTIVITIES
- 1138 EDUCATION PROJECT TO PROMOTE EMPOWERMENT FOR VULNERABLE CHILDREN

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1139 HARM REDUCTION SERVICES AMONG THE INJECTING DRUG USER (IDU) AND

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- 1140 YOUTH AND CHILDREN'S NUTRITION PROJECTS
- 1141 MATERNAL AND NEONATAL MORTALITY AND MORBIDITY REDUCTION IN

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- 1142 TRANSFORM THE LIVES OF 370,000 POOR AND EXTREME POOR (PEP)
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1143 STRENGTHENING HOUSEHOLD ABILITY TO RESPOND TO DEVELOPMENT

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- 1144 STRENGTHENING LOCAL LEVEL GOVERNANCE IN NATURAL RESOURCE
- MANAGEMENT AND PROMOTING ACCOUNTABILITY AND LOCAL LEVEL ADVOCACY IN

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1145 TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS

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1146 PROMOTING THE REINTEGRATION OF RETURNEES, INTERNALLY DISPLACED

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- 1147 ENGAGING MEN INITIATIVE WOMEN AND GIRLS EMPOWERMENT PROGRAM
- 1148 SUSTAINABLE POVERTY REDUCTION AMONGST MARGINALIZED COMMUNITIES

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1149 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

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1150 SUPPORT MECHANISM FOR PROMOTION OF VILLAGE SAVINGS AND LOAN

ASSOCIATIONS IN BUSIA AND BUGIRI DISTRICT

Page 5 Schedule F (Form 990) 2011 Part V **Supplemental Information** Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions). 1151 JOB CREATION THROUGH ENHANCED SMALL BUSINESS DEVELOPMENT JOB CREATION THROUGH ENHANCED SMALL BUSINESS DEVELOPMENT 1152 STABILIZATION AND INTEGRATION OF INTERNALLY DISPLACED PERSONS 1153 INTO MAINSTREAM GEORGIA SOCIETY-SIIMS 1154 TEA FARMING PROJECT EMERGENCY FOOD SECURITY, LIVELIHOOD AND NUTRITION SUPPORT TO 1155 FLOOD AFFECTED POPULATIONS 1156 WOMEN AND GIRLS LEADERSHIP DEVELOPMENT 1157 WOMEN AND GIRLS LEADERSHIP DEVELOPMENT TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS 1158 AND THEIR FAMILIES 1159 SCALING UP INTERVENTIONS TO COMBAT MALARIA IN COTE D'IVOIRE IN THE CONTEXT OF NATIONAL RECONSTRUCTION. 1160 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY MOBILIZATION 1161 URBAN HEALTH INITIATIVE: CLIENT OUTREACH AND COMMUNITY MOBILIZATION 1162 WOMEN EMPOWERMENT PROGRAM 1163 WOMEN EMPOWERMENT PROGRAM WOMEN EMPOWERMENT PROGRAM 1164 1165 WOMEN EMPOWERMENT PROGRAM 1166 WOMEN EMPOWERMENT PROGRAM

Schedule F (Form 990) 2011

JSA 1F1502 3 000

1167

1168

WOMEN EMPOWERMENT PROGRAM

CHURIA LIVELIHOOD IMPROVEMENT PROGRAM

69376X 2217 60000518 PAGE 203

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039 Page 5 Schedule F (Form 990) 2011 Part V **Supplemental Information** Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions). 1169 REDUCE POVERTY, WOMEN ECONOMIC AND SOCIAL EMPOWERMENT TAMIL NADU FEASIBILITY STUDIES 1170 WOMEN EMPOWERMENT PROGRAM WITH A GOAL TO IMPROVE THE LIFE OF 1171 WOMEN AND GIRLS OF REPRODUCTIVE AGE AFFECTED BY CONFLICT IN NORTHERN **UGANDA** NATIONAL LEVEL ADVOCACY ON UNSC1325 AND WOMEN EMPOWERMENT 1172 IMPROVING PRIMARY EDUCATION AND INCREASE INCOME OPPORTUNITIES 1173 FOR FARMERS 1174 PARTNERING FOR CHANGE BANKING ON CHANGE INDIA 1175 RURAL ACCESS TO NEW OPPORTUNITIES FOR HEALTH AND PROSPERITY 1176 1177 SUSTAINABLE AGRICULTURE DEVELOPMENT PROJECT IN SUPPORT OF THE MANAGEMENT OF FOREST AND NATURAL RESOURCES 1178 MANAGEMENT AND AGRICULTURE AND FOOD SECURITY 1179 SOMALIA EMERGENCY DROUGHT DISPLACEMENT RESPONSE EMERGENCY WATER AND SANITATION 1180 1181 EMERGENCY RESPONSE FOR DROUGHT DISPLACED IN SOMALIA EMERGENCY RESPONSE FOR DROUGHT DISPLACED IN SOUTH SOMALIA 1182 1183 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE LOCAL INFRASTRUCTURE. 1184 BANKING ON CHANGE INDIA

1186 SUPPORT MECHANISM FOR PROMOTION OF VILLAGE SAVINGS AND LOAN

ASSOCIATIONS IN BUSIA AND BUGIRI DISTRICT

STRENGTHENING PEACE PROJECT

Schedule F (Form 990) 2011

1E1502 3.000

JSA

1185

69376X 2217 60000518 PAGE 204

	PUBLIC DISCLOSURE COPY	12 1605020	
	COOPERATIVE FOR ASSISTANCE AND RELIEF (Form 990) 2011	13-1685039 F	Page 5
Part V	Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Pa (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. All provide any additional information (see instructions).	inting method); Part III)
1187	EARLY CHILD DEVELOPMENT/ORPHANS AND VULNERABLE CHILDREN		
1188	WOMEN AND GIRLS EMPOWERMENT PROGRAM		
1189	EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR,		
VULNER	ABLE AND SOCIALLY EXCLUDED WOMEN IN 3 DISTRICTS OF CHURIA AS WELL		
AS BUI	LDING CAPACITY OF PARTNER NGOS PROMOTE SUSTAINABLE SOCIO-ECONOMIC		
CHANGE	FOR THESE WOMEN.		
1190	EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR,		
VULNER	ABLE AND SOCIALLY EXCLUDED WOMEN IN 3 DISTRICTS OF CHURIA AS WELL		
AS BUI	LDING CAPACITY OF PARTNER NGOS PROMOTE SUSTAINABLE SOCIO-ECONOMIC		
CHANGE	FOR THESE WOMEN.		
1191	EMPOWERMENT AND IMPROVEMENT OF LIVELIHOOD OF THE POOR,		
VULNER.	ABLE AND SOCIALLY EXCLUDED WOMEN IN 3 DISTRICTS OF CHURIA AS WELL		
AS BUI	LDING CAPACITY OF PARTNER NGOS PROMOTE SUSTAINABLE SOCIO-ECONOMIC		
CHANGE	FOR THESE WOMEN.		
1192	STRENGTHEN COMMUNITY-BASED INITIATIVES FOR POVERTY REDUCTION IN		
RACHA-	LECHKHUMI REGION OF GEORGIA (COMBI)		
1193	WOMEN EMPOWERMENT PROGRAM WITH A GOAL TO IMPROVE THE LIFE OF		
WOMEN .	AND GIRLS OF REPRODUCTIVE AGE AFFECTED BY CONFLICT IN NORTHERN		
UGANDA			
1194	STRENGTHENING SGBV ADVOCACY IN THE GREAT LAKES REGION		
1195	NATIONAL LEVEL ADVOCACY ON UNSC1325 AND WOMEN EMPOWERMENT		

PATHWAYS TO SECURE LIVELIHOODS: EMPOWERING WOMEN IN AGRICULTURE

Schedule F (Form 990) 2011

1196

1197

1198

WOMEN EMPOWERMENT PROGRAM

NUTRITION PROJECT IN MALI

Schedule F (Form 990) 2011

Page 5

Part V

Supplemental Information

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

1199 FOOD DISTRIBUTION EMERGENCY RESPONSE

1200 SUSTAINABLE AGRICULTURE DEVELOPMENT PROJECT

1201 GOOD NUTRITION FOR INFANTS NOW

1202 GENERATE LOCAL EMPLOYMENT IN THE COMMUNITY BY SUPPORTING THE

LOCAL INFRASTRUCTURE.

1203 TARGET CIVIL SOCIETY ORGANISATIONS IN EGYPT, JORDAN AND YEMEN

ARE EFFECTIVELY RAISING PUBLIC AWARENESS AND INFLUENCING POLICY MAKERS TO

ADDRESS GENDER BASED VIOLENCE.

1204 COMMUNITY GOVERNANCE, IMPROVED LIVELIHOODS, FUNCTIONAL SECTORIAL

1205 PROMOTING THE REINTEGRATION OF RETURNEES, INTERNALLY DISPLACED

PERSONS AND HOST COMMUNITIES IN UPPER NILE STATE, SOUTH SUDAN

1206 PARTNERSHIP PROGRAM FOR DEMOCRACY & GOVERNANCE AIMS AT IMPROVING

LOCAL GOVERNANCE IN FOUR DISTRICTS IN UPPER EGYPT. THE INTERMEDIATE

RESULTS FOCUS ON ENABLING CITIZEN ENGAGEMENT, PRACTICING ACCOUNTABILITY,

EMPOWERING YOUTH, WOMEN AND MEDIA.

SYSTEM, HOUSEHOLD ACCESS TO SERVICE DELIVERY

1207 CULTIVATE OPPORTUNITIES FOR GIRLS TO PRACTICE THEIR LEADERSHIP

SKILLS, CREATE PARTNERSHIPS TO PROMOTE GIRLS LEADERSHIP, ENHANCE

KNOWLEDGE TO IMPLEMENT AND PROMOTE GIRLS LEADERSHIP PROGRAMS.

1208 INTEGRATED HIV AND AIDS PREVENTION AND CARE PROJECT

1209 JOB CREATION THROUGH ENHANCED SMALL BUSINESS DEVELOPMENT

1210 PILOTING REDUCING EMISSIONS FROM DEFORESTATION AND FOREST

DEGRADATION IN ZANZIBAR THROUGH COMMUNITY FOREST MANAGEMENT

1211 FOOD SECURITY INITIATIVES

COOPERATIVE FOR ASSISTANCE AND RELIEF

Schedule F (Form 990) 2011 Page 5

Part V Supplemental Information

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

1212 BUILD THE TECHNICAL AND INSTITUTIONAL CAPACITY OF LOCAL

ORGANISATIONS TO PROVIDE A CORE PACKAGE OF SERVICES FOR ORPHANS AND

VULNERABLE CHILDREN AND SUPPORT ORGANISATIONAL DEVELOPMENT OF COMMUNITY

BASED ORGANIZATIONS THAT RESPOND TO THE NEEDS OF ORPHANS AND VULNERABLE

CHILDREN

1213 SCALING UP OF INTERVENTIONS TO COMBAT MALARIA IN COTE D'IVOIRE

IN THE CONTEXT OF NATIONAL RECONSTRUCTION

Schedule F (Form 990) 2011

13-1685039

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

organization entered more than \$15,000 on Form 990-EZ. line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF Employer identification number EVERYWHERE (CARE USA), INC. 13-1685039 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Χ Х Internet and email solicitations Solicitation of government grants Χ X Phone solicitations Special fundraising events C In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees X Yes or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization contributions? col. (i) Yes Nο 1 WEB MARKETING RED ENGINE DIGITAL 823,782 153,000 670,782. Χ 2 EMATT DONOR DIGITAL MARKETING X 1,047,347 951,794. 95,553 3 CONSULTS ON SCA DIRECT DIRECT MAIL Χ 22,673,507 1,499,400 21,174,107. 4 MDS COMMUNICATION CORP TELEMARKTNG Χ 1,892,186 798,492 1,093,694. SUSTAINER DONOR SERVICES GROUP TELEMARKTNG Χ 61,280 272,936 -211,656. 6 7 8 9 10 26,498,102. Total 2,819,381 23,678,721. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

Schedule G (Form 990 or 990-EZ) 2011

69376X 2217

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039 Schedule G (Form 990 or 990-EZ) 2011 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other Events (d) Total events (add col. (a) through col. (c)) NATIONAL CNFRNC (event type) (total number) (event type) Revenue 1 Gross receipts 179,300. 179,300. 2 Less: Charitable contributions 172,105 172,105. 3 Gross income (line 1 minus 7,195. 7,195. 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 30,819. 30,819. 7 Food and beverages 50,327. 50,327. 8 Entertainment 9 Other direct expenses 95,615. 95,615. 10 Direct expense summary. Add lines 4 through 9 in column (d) 176,761.) -169,566. Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more

	than \$15,000 on Form 990-E	z, iine 6a.			
Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1 Gross revenue				
ses	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes% No	Yes% No	Yes% No	
	7 Direct expense summary. Add lines 2	through 5 in column (d)			()
	8 Net gaming income summary. Combi	ine line 1, column d, and	line 7		
	Enter the state(s) in which the organizat Is the organization licensed to operate g	1 0 0	of these states?		Yes No
	Were any of the organization's gaming I	icenses revoked, suspe			

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

Sched	ule G (Form 990 or 990-EZ) 2011
11	Does the organization operate gaming activities with nonmembers? Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Tecolas.
	Nama 🏲
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Nama N
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ►
	Gaming manager compensation ▶ \$
	Description of services provided
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
Par	or spent in the organization's own exempt activities during the tax year \(\bigs\) \$ Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b,
ıaı	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
PRO	FESSIONAL FUNDRAISING SERVICE AMOUNT VS. FUNDRAISING EXPENSE
SCH	EDULE G, PART I, 2B
F'UN.	DRAISING EXPENSE AMOUNT PER VENDOR (DIFFERENT FROM FUNDRAISING SERVICE
7 M 🔿	UNT REPORTED IN SCHEDULE G, PART I, 2B (V):
ANIO	ONI KELOKIED IN DCHEDOHE G, FAKI I, ZD (V).
FOR	BELOW VENDORS, FUNDRAISING EXPENSE INCLUDES MEDIA:
DON	OR DIGITAL = \$50,000

COOPERATIVE FOR ASSISTANCE AND RELIEF

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Sched	dule G (Form 990 or 990-EZ) 2011	3037	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity operated in:		
а			%
b	,		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ▶		
	Address ▶		
15 a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Vos	□ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	1 63 [NO
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party:		
	Name ►		
	Address ▶		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а			
	retain the state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$		
Part	Supplemental Information. Complete this part to provide the explanation required by Part I, line columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also contains the columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable.		
	part to provide any additional information (see instructions).	•	
RED	ENGINE = \$124,859		
FOR	THE BELOW VENDORS, FUNDRAISING EXPENSE INCLUDES PRINTING, POSTAGE,		
ENV	ELOPES, ETC.		
SCA	DIRECT = \$9,702,876		
MDS	COMMUNICATION CORPORATION = \$212,395		
DON	OR SERVICES GROUP = \$385		

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

Sched	lule G (Form 990 or 990-EZ) 2011			Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entit	у		
	formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity operated in:			
a	The organization's facility			<u>%</u>
b	An outside facility			<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events book records:	sanu		
	Name ▶			
	Address ►			
15 a	Does the organization have a contract with a third party from whom the organization receives	aamina		
	revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$			
	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party:			
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming pro	ceeds to		_
	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organized	inizations	3	
Don	or spent in the organization's own exempt activities during the tax year \(\bigs\)			
Par	Supplemental Information. Complete this part to provide the explanation required by F columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable part to provide any additional information (see instructions).	,	,	is
	First to Freshald any additional information (ode methodiono).			
DES	CRIPTION OF HOW PROFESSIONAL FUNDRAISING SERVICE AMOUNT (REPORTED IN			
SCH	G, PART I, 2B(V)) IS DISTINGUISHED FROM FUNDRAISING EXPENSE AMOUNT			
₽O₽	ALL FUNDRAISERS LISTED ABOVE:			
1 010	101.01.01.001.00 01.01.00 01.00			
- F	OR MDS COMMUNICATION CORPORATION, CONTRACT STATES CARE WILL PAY COST			
BY	COMPLETED CALLS. INVOICES BREAKOUT COSTS BETWEEN FUNDRAISING SERVICES			

COOPERATIVE FOR ASSISTANCE AND RELIEF

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Sched	ule G (Form 990 or 990-EZ) 2011
11	Does the organization operate gaming activities with nonmembers? Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ▶
150	Does the organization have a contract with a third party from whom the organization receives gaming
ısa	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party \$\bigs\ \bigs\ \bigs\
С	If "Yes," enter name and address of the third party:
-	
	Name ►
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$
Par	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
770	part to provide any additional information (see instructions). FUNDRAISING EXPENSES.
٧۵.	TONDIG EAFENDED.
- F	OR ALL OTHER VENDORS ABOVE, EACH FUNDRAISER'S CONTRACT CLEARLY DEFINES
THE	EXACT COSTS FOR PROFESSIONAL FUNDRAISING SERVICES. ALL OTHER COSTS
ARE	CONSIDERED FUNDRAISING EXPENSES.

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

Sched	ule G (Form 990 or 990-EZ) 2011 Page 3
11	Does the organization operate gaming activities with nonmembers?
12	ls the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name ►
	Address N
	Address ►
150	Does the ergenization have a contract with a third party from whom the ergenization receives gaming
ısa	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
b	amount of gaming revenue retained by the third party \$\bigs\ \bigs\ \bigs\
c	If "Yes," enter name and address of the third party:
·	11 100, Office frame and address of the time party.
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ►
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Discretes/affices Discretes
	Director/officer
17	Mandatory distributions:
ı, a	Is the organization required under state law to make charitable distributions from the gaming proceeds to
u	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
-	or spent in the organization's own exempt activities during the tax year > \$
Part	
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
GROS	SS RECEIPTS FROM ACTIVITY, DONOR SERVICES GROUP
SCHI	EDULE G, PART I, 2B(IV)
CARI	E USA, INC. USED DONOR SERVICES GROUP (DSG) TO SOLICIT FOR MONTHLY
D.0111	ATTOMS ON A THE POWER STEELS DOWNTON AND GOVERNOR TOWNERS TO THE
DONA	ATIONS. ONLY THE DONOR'S FIRST DONATION WAS COUNTED TOWARDS REVENUE
7.00	ITDED EDOM BUTG VENDOD BUOUGU BUEGE DONODG GIVE MONBULV AN INGENIAVOR
ACQI	JIRED FROM THIS VENDOR. THOUGH THESE DONORS GIVE MONTHLY, MAINTENANCE
OF 5	PUE DELATIONOUID WITH THESE DONODS IS MANAGED BY AMOTHED MEMBOR: AND
OF.	THE RELATIONSHIP WITH THESE DONORS IS MANAGED BY ANOTHER VENDOR; AND,
THUS	S DSG WAS NOT CREDITED WITH SUBSEQUENT GIFTS. SINCE SCA DIRECT WAS

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

Sched	ule G (Form 990 or 990-EZ) 2011
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name >
	Name ►
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
_	amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:
C	ii res, enter name and address of the tillid party.
	Name ▶
	Address ▶
16	Gaming manager information:
	Nama N
	Name ►
	Gaming manager compensation ▶\$
	3 m 3 m 3 m 1 m 1 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2
	Description of services provided ▶
	Director/officer
47	Mandatany diatrihy tiona
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to
u	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
DEC	part to provide any additional information (see instructions). PONSIBLE FOR GENERATING ALL ADDITIONAL INCOME FROM THESE DONORS, THAT
KES.	PONSIBLE FOR GENERATING ALL ADDITIONAL INCOME FROM THESE DONORS, THAT
REV.	ENUE IS COUNTED TOWARDS REVENUE ACQUIRED FROM SCA DIRECT.
	~

SCHEDULE I (Form 990)

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

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

OMB No. 1545-0047 2011

Open to Public Inspection

Schedule I (Form 990) (2011)

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990. COOPERATIVE FOR ASSISTANCE AND RELIEF

Employer identification number

EVERYWHERE (CARE USA), INC.						13-1685039)
Part I General Information on Grants and	Assistance)					
1 Does the organization maintain records to su							
the selection criteria used to award the grants	or assistance	e?					X Yes No
2 Describe in Part IV the organization's proced							
Part Grants and Other Assistance to G	overnments	s and Organiz	ations in the Unit	ed States. Com	plete if the organiz	ation answered "Ye	es"
to Form 990, Part IV, line 21, for a	ny recipient	that received	more than \$5,00	00. Check this bo	ox if no one recipie	nt received more th	nan \$5,000.
Part II can be duplicated if additional	<u> </u>	<u></u>					
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ABT ASSOCIATES INC							
55 WHEELER ST CAMBRIDGE, MA 02138	04-2347643		186,309.				1 - PT IV
_(2) ACTION AGAINST HUNGER UGANDA							
247W 37TH STREET NEW YORK, NY 10018	13-3327220	501(C)(3)	645,347.				2 - PT IV
(3) ADRA							
12501 OLD COLUMBIA PIKE, SILVER SP, MD 20904	52-1314847	501(C)(3)	279,621.				3 - PT IV
_(4) adra malawi							
12501 OLD COLUMBIA PIKE, SILVER SP, MD 20904	52-1314847	501(C)(3)	36,201.				4 - PT IV
_(5) adra							
12501 OLD COLUMBIA PIKE, SILVER SP, MD 20904	52-1314847	501(C)(3)	73,261.				5 - PT IV
_(6) AFRICARE							
440 R STREET NW WASHINGTON, DC 20001	23-7116952	501(C)(3)	10,974.				6 - PT IV
_(7) agha_khan_foundation							
1825 K STREET, NW WASHINGTON, DC 20006	52-1231983	501(C)(3)	16,937.				7 - PT IV
(8) CARE ACTION NOW							
1825 I STREET NW WASHINGTON, DC 20006	26-1728410	501(C)(4)	203,585.				8 - PT IV
(9) CARITAS							
1301 W 22ND ST. OAK BROOK, IL 60523	36-2826768	501(C)(3)	11,572.				9 - PT IV
(10) CARITAS							
1301 W 22ND ST. OAK BROOK, IL 60523	36-2826768	501(C)(3)	8,595.				10 - PT IV
(11) CATHOLIC RELIEF SERVICES							
228 W. LEXINGTON ST. BALTIMORE, MD 21201	13-5563422	501(C)(3)	263,330.				11 - PT IV
(12) CATHOLIC RELIEF SERVICES							
228 W. LEXINGTON ST. BALTIMORE, MD 21201	13-5563422	501(C)(3)	102,091.				12 - PT IV
2 Enter total number of section 501(c)(3) and g	overnment o	rganizations lis	ted in the line 1 tabl	e			
3 Enter total number of other organizations liste							

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

SCHEDULE I (Form 990)

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

COOPERATIVE FOR ASSISTANCE AND RELIEF

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF

EMPloyer identification number

13-1685039

EVERYWHERE (CARE USA), INC.						13-1685039)			
Part I General Information on Grants and	Assistance)								
1 Does the organization maintain records to sul	bstantiate the	e amount of the	grants or assistan	ce, the grantees'	eligibility for the grants	s or assistance, and				
the selection criteria used to award the grants	the selection criteria used to award the grants or assistance?									
2 Describe in Part IV the organization's procedu	ures for mon	itoring the use o	of grant funds in the	United States.						
Part II Grants and Other Assistance to G	overnments	and Organiza	ations in the Unit	ed States. Com	plete if the organiza	ation answered "Ye	es"			
to Form 990, Part IV, line 21, for ar										
Part II can be duplicated if additional space is needed										
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
(1) CATHOLIC RELIEF SERVICES										
228 W. LEXINGTON ST. BALTIMORE, MD 21201	13-5563422	501(C)(3)	33,819.				13 - PT IV			
(2) CATHOLIC RELIEF SERVICES										
228 W. LEXINGTON ST. BALTIMORE, MD 21201	13-5563422	501(C)(3)	1,526,209.				14 - PT IV			
(3) CATHOLIC RELIEF SERVICES										
228 W. LEXINGTON ST. BALTIMORE, MD 21201	54-1884868	501(C)(3)	1,106,425.				15 - PT IV			
(4) CONSERVATION INTERNATIONAL										
2011 CRYSTAL DRIVE ARLINGTON, VA 22202	52-1497470	501(C)(3)	51,467.				16 - PT IV			
(5) EMORY UNIVERSITY										
1599 CLIFTON RD NE. ATLANTA, GA 30322	58-0566256	501(C)(3)	176,703.				17 - PT IV			
(6) EMORY UNIVERSITY										
1599 CLIFTON RD NE. ATLANTA, GA 30322	58-0566256	501(C)(3)	23,660.				18 - PT IV			
(7) EMORY UNIVERSITY										
1599 CLIFTON RD NE. ATLANTA, GA 30322	58-0566256	501(C)(3)	78,882.				19 - PT IV			
(8) FAMILY HEALTH INTERNATIONAL										
224 E NC HIGHWAY 54 DURHAM, NC 27713	23-7413005	501(C)(3)	66,098.				20 - PT IV			
(9) ICRW										
1120 20TH ST NW WASHINGTON, DC 20036	52-1081455	501(C)(3)	94,629.				21 - PT IV			
(10) ICRW										
1120 20TH ST NW WASHINGTON, DC 20036	52-1081455	501(C)(3)	21,211.				22 - PT IV			
11) INTRAHEALTH			,							
6340 QUADRANGLE DRIVE CHAPEL HILL, NC 25717		501(C)(3)	305,313.				23 - PT IV			
12) JOHNS HOPKINS UNIVERSITY			303,313.							
111 MARKET PLACE BALTIMORE, MD 21202	52-0595110	501(C)(3)	942,860.				24 - PT IV			
2 Enter total number of section 501(c)(3) and g	·	•	· · · · · · · · · · · · · · · · · · ·	e		•	L			
3 Enter total number of other organizations liste										

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

Schedule I (Form 990) (2011)

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Open to Public Inspection

Employer identification number Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE (CARE USA), INC. 13-1685039 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (a) Name and address of organization (b) EIN (c) IRC section (g) Description of (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance or assistance cash assistance (1) NEW_VENTURE_FUND 734 15TH STREET NW WASHINGTON, DC 20005 20-5806345 501(C)(3) 135,936 25 - PT TV (2) POPULATIONS SERVICES INTERNATIONAL 1120 19TH ST NW WASHINGTON, DC 20036 56-0942853 b01(C)(3) 1,238,957 26 - PT IV (3) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 b01(C)(3) 13,410. 27 - PT IV (4) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 b01(C)(3) 5.826 28 - PT IV (5) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 501(C)(3) 504,000. 29 - PT IV (6) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 b01(C)(3) 10.277. 30 - PT IV (7) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 b01(C)(3) 203,664 31 - PT IV (8) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 501(C)(3) 69,000 32 - PT IV (9) SAVE THE CHILDREN 06-0726487 b01(C)(3) 54 WILTON RD. WESTPORT, CT 06880 34,379 33 - PT IV (10) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 501(C)(3) 84,776. 34 - PT IV (11) SAVE THE CHILDREN 54 WILTON RD. WESTPORT, CT 06880 06-0726487 b01(C)(3) 864,572 35 - PT IV (12) SAVE THE CHILDREN UK 54 WILTON RD. WESTPORT, CT 06880 06-0726487 501(C)(3) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

JSA

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

1E1288 1.000 376X 2217 60000518 PAGE 218

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

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

COOPERATIVE FOR ASSISTANCE AND RELIEF

Open to Public Inspection

Employer identification number

EVERYWHERE (CARE USA), INC.						13-1685039)
Part I General Information on Grants and	Assistance)				'	
Does the organization maintain records to sul	ostantiate the	e amount of the	grants or assistan	ce, the grantees'	eligibility for the grants	s or assistance, and	
the selection criteria used to award the grants			•	•			X Yes No
2 Describe in Part IV the organization's procedu	ures for mon	itoring the use o	of grant funds in the	United States.			
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this be	ox if no one recipie	nt received more th	es" nan \$5,000.
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SAVE THE CHILDREN							
54 WILTON RD. WESTPORT, CT 06880	06-0726487	501(C)(3)	590,373.				37 - PT IV
(2) SAVE THE CHILDREN							
54 WILTON RD. WESTPORT, CT 06880	06-0726487	501(C)(3)	293,664.				38 - PT IV
(3) TUFTS UNIVERSITY							
20 PROFESSORS ROW MEDFORD, MD 02155	04-2103634	501(C)(3)	262,995.				39 - PT IV
(4) TUFTS UNIVERSITY							
20 PROFESSORS ROW MEDFORD, MD 02155	04-2103634	501(C)(3)	6,713.				40 - PT IV
(5) UNIVERSITY OF MINNESOTA							
200 OAK ST SE STE 450 MINNEAPOLIS, MN 55455	41-6007513	501(C)(3)	48,854.				41 - PT IV
(6) US FUND FOR UNICEF							
125 MAIDEN LANE NEW YORK, NY 10038	13-1760110	501(C)(3)	54,931.				42 - PT IV
_(7) WOMEN'S ENVIRONMENT AND DEVELOPMENT ORGNZTN							
355 LEXINGTON AVENUE NEW YORK, NY 10017	52-1238773	501(C)(3)	117,503.				43 - PT IV
(8) WORLD VISION INTERNATIONAL							
800 WEST CHESTNUT AVENUE MONROVIA, CA 91016	95-3202116	501(C)(3)	139,600.				44 - PT IV
(9) WORLD WILDLIFE FUND							
1250 24TH STREET NW WASHINGTON, DC 20037	52-1693387	501(C)(3)	81,138.				45 - PT IV
(10)	_						
(11)							
(12)							
2 Enter total number of section 501(c)(3) and g							43
3 Enter total number of other organizations listed	structions fo	1 table or Form 990.	<u> </u>		<u> </u>		2. ule I (Form 990) (2011)

Page 2

Schedule I (Form 990) (2011)

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22	
	Part III can be duplicated if additional space is needed.	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS

FORM 990, SCHEDULE I, PART I, LINE 2

CARE MONITORS SUB AGREEMENTS TO DETERMINE WHETHER BOTH CARE AND THE

SUB-RECIPIENT ARE PERFORMING ACCORDING TO THE AGREED SCOPE OF WORK AND

APPLICABLE CAPACITY IMPROVEMENT PLANS AND COMPLYING WITH APPLICABLE DONOR

RULES AND REGULATIONS. PERIODIC REVIEWS OF MONITORING RESULTS MUST BE

CONDUCTED BY A SUPERVISORY OFFICIAL (E.G., SUCH AS A MEMBER OF THE DMC).

CARE ALSO PERIODICALLY EVALUATES THE PERFORMANCE OF SUB AGREEMENTS

TOWARDS THE ACHIEVEMENT OF INTENDED OUTCOMES AND CONTRIBUTIONS TO CARE'S

Schedule I (Form 990) (2011)

JSA

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Schedule I (Form 990) (2011)

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	
	Part III can be duplicated if additional space is needed.	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PROGRAM STRATEGY AND IMPACT. MONITORING THROUGH "ON GOING ACTIVITIES",

ALSO KNOWN AS "DURING-THE-AWARD MONITORING" MAY TAKE VARIOUS FORMS. A

FUNDAMENTAL MONITORING TOOL IS INFORMING THE SUB-RECIPIENT OF THE BASIC

AWARD INFORMATION (E.G., GRANT/CONTRACT AGREEMENT NUMBER, TITLE AND

NUMBER AWARD NAME, NAME OF INSTITUTIONAL DONOR'S AGENCY) AND APPLICABLE

COMPLIANCE REQUIREMENTS.

ADDITIONAL MONITORING TOOLS INCLUDE THE FOLLOWING:

1. REVIEWING FINANCIAL AND PERFORMANCE REPORTS SUBMITTED BY THE

SUB-RECIPIENT

Schedule I (Form 990) (2011)

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039 Schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

2. PERFORMING SITE VISITS TO THE SUB-RECIPIENT TO REVIEW FINANCIAL AND

PROGRAMMATIC RECORDS AND OBSERVE OPERATIONS

3. REGULAR CONTACT WITH THE SUB-RECIPIENT AND MAKING APPROPRIATE

INQUIRIES CONCERNING PROGRAM ACTIVITIES

4. ARRANGING FOR AGREED-UPON PROCEDURES AND ENGAGEMENTS FOR CERTAIN

ASPECTS OF SUB-RECIPIENT ACTIVITIES SUCH AS ELIGIBILITY DETERMINATION.

DONOR LAWS AND REGULATIONS MAY IMPOSE SUB-RECIPIENT MONITORING

REQUIREMENTS SPECIFIC TO A PROGRAM. IN ADDITION, FACTORS SUCH AS THE

SIZE OF AWARDS, PERCENTAGE OF THE PASS-THROUGH ENTITY'S TOTAL PROGRAM

Schedule I (Form 990) (2011)

Page 2

JSA

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Schedule I (Form 990) (2011) Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

FUNDS AWARDED TO SUB-RECIPIENTS, THE COMPLEXITY OF THE COMPLIANCE

REQUIREMENTS, AND RISK OF SUB-RECIPIENT NON-COMPLIANCE AS ASSESSED BY THE

PASS-THROUGH ENTITY MAY INFLUENCE THE NATURE AND EXTENT OF MONITORING

PROCEDURES.

Schedule I (Form 990) (2011)

COOPERATIVE FOR ASSISTANCE AND RELIEF 13-1685039 Schedule I (Form 990) (2011) Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

GRANT PURPOSES

FORM 990, SCHEDULE I, PART II

1 IMPROVE QUALITY AND DELIVERY OF COMPREHENSIVE FAMILY HEALTH

SERVICES IN BIHAR, INDIA

- GLOBAL WATER INITIATIVE
- 3 TO IMPROVE THE QUALITY OF LIFE OF PEOPLE AFFECTED BY HIV/AIDS AND

THEIR FAMILIES

4 ENABLE HOUSEHOLDS TO BUILD RESILIENT LIVELIHOODS THAT ARE

SUSTAINABLE AND PROFITABLE, INCORPORATING NRM AND RISK REDUCTION FOR

HOUSEHOLDS.

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Schedule I (Form 990) (2011)

Part III	Grants and Other Assistance to Individ	uals in the U	nited States. Cor	mplete if the or	rganization answered	l "Yes" on Form 990, Pa	art IV, line 22.
	Part III can be duplicated if additional spa	ce is needed.	ı				

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

- 5 EMERGENCY RESPONSE PROJECT IN YEMEN
- 6 SAVE UP: DEVELOP SUSTAINABILITY MODELS FOR SAVINGS LED FINANCIAL

SERVICES FOR THE POOR

- 7 COMMUNITY BASED EDUCATION PROJECTS
- 8 RAISE AWARENESS ABOUT THE IMPORTANCE OF FIGHTING GLOBAL POVERTY AND

SOCIAL INJUSTICE AROUND THE WORLD

- 9 STRENGTHENING LOCAL GOVERNANCE IN NATURAL RESOURCES MANAGEMENT
- 10 STRENGTHENING LOCAL LEVEL GOVERNANCE IN NATURAL RESOURCE

MANAGEMENT AND PROMOTING ACCOUNTABILITY AND LOCAL LEVEL ADVOCACY IN

SUB-COUNTIES IN KABAROLE DISTRICT

Schedule I (Form 990) (2011)

JSA

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COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

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Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

- 11 GRADUATION WITH RESILIENCE TO ACHIEVE SUSTAINABLE DEVELOPMENT
- 12 EMERGENCY CAPACITY BUILDING (ECB)
- 13 COMMUNITY BASED EDUCATION PROJECTS
- 14 GLOBAL WATER INITIATIVE
- 15 IMPROVE THE RESILIENCY OF SELECTED PARTICIPANTS UNDER THE

GOVERNMENT OF ETHIOPIA PRODUCTIVE SAFETY NET PROGRAM (PSNP) SO THAT THEY

CAN GRADUATE OFF OF THIS SAFETY NET BY LINKING POOR RURAL HOUSEHOLDS TO

MICRO-FINANCE AND MARKETS.

16 REDUCED EMISSIONS FROM DEFORESTATION AND DEGRADATION AND

ENVIRONMENTAL STANDARDS INITIATIVE EXPANSION AND INTEGRATION

Schedule I (Form 990) (2011)

JSA

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039
Schedule I (Form 990) (2011)

Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

17 SUSTAINING AND SCALING SCHOOL, WATER, SANITATION, AND HYGIENE PLUS

COMMUNITY IMPACT

18 INFANT AND YOUNG CHILD FEEDING, MATERNAL NUTRITION, LIVELIHOODS

PROJECT

19 IMPROVE QUALITY AND DELIVERY OF COMPREHENSIVE FAMILY HEALTH

SERVICES IN BIHAR, INDIA

20 COMMUNITY DEVELOPMENT FUND IN SUPPORT OF THE PRODUCTIVE SAFETY NET

PROGRAM

21 INFANT AND YOUNG CHILD FEEDING, MATERNAL NUTRITION, LIVELIHOODS

PROJECT

Schedule I (Form 990) (2011)

JSA

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Schedule I (Form 990) (2011) Page 2

Part III	Grants and Other Assistance to Individ Part III can be duplicated if additional spa			mplete if the o	rganization answered	"Yes" on Form 990, Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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7 Port IV	Complemental Information Complete th	:	viala tha informa	tion required in	Dort Line 2 and an	, allow a delition of information
Part IV	Supplemental Information. Complete th	is part to pro	vide the informa	ition required in	Part I, line 2, and any	other additional information.
22	MATERNAL HEALTH AND FAMILY PLANI	NING				
23	COMMUNITY HEALTH PROGRAM					
24	COMMUNITY HEALTH PROGRAM					
25	MATERNAL HEALTH PROJECTS					
26	SCALING UP INTERVENTIONS TO COM	BAT MALARIA	A IN COTE D'	IVOIRE IN TH	ΗE	
CONTEX	T OF NATIONAL RECONSTRUCTION.					
27	STRENGTHENING EMERGENCY RESPONSI	E READINESS	S IN BANGLADI	ESH.		
MAINTE	NANCE OF EMERGENCY RESPONSE EQUIP	PMENT (WATE	ER TREATMENT	PLANTS AND		
ZODIAC	BOATS)					
28	EMERGENCY CAPACITY BUILDING (ECI	3)				

Schedule I (Form 990) (2011)

Page 2 Schedule I (Form 990) (2011)

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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art IV	Supplemental Information. Comple	ete this part to prov	vide the informa	ation required in	Part I, line 2, and any of	ther additional information.
)	BRIDGING HEALTH AND EDUCATION	ON PROGRAMS FOR	YOUNG CHIL	DREN		
)	EMERGENCY RESPONSE FUNDING					
L	IMPROVE QUALITY AND DELIVERY	OF COMPREHENS	SIVE FAMILY	HEALTH		
ERVI	CES IN BIHAR, INDIA					
2	EMERGENCY CAPACITY BUILDING	(ECB)				
3	COMMUNITY BASED EDUCATION PR	ROJECTS				
4	EMPOWERMENT OF CHILDREN ESPE	CCIALLY GIRLS T	O TAKE ACTI	ON IN SCHOOL	LS	
ND C	DMMUNITIES					
5	COMMUNITY DEVELOPMENT FUND 1	IN SUPPORT OF I	THE PRODUCTI	VE SAFETY NI	ET	

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

	, , ,						
Part III	Grants and Other Assistance to Individ	luals in the U	nited States. Co	mplete if the or	rganization answered	d "Yes" on Form 990, Part IV, line 22.	
	Part III can be duplicated if additional spa	ce is needed.					

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

36 COMMUNITY DEVELOPMENT FUND IN SUPPORT OF THE PRODUCTIVE SAFETY NET

PROGRAM

- 37 MUNICIPAL DEVELOPMENT PROGRAM
- 38 EMERGENCY RESPONSE PROJECT IN YEMEN
- 39 IMPROVE THE RESILIENCY OF SELECTED PARTICIPANTS UNDER THE

GOVERNMENT OF ETHIOPIA PRODUCTIVE SAFETY NET PROGRAM (PSNP) SO THAT THEY

CAN GRADUATE OFF OF THIS SAFETY NET BY LINKING POOR RURAL HOUSEHOLDS TO

MICRO-FINANCE AND MARKETS.

- 40 GRADUATION WITH RESILIENCE TO ACHIEVE SUSTAINABLE DEVELOPMENT
- 41 GIRLS EDUCATION PROJECTS

Schedule I (Form 990) (2011)

JSA

1E1504 2.000

69376X 2217 60000518 PAGE 230

Schedule I (Form 990) (2011)

Page 2

Part III	Grants and Other Assistance to Individ	uals in the U	nited States. Co	mplete if the or	rganization answered	l "Yes" on Form 990, Pa	rt IV, line 22.
	Part III can be duplicated if additional spa-	ce is needed.	ı				
							•

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2					
.					
4					
3					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

42 ESTABLISHING A BETTER CARE NETWORK IN MALAWI FOR CARE AND SUPPORT

OF ORPHANS AND OTHER VULNERABLE CHILDREN IN ALTERNATIVE CARE

43 REDUCED EMISSIONS FROM DEFORESTATION AND DEGRADATION AND

ENVIRONMENTAL STANDARDS INITIATIVE EXPANSION AND INTEGRATION

- 44 EMERGENCY CAPACITY BUILDING (ECB)
- 45 LIVELIHOODS ALLIANCE PROJECT

Schedule I (Form 990) (2011)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions. COOPERATIVE FOR ASSISTANCE AND RELIEF

Employer identification number Name of the organization EVERYWHERE (CARE USA), INC. 13-1685039 **Questions Regarding Compensation**

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	X Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
	ansonor, managar, and the electron end of the managar and the	_		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director. Explain in Part III.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
				
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	70		
	The to any of lines ha o, not the persons and provide the applicable amounts for each from in rait in.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
Ū	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	35		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the net earnings of:			
а		6a		Х
	The organization? Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.	0.5		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
-	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject	-		
•	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations section 53.4958-6(c)?	9		
	Regulation decision of the second of the sec	J		

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

Schedule J (Form 990) 2011 Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
	(i)	403,983.	(15,849.	19,600.	1,359.	440,791.	0
1 HELENE D GAYLE	(ii)	С	(0	0	0	(0
	(i)	212,143.	(456.	17,200.	2,857.	232,656.	0
2 VICKIE J BARROW KLEIN	(ii)	C	(0	0	0	(0
	(i)	148,079.	(179,412.	19,600.	5,764.	352,855.	0
3 JOSEPH J IAROCCI	(ii)	C	(0	0	0	(0
	(i)	148,108.	(88,736.	8,194.	186.	245,224.	0
4 NICHOLAS C OSBORNE	(ii)	C	(0	0	0	(0
	(i)	204,922.	(6,573.	15,754.	3,502.	230,751.	0
5 JONATHAN W MITCHELL	(ii)	С	(0	0	0	(0
	(i)	146,701.		58,853.	10,174.	643.	216,371.	0
6 MARC DE LAMOTTE	(ii)	((0	0	0	(0
	(i)	198,231.		428.	16,395.	6,706.	221,760.	0
7 PATRICK SOLOMON	(ii)	100 540	(0	0	0	(0
10	(i)	199,540.	};	69,397.	9,387.	40.	278,364.	ļ <u>0</u>
8 MUHAMMAD MUSA	(ii)	120 216	(05.630	10.004	1 004	054.054	0
AND D. TONIEG	(i)	139,316.	};	95,630.	18,824.	1,084.	254,854.	ļ <u>0</u>
9 ANN P JONES	(ii)	127 412		70 476	- U	15.	222 455	0
MIICHAOILE AILMED	(i)	137,413.		79,476.	5,551.		222,455.	ļ
10 MUSTAQUE AHMED	(ii)	134,985.		81,431.	17,649.	200.	234,265.	0
11 KYMBERLY WOLFF	(i)	134,963.	<u> </u>	01,431.	17,049.		234,203.	<u>0</u>
11KIMBEKHI WOHFF	(ii) (i)	174,260.		38,498.	8,742.		221,500.	0
12 STEPHEN WALLACE	(ii)			1		 0		ļ
12 STEFFER WILLIAM	(i)	100,054.		0	0		100,054.	1 0
13 CATHEREN WOOLARD	(ii)]				0
10 011111111111111111111111111111111111	(i)	174,882.	(364.	14,280.	3,619.	193,145.	0
14 STEVEN HOLLINGWORTH	(ii)		+	0	d	0		0
	(i)	161,950.	(2,972.	10,607.	643.	176,172.	0
15 PETER BUIJS	(ii)		(0	d	0	(0
	(i)	157,977.	(304.	12,800.	5,545.	176,626.	0
16 JEAN MICHEL VIGREUX	(ii)	C	(0	d	0	(0

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
(i)	111,327.	(44,508.	5,659.	429.	161,923.	0
1 LISA T DEAN (ii)	0	(0	0	0	0	0
(i)							
2 (ii)							
(i)							
3 (ii)							
(i)							
4 (ii)							
5 (ii)							
(i)	L	L					
6 (ii)							
(i)							
7 (ii)							
(i)							
8 (ii)							
(i)							
9 (ii)							
(i)							
10 (ii)							
(i)							
11 (ii)							
(i)							
(i)							
(i)							
14 (ii)							
(i)							
(i)							
16 (ii)							adula 1 (Farm 000) 2011

Schedule J (Form 990) 2011

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SUPPLEMENTAL COMPENSATION INFORMATION

SCHEDULE J, PART I, LINE 1

FIRST CLASS TRAVEL IS ALLOWED FOR PRESIDENT AND CEO AS APPROVED BY THE BOARD OF DIRECTORS. COSTS ASSOCIATED WITH FIRST CLASS TRAVEL ARE NOT INCLUDED IN THE EMPLOYEE'S INCOME.

HOUSING IS PROVIDED FOR QUALIFIED INTERNATIONAL STAFF RESIDING OUTSIDE THEIR HOME COUNTRY. THE COSTS ASSOCIATED WITH HOUSING ARE INCLUDED IN THE EMPLOYEE'S INCOME.

QUALIFIED INTERNATIONAL STAFF ARE TAX INDEMNIFIED FOR HOST COUNTRY TAX
OBLIGATIONS. THE AMOUNT OF TAX PAID TO THE HOST COUNTRY IS INCLUDED IN
THE EMPLOYEE'S INCOME.

HEALTH CLUB FEES, NOT TO EXCEED \$20/MONTH, ARE REIMBURSABLE TO ALL EMPLOYEES. HEALTH CLUB REIMBURSEMENTS ARE INCLUDED IN THE EMPLOYEE'S INCOME.

Schedule J (Form 990) 2011

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SUPPLEMENTAL COMPENSATION INFORMATION, SEVERANCE

SCHEDULE J, PART I, LINE 4A

JOSEPH J IAROCCI, CHIEF OF STAFF, RECEIVED A SEVERANCE PAYMENT IN THE

AMOUNT OF \$165,677 UPON TERMINATION.

ANN P JONES, DIRECTOR OF FINANCIAL MANAGEMENT SYSTEMS, RECEIVED A

SEVERANCE PAYMENT IN THE AMOUNT OF \$85,444 UPON TERMINATION.

KYMBERLY WOLFF, SENIOR VICE PRESIDENT, RECEIVED A SEVERANCE PAYMENT IN

THE AMOUNT OF \$55,385 UPON TERMINATION.

SUPPLEMENTAL NON-QUALIFIED PENSION PLAN

SCHEDULE J, PART I, LINE 4B

HELENE GAYLE, PRESIDENT AND CEO, PARTICIPATED IN A SUPPLEMENTAL

NON-QUALIFIED PENSION PLAN. CONTRIBUTION AMOUNT WAS \$13,942.

Schedule J (Form 990) 2011

Part | Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

BASE COMPENSATION FOR CERTAIN INTERNATIONAL EMPLOYEES

SCHEDULE J, PART II, COLUMN B(I)

THE FOLLOWING COMMENTS ARE RELATED TO SCHEDULE J, PART I, LINE 1A - TAX

INDEMNIFICATION AND GROSS-UP PAYMENTS:

1A. OUALIFIED INTERNATIONAL STAFF ARE TAX INDEMNIFIED FOR HOST COUNTRY

TAX OBLIGATIONS.

THE BASE COMPENSATION FOR CERTAIN QUALIFIED INTERNATIONAL STAFF LISTED IN

SCHEDULE J INCLUDES A PORTION OF TAXES PAID TO THE COUNTRY'S TAX

AUTHORITIES IN WHICH THEY RESIDE. TAXES ARE PAID BY THE ORGANIZATION ON

BEHALF OF THE EMPLOYEE. COMPENSATION INCLUDES SIGNIFICANT TAX PAYMENTS

FOR THOSE QUALIFIED INTERNATIONAL STAFF LISTED IN SCHEDULE J THAT RESIDE

IN SOUTH AFRICA AND INDIA. AMOUNTS PER PERSON RANGE FROM \$37K - \$74K.

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

2011

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

COOPERATIVE FOR ASSISTANCE AND RELIEF

Employer identification number

EVERYWHERE (CARE USA), INC.

13-1685039

Part I	Excess Benefit Transactions (s Complete if the organization answ).	7. Pa		ne 40	h.	
1	(a) Name of disqualified person	510a 10	0 011			b) Descript					110 10	(c)	Corrected?
(1)												1,	3 110
(2)													
(3)													
(4)													
(5)													
(6)													
2 Er	nter the amount of tax imposed on the nder section 4958									\$_ \$_			
Part II	Loans to and/or From Interes Complete if the organization answ				n 990, Part IV, line :	26, or Forr	n 990-EZ	., Part	V, line	38a.			
	(a) Name of interested person and purpose	9	1 ' '	n to or from anization?	(c) Original principal amount	(d) Bala	nce due	(e) In (default?		ard or	(g) W agree	ritten ment?
			То	From				Yes	No	Yes	No	Yes	No
(1)			10	1 10111				163	110	163	110	163	110
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
					▶ \$								
Part III	Grants or Assistance Benefiti Complete if the organization answ	ing Inter	este	d Per	sons.								
	(a) Name of interested person	(b)	Relati	onship	between interested perso organization	n and the	(c)	Amoui	nt and	type o	f assis	tance	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													

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

Schedule L (Form 990 or 990-EZ) 2011 Page **2**

COOPERATIVE FOR ASSISTANCE AND RELIEF

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	haring of ization's nues?	
				Yes	No	
(1) MICROVEST HOLDING COMPANY, LLC	SEE SCH L, PART V	1,425,000.	SEE SCH L, PART V		Х	
(2) MICROVEST HOLDING COMPANY, LLC	SEE SCH L, PART V	3,472,406.	SEE SCH L, PART V		Х	
(3) VICKIE BARROW-KLEIN& JEAN-MICHEL VIGREUX	SEE SCH L, PART V	1,906,038.	SEE SCH L, PART V		Х	
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

TRANSACTIONS WITH INTERESTED PERSONS

SCHEDULE L, PART IV

BACKGROUND

MICROVEST HOLDING COMPANY, LLC WAS CO-FOUNDED BY CARE USA, INC. IN 2002

AS A LINKAGE BETWEEN PRIVATE CAPITAL MARKETS WITH MICROFINANCE

ORGANIZATIONS WORLD-WIDE. CARE USA, INC. OWNS 39.61% OF MICROVEST

HOLDING COMPANY, LLC. AND THE REMAINING INTERESTS ARE HELD BY OTHER

CHARITABLE ORGANIZATIONS DEVOTED TO THE RELIEF OF GLOBAL POVERTY.

IN 2010, CARE USA, INC. CREATED THE ACCESS AFRICA FUND, LLC, WHICH PROVIDES MICRO-LENDING SERVICES TO PEOPLE AT THE BASE OF THE ECONOMIC PYRAMID IN SUB-SAHARAN AFRICA. THE ACCESS AFRICA FUND IS A DELAWARE LIMITED LIABILITY COMPANY WITH CARE AND MICROVEST CAPITAL MANAGEMENT, LLC SERVING AS MEMBERS.

INTERESTED PERSONS

MICROVEST HOLDING COMPANY, LLC

Schedule L (Form 990 or 990-EZ) 2011 Page 2

COOPERATIVE FOR ASSISTANCE AND RELIEF

Business Transactions Involving Interested Persons. Part IV

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of ization's nues?
				Yes	No
(1)					
(2)					
(2) (3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

TRANSACTIONS:

- INVESTMENT BY CARE USA, INC. IN MICROVEST II, LP (CONTROLLED BY MICROVEST HOLDING COMPANY, LLC) (\$1,425,000)
- DISTRIBUTION BY MICROVEST I, LP TO CARE USA, INC. RELATED TO CLOSE OF MICROVEST I, LP (CONTROLLED BY MICROVEST HOLDING COMPANY, LLC) (\$3,472,406)

VICKIE J. BARROW-KLEIN (CFO OF CARE USA, INC.) AND JEAN-MICHEL VIGREUX (FORMER SR VP PROGRAM QUALITY/IMPACT OF CARE USA, INC.) AT THE REQUEST OF CARE USA, INC. WERE MEMBERS OF THE BOARD OF THE ACCESS AFRICA FUND. NEITHER RECEIVED COMPENSATION FOR SERVING ON THE BOARD OF ACCESS AFRICA FUND, LLC.

TRANSACTION - INVESTMENT BY CARE USA, INC. IN ACCESS AFRICA FUND, LLC (\$1,906,038)

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

OMB No. 1545-0047

2011

Open To Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF

Employer identification number 13-1685039

EVERYWHERE (CARE USA), INC.

Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art 1 2 Art - Historical treasures Art - Fractional interests 3 Books and publications 4 5 Clothing and household goods...... Х 4. 65,238. COST/SELLING PRICE 6 Cars and other vehicles 7 Boats and planes Intellectual property 8 Χ 232. 14,150,045. COST/SELLING PRICE 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, 11 or trust interests Securities - Miscellaneous 12 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 9. 36,467,795. Χ COST/SELLING PRICE 19 Food inventory 20 Drugs and medical supplies 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts Other ►(__ATCH_1____) 129. 34,215,718. 25

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Χ **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? X 32a **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Other ►(____)
Other ►(____)

Schedule M (Form 990) (2011)

Yes

Nο

69376X 2217

26

27 28

13-1685039

COOPERATIVE FOR ASSISTANCE AND RELIEF

Schedule M (Form 990) (2011) Page **2**

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

NON-FOOD IN-KIND

SCHEDULE M, PART I, LINE 25

WE ARE UNABLE TO QUANTIFY THE NUMBER OF GIFTS FOR THE NON FOOD IN-KIND

DONATIONS.

THIRD PARTY USED TO PROCESS DONATIONS

SCHEDULE M, PART I, LINE 32A

WE USE A THIRD PARTY TO ADMINISTER/PROCESS OUR DONATED GIFT ANNUITIES.

Schedule M (Form 990) (2011)

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
NON FOOD IN-KIND	Х	1.	972,916.	COST/SELLING PRICE
TELEVISION	Х	1.	9,664.	COST/SELLING PRICE
IT EQUIPMENT	Х	126.	288,513.	COST/SELLING PRICE
MOSQUITO NETS	Х	1.	32,944,625.	COST/SELLING PRICE
TOTALS		129.	34,215,718.	

JSA Schedule M (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Employer identification number

COOPERATIVE FOR ASSISTANCE AND RELIEF

EVERYWHERE (CARE USA), INC.

13-1685039

DESCRIPTION OF OTHER PROGRAM SERVICES

FORM 990, PART III, LINE 4D

PUBLIC INFORMATION IS AIMED AT INFORMING AND EDUCATING PERSONS ABOUT
WORLD POVERTY AND THE SYSTEMATIC DISCRIMINATION AND MARGINALIZATION OF
WOMEN AND GIRLS IN THE WORLD.

LIST OF FOREIGN COUNTRIES

FORM 990, PART V, LINE 4B

AFGHANISTAN, ANGOLA, BANGLADESH, BENIN, BOLIVIA, BURUNDI, CONGO, COTE

D'IVOIRE, ECUADOR, EGYPT, EL SALVADOR, ETHIOPIA, GEORGIA, GHANA,

GUATEMALA, HAITI, HONDURAS, INDIA, JORDAN, LESOTHO, LIBERIA, MADAGASCAR,

MALAWI, MALI, MOZAMBIQUE, NEPAL, NICARAGUA, NIGER, PAKISTAN, PERU,

PHILIPPINES, RWANDA, SIERRA LEONE, SOMALIA, SOUTH AFRICA, SOUTH SUDAN,

SRI LANKA, TANZANIA (UNITED REPUBLIC OF), THAILAND, TOGO, UGANDA, WEST

BANK / GAZA, YEMEN

DISCLOSURE OF INDEPENDENT BOARD MEMBERS WHO ARE ON BOARD OF MICROVEST FORM 990, PART 1, LINE 4B AND PART VI, LINE 1B MICROVEST HOLDING COMPANY, LLC IS LISTED AS AN INTERESTED PERSON ON SCHEDULE L, PART IV. TWO OF CARE USA, INC.'S BOARD MEMBERS, BOWMAN CUTTER AND BRUCE TULLY SERVE AS BOARD MEMBERS OF MICROVEST ON BEHALF OF AND AT THE REQUEST OF CARE. BECAUSE OF CARE'S OWNERSHIP INTEREST IN MICROVEST, BOWMAN CUTTER AND BRUCE TULLY'S MEMBERSHIP ON MICROVEST'S BOARD FURTHERS CARE'S CHARITABLE PURPOSES, AND BECAUSE THESE BOARD

Schedule O (Form 990 or 990-EZ) 2011 Page 2

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF Employer identification number

EVERYWHERE (CARE USA), INC. 13-1685039

MEMBERS DO NOT RECEIVE COMPENSATION FOR THEIR SERVICES BY EITHER CARE OR MICROVEST, CARE TREATS BOTH BOWMAN CUTTER AND BRUCE TULLY AS INDEPENDENT BOARD MEMBERS FOR PURPOSES OF THE FORM 990, PART I, LINE 4 AND PART VI, LINE 1B.

DESCRIPTION OF DIRECTORS' RELATIONSHIP WITH EACH OTHER

FORM 990, PART VI, LINE 2

BRUCE TULLY & RICHARD MARIN - BUSINESS RELATIONSHIP

RICHARD MARIN, BOWMAN CUTTER, BRUCE TULLY & DEAN KEHLER - BUSINESS

RELATIONSHIP

AFAF MELEIS & DEAN KEHLER - BUSINESS RELATIONSHIP

JOHN MORGRIDGE & RANDALL POND - BUSINESS RELATIONSHIP

DESCRIPTION OF CLASSES OF PERSONS AND THE NATURE OF THEIR RIGHTS

FORM 990, PART VI, LINE 7A

AT EACH ANNUAL MEETING OF THE BOARD OF DIRECTORS, THE BOARD WILL ELECT DIRECTORS.

DESCRIBE THE PROCESS USED BY MANAGEMENT &/OR GOVERNING BODY TO REVIEW 990

FORM 990, PART VI, LINE 11B

THE 990 IS SENT TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING WITH THE

IRS. THE BOARD OF DIRECTORS ARE REQUESTED TO REVIEW THE DOCUMENT AND

RESPOND WITH ANY QUESTIONS OR COMMENTS WITHIN A SPECIFIED TIMEFRAME.

AFTER ALL COMMENTS OR QUESTIONS ARE ADDRESSED, THE 990 IS FILED WITH THE

IRS. CARE'S AUDIT COMMITTEE REVIEWS THE 990 AT ITS FIRST MEETING

FOLLOWING THE COMPLETION OF THE RETURN.

Schedule O (Form 990 or 990-EZ) 2011

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Schedule O (Form 990 or 990-EZ) 2011 Page 2

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF

EVERYWHERE (CARE USA), INC.

Employer identification number

13-1685039

DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF INTEREST FORM 990, PART VI, LINE 12C

THE BOARD OF DIRECTORS REVIEWS AND APPROVES A CONFLICT OF INTEREST POLICY EACH YEAR AND ATTESTS THAT THEY UNDERSTAND IT AND HAVE PROVIDED INFORMATION ON ANY POTENTIAL CONFLICTS. MEMBERS ARE OBLIGATED TO DISCLOSE ALL POTENTIAL AND ACTUAL CONFLICTS OF INTEREST TO THE NOMINATING & GOVERNANCE COMMITTEE CHAIR, REMOVE THEMSELVES FROM DISCUSSIONS AND VOTING ON ANY RELATED MATTER. IN ADDITION, THE BOARD AND KEY EMPLOYEES COMPLETE A DISCLOSURE/CONFLICT OF INTEREST FORM EACH YEAR REGARDING RELATED PARTY TRANSACTIONS AND CONFLICTS OF INTEREST. ALL CARE STAFF ARE INFORMED OF THE CONFLICTS OF INTEREST POLICY WHEN HIRED. MONITORING AND AVOIDING CONFLICTS OF INTEREST IS ALSO PART OF OUR SUB-AGREEMENT AND PROCUREMENT POLICIES AND PROCEDURES. APPROPRIATE ACTION IS TAKEN WHEN A CONFLICT OF INTEREST IS IDENTIFIED, WHICH CAN BE UP TO AND INCLUDING TERMINATION.

OFFICES & POSITIONS FOR WHICH PROCESS WAS USE & YEAR PROCESS WAS BEGUN
FORM 990, PART VI, LINE 15A AND 15B
THE BOARD OF DIRECTORS REVIEWS PERFORMANCE AND SETS THE COMPENSATION OF
THE CHIEF EXECUTIVE OFFICER. ALSO, CARE UNDERTAKES PERIODIC THIRD-PARTY
COMPARATIVE STUDIES OF ITS COMPENSATION AND COMPENSATION POLICIES FOR
EXECUTIVES AND KEY EMPLOYEES. THE OVERALL COMPENSATION STRUCTURE OF
SENIOR STAFF IS OVERSEEN BY THE COMPENSATION COMMITTEE (PART OF OUR BOARD
OF DIRECTORS). SENIOR STAFF'S COMPENSATION IS APPROVED BY THIS COMMITTEE
AS WELL AS TOP MANAGEMENT IN HUMAN RESOURCES. THE LAST COMPARATIVE STUDY
WAS DONE APPROXIMATELY TWO YEARS AGO. THE EXECUTIVE COMPENSATION

Schedule O (Form 990 or 990-EZ) 2011 Page 2

COOPERATIVE FOR ASSISTANCE AND RELIEF Name of the organization **Employer identification number** EVERYWHERE (CARE USA), INC. 13-1685039

COMMITTEE DOCUMENTS ITS MEETINGS VIA MINUTES. FOR ALL SENIOR STAFF,

DECISIONS AROUND COMPENSATION ARE DOCUMENTED IN OUR INTERNAL RECORDS.

AVAIL OF GOV DOCS, CONFLICT OF INTEREST POLICY & FIN STMT TO GEN PUBLIC

FORM 990, PART VI, LINE 19

AUDITED FINANCIAL STATEMENTS ARE POSTED ON CARE'S WEB SITE. OTHER

DOCUMENTS ARE AVAILABLE UPON REQUEST.

RELATED HOURS DISCLOSURE

FORM 990, PART VII, SECTION A, COLUMN B

ESTIMATED HOURS WORKED BY OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES,

AND HIGHEST COMPENSATED EMPLOYEES AT RELATED ENTITIES:

HELENE GAYLE - CARE ACTION NOW - 2

BOWMAN CUTTER - CARE ACTION NOW - 2

DORIS MEISSNER - CARE ACTION NOW - 2

COMPENSATION TO FORMER OFFICERS AND KEY EMPLOYEES

FORM 990, PART IX, LINE 6

THE AMOUNT LISTED ON PART IX, LINE 6 RELATES TO COMPENSATION OR SEVERANCE

AND SIMILAR PAYMENTS TO FORMER OFFICERS AND KEY EMPLOYEES.

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

FORM 990, PART XI, LINE 5

THIS AMOUNT IS COMPRISED OF:

(\$8,420,036) - DECREASE IN VALUE OF TRUSTS HELD BY 3RD PARTIES

Schedule O (Form 990 or 990-EZ) 2011 Page 2

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF Employer identification number

EVERYWHERE (CARE USA), INC. 13-1685039

(\$34,269) - MINORITY INTEREST IN SUBSIDIARY INCOME

\$729,729 - INTEREST & DIVIDEND ON GIFT ANNUITY INVESTMENT

(\$1,173,423) - ACTUARIAL LOSS ON ANNUAL OBLIGATIONS

\$85,806 - ACTUARIAL GAIN ON SPLIT INTEREST AGREEMENTS

(\$5,953,081) - NET REALIZED AND UNREALIZED GAIN ON INVESTMENTS

\$563,453 - INVESTMENT FEES REPORTED AS EXPENSES IN 990

(\$600,667) - NET CHANGE IN PENSION LIABILITY

\$6,640,527 - CHANGE IN SUBSIDIARY LOANS PAYABLE (INCLUDED IN NET ASSETS

IN 990 VS. LIABILITY IN AFS)

(\$690,176) - CHANGE IN SUBSIDIARY NET ASSETS (EXCLUDED FROM 990)

(\$6,209) - ROUNDING

(\$8,858,346) - TOTAL

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

OUR MISSION IS TO SERVE INDIVIDUALS AND FAMILIES IN THE POOREST

COMMUNITIES IN THE WORLD. DRAWING STRENGTH FROM OUR GLOBAL DIVERSITY,

RESOURCES AND EXPERIENCE, WE PROMOTE INNOVATIVE SOLUTIONS AND ARE

ADVOCATES FOR GLOBAL RESPONSIBILITY. WE FACILITATE LASTING CHANGE

BY:

- STRENGTHENING CAPACITY FOR SELF-HELP
- PROVIDING ECONOMIC OPPORTUNITY
- DELIVERING RELIEF IN EMERGENCIES
- INFLUENCING POLICY DECISIONS AT ALL LEVELS
- ADDRESSING DISCRIMINATION IN ALL ITS FORMS

GUIDED BY THE ASPIRATIONS OF LOCAL COMMUNITIES, WE PURSUE OUR MISSION

Schedule O (Form 990 or 990-EZ) 2011 Page 2

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE (CARE USA), INC.

Employer identification number

13-1685039 ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

WITH BOTH EXCELLENCE AND COMPASSION BECAUSE THE PEOPLE WHOM WE SERVE DESERVE NOTHING LESS.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

DEVELOPMENT: CARE APPLIES A HOLISTIC APPROACH TO DEVELOPMENT
AIMING AT CREATING LASTING POSITIVE IMPACT AT LARGE SCALE,
COMMITTING TO SERVE POOR COMMUNITIES LONG ENOUGH TO PRODUCE
SYSTEMIC SOCIAL CHANGES. EDUCATION, ECONOMIC DEVELOPMENT, WATER
AND SANITATION, AGRICULTURE AND NATURAL RESOURCE MANAGEMENT, HIV
AND AIDS PREVENTION AND RESPONSE AND MATERNAL HEALTH ARE ALL
DEVELOPMENT PROGRAMS IMPLEMENTED BY CARE. CARE WORKS ALONGSIDE
COMMUNITIES, GOVERNMENTS, CORPORATE AND NON-PROFIT PARTNER
ORGANIZATIONS AT MANY LEVELS TO ADDRESS ALL ASPECTS OF OUR
DEVELOPMENT WORK. CARE HELPS FAMILIES SECURE ACCESS TO QUALITY
FOOD. CARE INITIATES COMMUNITY SAVINGS AND LOAN PROGRAMS AND
PROVIDES TECHNICAL TRAINING TO HELP PEOPLE BEGIN OR EXPAND SMALL
BUSINESSES. CARE ENDEAVORS TO EMPOWER WOMEN AND PROMOTE GIRLS'
LEADERSHIP THROUGH ALL ITS PROGRAMS.

ATTACHMENT 3

FORM 990, PART VI, LINE 17 - STATES

 ${\tt AL}$, ${\tt AK}$, ${\tt AZ}$, ${\tt AR}$, ${\tt CA}$, ${\tt CO}$, ${\tt CT}$,

FL, GA, HI, IL, KS, KY, MD, MA, MI,

MN, MS, NH, NJ, NM, NY, OH, OK, PA,

SC, TN, UT, VA, WA, WV, WI,

Schedule O (Form 990 or 990-EZ) 2011 Page 2

Name of the organization COOPERATIVE FOR ASSISTANCE AND RELIEF

EVERYWHERE (CARE USA), INC.

Employer identification number

13-1685039

ATTACHMENT 4

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION SCA DIRECT, INC. DIRECT MAILING SVCS 12,737,586. 11200 WAPLES MILL ROAD, SUITE 150 FAIRFAX, VA 22030 DELOITTE CONSULTING LLP FIN SOFTWARE CNSLTNG 9,091,767. PO BOX 7247-6447 PHILADELPHIA, PA 19170 AMERICAN EXPRESS TRAVEL RELATED FINANCIAL SERVICES 2,768,572. 18850 NORTH 56TH STREET PHOENIX, AZ 85054 ERNST & YOUNG, LLP AUDIT SERVICES 2,369,119. 55 IVAN ALLEN JUNIOR BOULEVARD ATLANTA, GA 30313

CIGNA INTERNATIONAL HEALTH INSURANCE 1,421,620.

13680 COLLECTION CENTER DRIVE CHICAGO, IL 60693

TOTAL COMPENSATION 28,388,664.

COOPERATIVE FOR ASSISTANCE AND RELIEF

13-1685039

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

➤ See separate instructions.

Open to Public Inspection

COOPERATIVE FOR ASSISTANCE AND RELIEF Employer identification number Name of the organization EVERYWHERE (CARE USA), INC. 13-1685039

(a) Name, address, and EIN of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct co ent	ntrolling
<u>(1)</u>							
_(3)							
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during	(Complete if the of the tax year.)	organization ansv	wered "Yes" to F	Form 990, Part IV	, line 34 because	e it had	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?
Name, address, and EIN of related organization	1 1	Legal domicile (state		Public charity status	Direct controlling	cont	rolled
, ,	1 1	Legal domicile (state	Exempt Code section	Public charity status	Direct controlling	cont	rolled tity?
Name, address, and EIN of related organization (1) CARE INDIA TRUST 27 HAUZ KHAS VILLAGE 110016 NEW DELHI, IN	Primary activity	Legal domicile (state or foreign country)		Public charity status (if section 501(c)(3))	Direct controlling entity	Yes	rolled tity?
Name, address, and EIN of related organization (1) CARE INDIA TRUST 27 HAUZ KHAS VILLAGE 110016 NEW DELHI, IN (2) MOFAD MICROFINANCE COMPANY STREET # 11 TAIMANI DISTRICT 4 KABUL, AF	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	Yes	rolled tity?
Name, address, and EIN of related organization (1) CARE INDIA TRUST 27 HAUZ KHAS VILLAGE 110016 NEW DELHI, IN (2) MOFAD MICROFINANCE COMPANY	Primary activity CHARITABLE	Legal domicile (state or foreign country)	Exempt Code section 501(C)(3)	Public charity status (if section 501(c)(3))	Direct controlling entity CARE	Yes X	rolled tity?
Name, address, and EIN of related organization (1) CARE INDIA TRUST 27 HAUZ KHAS VILLAGE 110016 NEW DELHI, IN (2) MOFAD MICROFINANCE COMPANY STREET # 11 TAIMANI DISTRICT 4 KABUL, AF (3) CARE ACTION NOW INC 26-1728410	Primary activity CHARITABLE MICROFINANCE	Legal domicile (state or foreign country) IN AF	Exempt Code section 501(C)(3) 501(C)(3)	Public charity status (if section 501(c)(3))	Direct controlling entity CARE CARE	Yes X	rolled tity?
Name, address, and EIN of related organization (1) CARE INDIA TRUST 27 HAUZ KHAS VILLAGE 110016 NEW DELHI, IN (2) MOFAD MICROFINANCE COMPANY STREET # 11 TAIMANI DISTRICT 4 KABUL, AF (3) CARE ACTION NOW INC 26-1728410 1726 M STREET NW WASHINGTON, DC 20036	Primary activity CHARITABLE MICROFINANCE	Legal domicile (state or foreign country) IN AF	Exempt Code section 501(C)(3) 501(C)(3)	Public charity status (if section 501(c)(3))	Direct controlling entity CARE CARE	Yes X	rolled tity?
Name, address, and EIN of related organization (1) CARE INDIA TRUST 27 HAUZ KHAS VILLAGE 110016 NEW DELHI, IN (2) MOFAD MICROFINANCE COMPANY STREET # 11 TAIMANI DISTRICT 4 KABUL, AF (3) CARE ACTION NOW INC 26-1728410 1726 M STREET NW WASHINGTON, DC 20036 (4)	Primary activity CHARITABLE MICROFINANCE	Legal domicile (state or foreign country) IN AF	Exempt Code section 501(C)(3) 501(C)(3)	Public charity status (if section 501(c)(3))	Direct controlling entity CARE CARE	Yes X	rolled tity?

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

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Schedule R (Form 990) 2011 Page 2

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			(h Disproprialloca	ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		_	
							Yes	No		Yes	No		
(1) MICROVEST GP HLG CO 26-3623234													
7315 WISC.AV.#300W-BETHESDA,MD	MICROFINANCE	DE	N/A	RELATED MNGT FEE	-158,392.	592,132.		Х	-275,911.	Х		39.6100	
(2) MICROVEST I LP 75-3134922													
7315 WISC.AV.#300W-BETHESDA,MD	MICROFINANCE	DE	MICROVEST GP	RELATED INVESTMENT I	-86,473.	754,452.		Х	-445,808.		Х	24.3600	
(3) MICROVEST II LP 26-3623466													
7514 WISC.AVE.#400-BETHESDA,MD	MICROFINANCE	DE	MICROVEST GP	RELATED INVESTMENT I	76,283.	2,586,241.		Х	0		Х	23.3200	
(4) ACCESS AFRICA FUND 27-3080676													
7514 WISC.AVE.#400-BETHESDA,MD	MICROFINANCE	DE	CARE	RELATED INVESTMENT I	640,740.	8,610,997.		Х	0	Х		100.0000	
_(5)													
<u>(6)</u>													
<u>(7)</u>													

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) SEED FINANCE CORP 99-9999999 #10B7 FRANCESCA TWR,SCT BRMEO ST S.TRNGL,QZON CTY, RP	MICROFINANCE	RP	N/A	C CORP	-21,485.	10,202,122.	51.2200
(2) CARE ENTERPRISES, INC. 38-3873371	MICROFINANCE	RP	IN/A	C CORP	-21,405.	10,202,122.	51.2200
151 ELLIS ST, NE ATLANTA, 30303-2440	HOLDING COMPANY	DE	CARE, INC.	C CORP	-10,955.	757,358.	100.0000
<u>(3)</u>							
<u>(4)</u>							
<u>(5)</u>							
<u>(6)</u>							
<u>(7)</u>							

3

Sched	Jule R (Form 990) 2011		F	Page
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)			
Not	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	X	П
b	Gift, grant, or capital contribution to related organization(s)	1 b		
C	Gift, grant, or capital contribution from related organization(s)	10		T _X
d	Loans or loan guarantees to or for related organization(s)	10		_
e	Loans or loan guarantees by related organization(s)	1e		x
C	Loans of loan guarantees by related organization(s).			- 2
	Sale of accests to related organization(s)	1f		v
· ·	Sale of assets to related organization(s)	. 11		X
g	Purchase of assets from related organization(s)	10		- 23 V
h :	Exchange of assets with related organization(s)	. 1h		- A
•	Lease of facilities, equipment, or other assets to related organization(s)	. 1i		
	Leave of the PC and a section of the control to the section of the control to the section of the	4.		7.
J	Lease of facilities, equipment, or other assets from related organization(s)	. <u>1j</u>		X
k	Performance of services or membership or fundraising solicitations for related organization(s)	1 k		X
ı	Performance of services or membership or fundraising solicitations by related organization(s)	. 11		X
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	. 1 n		X
n	Sharing of paid employees with related organization(s)	. 1n		X
0	Reimbursement paid to related organization(s) for expenses	. 10)	X
р	Reimbursement paid by related organization(s) for expenses	. 1p)	X
q	Other transfer of cash or property to related organization(s)	10		Х
r	Other transfer of cash or property from related organization(s)	. 1r	X	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction the	reshol	ds.	
	(a) (b) (c) Name of other organization Transaction Amount involved Meth	(d)		
		nod of de mount in		ng
	N - 1 - 1			
(1)	SEED FINANCE A 10,625. COST			
(2)	SEED FINANCE D 354 894 COST	7		

(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1) SEED FINANCE	A	10,625.	COST
(2) SEED FINANCE	D	354,894.	COST
(3) SEED FINANCE	R	354,894.	COST
(4) CARE ACTION NOW	В	203,585.	COST/FMV
(5) ACCESS AFRICA LLC	В	1,906,038.	COST
(6)			

Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?			(j) General or managing partner?		(k) Percentage ownership
			section 512-514)	Yes	No			Yes	No	(1 01111 1000)	Yes	No					
(1)																	
(2)																	
(3)																	
(4)																	
<u>(5)</u>																	
<u>(6)</u>																	
(7)																	
(8)																	
(9)																	
(10)																	
(11)																	
(12)																	
(13)																	
(14)																	
(15)																	
(16)																	

Schedule R (Form 990) 2011 Page **5**

COOPERATIVE FOR ASSISTANCE AND RELIEF

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

NET OPERATING LOSSES

SCHEDULE R, PART III, LINES 1-2, COLUMN I

UNRELATED BUSINESS NET OPERATING LOSSES SET FORTH ON THE K-1S FOR

MICROVEST GP HOLDING CO AND MICROVEST I LP ARE NOT REPORTED AS UNRELATED

LOSSES BY CARE ON ITS FORM 990 OR 990T DUE TO THE DIRECT RELATIONSHIP

BETWEEN MICROVEST'S MICROFINANCE ACTIVITY AND THE FURTHERANCE OF CARE'S

CHARITABLE PURPOSES.