990

Return of Organization Exempt From Income Tax

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

20**08**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 2008 calendar year, or tax year beginning 07/01, 2008, and ending 06/30,20 09 Please C Name of organization CHILDFUND INTERNATIONAL USA B Check if applicable: Employer identification number use (RS Doing Business As Address change 0536100 print or Number and street (or P.O. box if mail is not delivered to street address) Name change Room/suite Telephone number type. 2821 Emerywood Pkwy Initial return (804)756-2700 Specific City or town, state or country, and ZIP + 4 ☐ Termination Instruc-Richmond, VA 23294-3726 Amended return G Gross receipts \$ 221,931,297 F Name and address of principal officer: Anne Lynam Goddard Application pending H(a) Is this a group return for affiliates? Yes **☑** No 2821 Emerywood Pkwy, Richmond, VA 23294-3726 H(b) Are all affiliates included? Yes No If "No," attach a list. (see instructions) Website: ▶ http://www.childfund.org H(c) Group exemption number ▶ Type of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: 1938 M State of legal domicile: VA Part Summary Briefly describe the organization's mission or most significant activities: See Statement 1 Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets. Number of voting members of the governing body (Part VI, line 1a). . . Activities & 3 22 Number of independent voting members of the governing body (Part VI, line 1b) 4 22 Total number of employees (Part V, line 2a) 5 277 6 Total number of volunteers (estimate if necessary) 6 0 7a Total gross unrelated business revenue from Part VIII, line 12, column (C). 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 0 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) . . . 226,806,941 216,130,540 Program service revenue (Part VIII, line 2g) 1,289,997 1,271,403 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 491,431 -487,430 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,123,400 498,331 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 230,711,769 217.412.844 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 151,094,043 133,107,733 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 32,137,548 33.929.011 16a Professional fundraising fees (Part IX, column (A), line 11e) 479,279 581.231 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 39,236,284 37,359,813 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 222,947,154 204,977,788 19 Revenue less expenses. Subtract line 18 from line 12 7.764.615 12,435,056 5 8 Beginning of Year End of Year 20 Total assets (Part X, line 16) . 70,174,206 74,089,092 21 Total liabilities (Part X, line 26) 20,985,155 23,610,951 Net assets or fund balances. Subtract line 21 49,189,051 50,478,141 Part Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of afficer Here James Tuite, CFO Type or print name and title Date Check if Preparer's identifying number Preparer's signature employed ▶ □ Paid Preparer's Firm's name (or yours FIN Use Only if self-employed), address, and ZIP + 4

No

Ŀa	Statement of Program Service Accomplishments (see instructions)									
1	Briefly describe the organization's mission: To help deprived, excluded and vulnerable children living in poverty have the capacity to become young adults, parents and leaders who bring lasting and positive change to their									
	valuing, protecting, and advancing the worth and the rights of children.									
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?									
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?									
4	If "Yes," describe these changes on Schedule O.									
4	Describe the exempt purpose achievements for each of the organization's three largest program services 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 \$) See Statement 2									
	/									
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)									
40	(Codo: \/ Evenue t									
40	(Code:) (Expenses \$including grants of \$) (Revenue \$)									

	Other program services. (Describe in Schedule O.) (Expenses \$ 46,117,774 including grants of \$ 36,966,234) (Revenue \$ 353,090)									
4e	Total program service expenses ► \$ 166,104,298 (Must equal Part IX, Line 25, column (B).)									

	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?.	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		/
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II			V
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			'
6	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? If "Yes," complete Schedule D, Part IV	9		/
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	V
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	√	<u> </u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return	**		
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D. Parts XI. XII. and XIII	12	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	The angle of the O.S. ?	14a	✓	
b	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	✓	
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, Part II.	15	1	
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, Part III	16		✓
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G. Part I	17		
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19 20	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u> </u>
20 21	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		√
22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	21 22		1
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.	24a		✓
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		√
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I			,
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee or	25b		
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	26		<u> </u>
	substantial contributor, or to a person related to such an individual? If "Yes" complete Schedule 1. Part III	27		1

Ra	Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		✓
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		_/
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		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		√
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		/
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		√
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36		/
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		

Form **990** (2008)

Ŀε	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
ī	Statements, filed for the calendar year ending with or within the year covered by this return 277	x68005609000000		
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	30,0000
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	√	
b	If "Yes," enter the name of the foreign country: > See Statement 3			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b		5b		✓
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		_ ✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		√
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
_	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		(E.1154)
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	0-	670.055	
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	3.0		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
ı o	amounts due or received from them.)			
2a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year.	12a		<i>6/16/</i>

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		_✓
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		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	✓	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6		
7a	Separate managed and and the process and the process of the or more methods	İ		
	of the governing body?	7a		_√_
b	The state of the s	7b	(MINOS ANTENNA CO	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			50.800
а		8a	√	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9a	Does the organization have local chapters, branches, or affiliates?	9a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	✓	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
500	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		✓
<u> </u>	tion D. Policies	r	T	
40-	Describer and the second of th		Yes	No
120		12a	V	
ม	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		,	
		12b	✓	
		12c	1	
13	Does the organization have a written whistleblower policy?	13	V	
14	Does the organization have a written document retention and destruction policy?	14	✓	SERVICE SERVIC
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
		15a	√	
b		15b		
	Describe the process in Schedule O. (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
		16a		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	401		
Sec	tion C. Disclosure	16b		
	List the states with which a copy of this Form 990 is required to be filed ▶See Statement 4 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)	/OV:		
	available for public inspection. Indicate how you make these available. Check all that apply.	(ವ)ಽ ೦	піу)	
	✓ Own website ☐ Another's website ☑ Upon request			
	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict o	r :·		
	policy, and financial statements available to the public.	IIITE	est	
	State the name, physical address, and telephone number of the person who possesses the books and record	_l *	ممالا	
-~	organization: See Statement 5	15 OI	rue	

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. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

Theck this box if the organization did not compensate any officer, director, trustee, or key employee.										
(A)	(B)	(C) (D)							(E)	(F)
Name and Title	Average	Posit	ion (chec	k all	that ap			Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
See Statement 6						 			*****	
					l					

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P	Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	oloy	ees	, an	d Hig	hes	t Compensate	d Employees (co	ntinued)
	(A)	(B)			(C)			(D)	(E)	(F)
	Name and title	Average hours per		ion (k all	that ap		Reportable	Reportable	Estimated
		week	Individual trustee or director	İnst	Officer	₹ ey	emit High	Former	compensation from	compensation from related	amount of other
			rec	Institutional trustee	er	Key employee	nest	Tier,	the organization	organizations (W-2/1099-MISC)	compensation
			lor tr	<u>na</u>		등	e con		(W-2/1099-MISC)	(44-2) 1055-(4130)	from the organization
			uste	î,		ee	npe				and related organizations
			db .	Ē			Highest compensated employee				organizations
		*****		<u> </u>	ļ	╢	품	┢			·······································
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-				$\dashv$	$\dashv$			_			
				$\neg \uparrow$	$\dashv$	$\dashv$		$\dashv$			
	Total										******
2	Total number of individuals (including these	· · · ·						<u>▶  </u>	2,232,624	0	500,957
_	Total number of individuals (including those organization ▶ 28	in raj wiic	o rece	eive	a m	iore	tnan	\$1ር	io,uuu in repoi	rtable compensa	tion from the
	-	***************************************									Yes No
3	Did the organization list any former officer	director o	or tru	stee	a ka	2V 6	molo	WAD	or highest co	mponested	100 110
	employee on line 1a? If "Yes," complete Sc	hedule J fo	or suc	stoc ch ir	ndiv	idua	a/ .	y <del>ce</del>	, or nignest ce	inpensateu	3 /
4	For any individual listed on line 1a, is the su	ım of repo	rtable	CO	mpe	ensa	ation	and	other comper	sation from	
	the organization and related organizations g	reater than	\$150	0,00	00?	lf "Y	es,"	com	plete Schedul	e J for such	
5	individual.		•								4 /
J	Did any person listed on line 1a receive of services rendered to the organization? If "Yes	r accrue c es." compl	compi ete S	ens: che	atio <i>dule</i>	n fr 9 <i>J</i> ∶	om a for su	iny i Ich i	unrelated orga n <i>erson</i>	ınization for	5 /
Sec	tion B. Independent Contractors								<u> </u>		<u> </u>
1	Complete this table for your five highest cor	npensated	inde	pen	den	it co	ontrac	ctors	that received	more than \$100	),000 of
	compensation from the organization.									701g -	
	(A) (B) (C) Name and business address Description of services Compensation										
See	Statement 7									TVICCS OF	Jinpensation
						<del></del>					
											·····
2	Total number of independent contractors (in compensation from the organization ▶ 39	cluding th	ose i	n 1)	wh	o re	eceive	ed n	nore than \$100	0,000 in	5 4 6 5 6 6 a
	39										

	OV.	Statement of Re	evenue			[		Page \$
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	18	Federated campaigns		0				
9 5	į t	Membership dues	E .	0	100000000000000000000000000000000000000			
ifts,	3 C	Fundraising events .	<u>1c</u>	0				
20.5	2	Related organizations	1d	0				
in in	; E	Government grants (conti	' 1	0				
buti	T	All other contributions, gifts,		046 450 540				
ntri		and similar amounts not include Noncash contributions include		216,130,540 77,914				n are man
S	9	Total. Add lines 1a-1f	eomines ja-ir; \$		216,130,540			
-	1		<u> </u>	Business Code	210,100,540			
ᄪ	2a	Service Fees			1,271,403	1,271,403	0	^
Rey	b				1,271,400	1,211,400	· · · · · · · · · · · · · · · · · · ·	0
ë	C				***************************************		*****	7000.00
Š	d							
Program Service Revenue	e			1				
90	f	All other program servi	ice revenue ,		0	0	0	0
Pro	g	Total. Add lines 2a-2f	<u> </u>		1,271,403		-	•
	3	Investment income (inc						
	İ	other similar amounts)			150,512	0	0	150,512
	4	Income from investment of	of tax-exempt bo	nd proceeds >	0	0	0	0
	5	Royalties	_ <del></del>		0	0	0	0
	İ		(i) Real	(ii) Personal		5,67		
		Gross Rents	482,69					
		Less: rental expenses	334,10					6860000
		Rental income or (loss)	148,58	<del>l</del>				
		Net rental income or (lo		<u> </u>	148,584	0	0	148,584
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	3,317,21	229,193				0.00 9.00 30.00
	b	Less: cost or other basis	3,943,92	9 240,416				
		and sales expenses .	-626,71	T	0.0000000000000000000000000000000000000			
	4	Gain or (loss)			-637,942			
o)					-037,942	0	0	-637,942
venue	ва	Gross income from events (not including \$	fundraising				0.000.00	
e e		of contributions reported						
ď		See Part IV, line 18	a on line 10).	. 0				
Other R	b	Less: direct expenses		0	0.000000	0.000000		
ರ	С	Net income or (loss) fro	m fundraising		0	0	0	0
		Gross income from gami					· ·	U
	"	See Part IV, line 19	ing activities,					
	b	Less: direct expenses.	+	. 0			4 1 2 2 2 3	
	С	Net income or (loss) fro	m gaming acti	vities ▶	0	0	0	0
	10a	Gross sales of inve	ntorv. less					
		returns and allowances		0				Market Comment
		Less: cost of goods sole	d , , , b	0				
	C	Net income or (loss) from			0	0	0	0
		Miscellaneous Reve	nue	Business Code				
	11a	Mis. Income		900099	203,557	203,557	0	0
	b	Study Tour Revenue		900099	146,190	146,190	0	0
	С							
İ		All other revenue			0	0	0	0
		Total. Add lines 11a-11			349,747			
ŀ	12	Total Revenue. Add line	es 1h, 2g, 3, 4	, 5, 6d, 7d, 8c,				
l		9c, 10c, and 11e	<del></del>	<u> </u>	217,412,844	1,621,150	0	-338,846

## 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)

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses						
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,261,890	2,261,890								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	130,845,843	130,845,843								
4	Benefits paid to or for members	0	0								
5	Compensation of current officers, directors, trustees, and key employees	1,770,629	737,543	829,391	203,695						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	(						
7	Other salaries and wages	26,273,260	17,371,049	6,243,540	2,658,671						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .	1,535,990	682,972	654,898	198,120						
9	Other employee benefits	2,007,249	1,070,284	756,312	180,653						
10	Payroll taxes	2,341,883	1,650,522	489,550	201,811						
11 a	Fees for services (non-employees):	0	0	0	0						
b		656,088	330,909	39,611	285,568						
С		555,164	90,385	460,306	4,473						
d		0	0	0							
е	Professional fundraising services. See Part IV, line 17	581,231			581,231						
f		50,573	0	50,573	0						
g	Other	4,272,390	1,372,828	1,031,651	1,867,911						
12	Advertising and promotion	14,127,996	86,701	449,956	13,591,339						
13	Office expenses	6,378,780	2,396,601	3,572,364	409,815						
14	Information technology	525,335	21,398	503,937	0						
15	Royalties ,	0	0	0	0						
16	Occupancy	1,821,834	1,533,550	229,131	59,153						
17	Travel ,	3,156,356	2,495,022	452,115	209,219						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0						
19	Conferences, conventions, and meetings	1,115,530	697,472	267,547	150,511						
20	Interest	25,756	0	25,756	0						
21	Payments to affiliates	67,122	0	67,122	0						
22	Depreciation, depletion, and amortization.	2,160,921	1,504,280	588,218	68,423						
23	Insurance	58,442	0	58,442	0						
24	Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)										
а	Fundraising Expenses	1,142,041	0	0	4 4 4 0 0 4 4						
b	Miscellaneous Expenses	655,490	420,116	169,694	1,142,041 65,680						
c	Staff Training	589.995	534,933	44,596	10,466						
d			204,000		10,400						
e											
	All other expenses										
25	Total functional expenses. Add lines 1 through 24f	204,977,788	166,104,298	16,984,710	21,888,780						
26	Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				2.,000,700						

P	art X	Balance Sheet			, 134
	·		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	7,326,799	1	9,683,71
	2	Savings and temporary cash investments	3,907,599	2	13,699,33
	3	Pledges and grants receivable, net	3,647,726		2,073,23
	4	Accounts receivable, net	3,538,752	4	3,190,56
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.	0	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		6	
20	7	Part II of Schedule L	0	7	
Assets	8	Inventories for sale or use		8	
٧	9	Prepaid expenses and deferred charges	2,097,541	<del></del> -	3,581,829
	10a	Land, buildings, and equipment: cost basis 10a 33,565,064	2100.10		O,BOT,DE.
	ь	Less: accumulated depreciation. Complete			
		Part VI of Schedule D	14,609,458	10c	13,825,862
	11	Investments—publicly traded securities	26,238,442	_	20,752,988
	12	Investments—other securities. See Part IV, line 11	8,807,889		7,208,056
	13	Investments—program-related. See Part IV, line 11	0		
	14	Intangible assets	0	14	(
	15	Other assets, See Part IV, line 11	0	15	73,510
	16	Total assets. Add lines 1 through 15 (must equal line 34)	70,174,206	16	74,089,092
	17	Accounts payable and accrued expenses	13,684,087	17	13,729,528
es	18	Grants payable	3,936,088	18	2,728,633
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	0	22	
	23	persons. Complete Part II of Schedule L	0	23	0
	24	Secured mortgages and notes payable to unrelated third parties	0	24	0
	25	Unsecured notes and loans payable	3,364,980	25	
	26	Total liabilities. Add lines 17 through 25	20,985,155	26	7,152,790
ses		Organizations that follow SFAS 117, check here ▶	20,300,130	20	23,610,951
and	07		14,218,514	ASSISTANCE OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE	13,862,323
3açı	27 28	Unrestricted net assets	27,028,138	27 28	28,486,156
9	29	remporarity restricted fiet assets	7,942,399	29	8,129,662
or Fund Balances	25	Permanently restricted net assets	7,342,093	29	0,125,002
S	30	** ***********************************		30	
Net Assets	31	Capital stock or trust principal, or current funds		31	****
As	32	Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds	-www.	32	
ë	33	<del></del>	49,189,051	33	50,478,141
z	34	Total liabilities and net assets/fund balances	70,174,206	34	74,089,092
Pa	it XI	Financial Statements and Reporting	10,11-1,200	<u> </u>	7 13000,002
1	Acco	unting method used to prepare the Form 990:   Cash   Accrual the organization's financial statements compiled or reviewed by an inde	Other	·	Yes No
ь	Were	the organization's financial statements audited by an independent acco	_		
		s" to lines 2a or 2b, does the organization have a committee that assumes r		iaht a	
_	the a	udit, review, or compilation of its financial statements and selection of an ind	eaponaionny foi oversi Jenendent accountant?	) Hitt	"   2c   ✓
3а	As a	result of a federal award, was the organization required to undergo an a single Audit Act and OMB Circular A-133?	udit or audits as set	forth	in . 3a ✓
b		es," did the organization undergo the required audit or audits?			3h V

## SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No. 1545-0047

Open to Public Inspection

		the organizatio					· · · · · · · · · · · · · · · · · · ·		Employ	er identifica	ation number	
			NATIONAL US							0536100		
Pa		<u> </u>		harity Status (All o				******		ee instru	ictions)	
The 1 2 3		A church, o	onvention of charactions	ndation because it is: urches, or association ion 170(b)(1)(A)(ii). (A	n of chure ttach Scl	ches desc nedule E.	cribed in	section	170(b)(1)			
4		A medical r hospital's n	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the nospital's name, city, and state:									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6 7 8		<ul> <li>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</li> <li>An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)</li> <li>A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)</li> </ul>										
9	<b>Z</b>	An organizareceipts from support from acquired by	tion that normall m activities relat m gross investm the organization	y receives: (1) more th ed to its exempt func nent income and unre n after June 30, 1975	nan 33½ % stions—si elated bu . See <b>se</b> d	% of its suubject to usiness ta	upport fro certain e exable inc (a)(2). (C	xception: come (les omplete	s, and (2) ss section Part III.)	no more า 511 tax	than 33% % of its ) from businesses	
10 11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
е		persons oth	g this box, I cer	tify that the organiza on managers and othe	tion is n	pe III-Fun ot contro ne or more	lled direc	tly or inc	directly b	v one or	Type III–Other more disqualified escribed in section	
f g		organization	i, check this box st 17, 2006, has	a written determinat  the organization acce								
h		and (iii) I (ii) A family (iii) A 35% o	pelow, the gover member of a pe controlled entity	r indirectly controls, or rning body of the sup- erson described in (i) a of a person described	ported or above? d in (i) or	rganizatio  (ii) above	on? ,  o?				Yes No 11g(i) 11g(ii) 11g(iii)	
		of supported ganization	(ii) EIN	ation about the organ (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is the in col. (i) ii	organization isted in your document?	(v) Did y the organ col. (i)	upports.  You notify  nization in  of your  port?	organizat (i) organi	s the lon in col. zed in the S.?	(vii) Amount of support	
					Yes	No	Yes	No	Yes	No		
							-					
******		······		VII								
											1,000,000	
		1773						,		Automation Annual Control		
Tota		***************************************										

-	Support Schedule for Org (Complete only if you ched	ganizations ked the box	Described in on line 5, 7,	Sections 17	70(b)(1)(A)(iv)	and 170(b)(	I)(A)(vi)
Sec	ction A. Public Support						
C	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				T T T T T T T T T T T T T T T T T T T	5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3			The Invalous of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of th			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	tion B. Total Support			1			
	llendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						· · · · · ·
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .						
12	Gross receipts from related activities, etc.	. (see instructio	ns)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	the organizatio	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3) $ ightharpoons$
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2008 (line 6	3, column (f) di	vided by line 11	l , column (f))	:	14	%
15	Public support percentage from 2007 Sch				l	15	%
	33%% support test—2008. If the organization qualifies	as a publicly s	upported orgar	nization , ,			▶ □
	33% % support test-2007. If the organization qual box and stop here. The organization qual	lifies as a publi	cly supported o	organization .			▶ □
17a	10%-facts-and-circumstances test—200 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	08. If the organi acts-and-circum	zation did not d nstances" test, d	heck a box on l check this box a	line 13, 16a, or and stop here.	16b, and line 14 Explain in Part I	is 10% or V how the
b 18	10%-facts-and-circumstances test—2007. more, and if the organization meets the "fa organization meets the "facts-and-circumstan Private foundation. If the organization did	If the organizations of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of th	ion did not chec stances" test, c organization qua	k a box on line heck this box a lifies as a public	13, 16a, 16b, or ind <b>stop here.</b> I ly supported org	17a, and line 15 Explain in Part I janization	is 10% or V how the
			<del></del>				

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.)

Sec	tion A. Public Support	ed the box of	i iiie a oi re	41 L 1.)								
-	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
1	Gifts, grants, contributions, and membership fees received. (Do not include						***************************************					
2	any "unusual grants.")  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	2,333,677	205,866,986	207,077,917	226,806,941 1,525,512	1,474,810	1,044,987,819 8,095,967					
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0					
4	Tax revenues levied for the organization's						***************************************					
7	benefit and either paid to or expended on its behalf	0	0	0	0	0	0					
5	The value of services or facilities furnished by a governmental unit to the	0	0	0	0	0	0					
6	organization without charge	191,439,112	207,381,861	208,325,010	228,332,453	217,605,350	1,053,083,786					
_												
	Amounts included on lines 1, 2, and 3 received from disqualified persons	1,315,920	992,971	871,441	675,681	96,186	3,952,199					
IJ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the				_		_					
	year or \$5,000	1,315,920	992,971	871,441	675 694	0 00 400	2.052.400					
8 8	Add lines 7a and 7b	1,313,920	992,971	071,441	675,681	96,186	3,952,199					
800	line 6.)											
	ellendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
9	Amounts from line 6	191,439,112	207,381,861	208,325,010	228,332,453	217,605,350	1,053,083,786					
10a		659,603	724,070	311,762	445,084	757,871	2,898,390					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0					
c	Add lines 10a and 10b	659,603	724,070	311,762	445,084	757,871	2,898,390					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	373,631	303,578	181,110	0	0	858,319					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		-5,135	-6,046	-5,702	-15,437	-2,178					
13	Total support. (Add lines 9, 10c, 11, and 12.)						1,056,838,317					
14	First five years. If the Form 990 is for organization, check this box and stop			nd, third, fourth			n 501(c)(3) ▶ □					
Sec	tion C. Computation of Public Su					,						
15	Public support percentage for 2008 (lin					15	99.27 %					
16	Public support percentage from 2007 S			<u>'g</u>		16	99.05 %					
Sec	tion D. Computation of Investmer	**			1							
17	Investment income percentage for 2008				olumn (f)) .	17	0.27 %					
18	Investment income percentage from 20					18	0.32 %					
19a	17 is not more than 331/3 %, check this b	ox and <mark>stop he</mark>	re. The organiz	zation qualifies	as a publicly s	upported orga	nization 🕨 🗹					
b	33½ % support tests—2007. If the organ line 18 is not more than 33½ %, check this											
20	Private foundation. If the organization	did not check a	a box on line 1	4, 19a, or 19b,	check this bo	x and see instr	ructions 🕨 🗌					

Schedule A (F	prm 990 or 990-EZ) 2008 Page
Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
"Other inc	ome" includes realized gain/(loss) on foreign exchange and gain/(loss) on donated
stocks.	
Stocks.	
*	
*	
	₽
***	
w	

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

OMB No. 1545-0047

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Nam	e of the organization Employer identification number	887/88
	ILDFUND INTERNATIONAL USA 54   0536100	
1-6	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds (b) Funds and other accounts	
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	
5		olo
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?	lo
Pa	impermissible private benefit?	10
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
2	Preservation of land for public use (e.g., recreation or pleasure)  Protection of natural habitat  Preservation of open space  Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement	
	on the last day of the tax year.	
	Held at the End of the Ye	ar
а	Total number of conservation easements	
b	Total acreage restricted by conservation easements	
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	_
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds?	o
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	0
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 statements that describes the organization's accounting for conservation easements.	
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Other 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, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide, in Part XIV, the text of the footnote to its financial statements that describes these items.	of e,
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of ar historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service provide the following amounts relating to these items:	e,
	(i) Revenues included in Form 990, Part VIII, line 1	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:	
a b	Revenues included in Form 990, Part VIII, line 1	 

Schedule	г	(Form	nnn	2000
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	Organizations Maintain	ing Collections	of Art, i	listorica	al Treasures	s, or O	ther Simila	r Assets (	continued)			
3	Using the organization's accession items (check all that apply):	and other record	ls, check	any of t	he following	that ar	e a significar	nt use of i	ts collection			
а	Public exhibition		d	ı 🔲 ı	oan or exch	ange p	rograms					
b	Scholarly research		е		Other							
C	Preservation for future general											
4	Provide a description of the organiz Part XIV.	ation's collection	s and ex	plain hov	w they furthe	r the o	rganization's	exempt pi	urpose in			
5	During the year, did the organization sassets to be sold to raise funds rathe	solicit or receive d r than to be maint	onations ained as	of art, his part of th	storical treasu e organization	res, or n's colle	other similar ection?	. 🗀 🛚	Yes 🗌 No			
Pa	Trust, Escrow and Cust Part IV, line 9, or reported	odial Arrangem I an amount on	ents. Co Form 99	mplete 0, Part )	if organizatio K, line 21.	on ans	wered "Yes"	to Form	990,			
	Is the organization an agent, trusted included on Form 990, Part X?					ions or	other assets		Yes 🗌 No			
D	b If "Yes," explain the arrangement in Part XIV and complete the following table:  Amount											
_												
C						•						
a	Additions during the year					. <u>1d</u>			,,,			
e	e Distributions during the year											
	a Did the organization include an amount on Form 990, Part X, line 21?											
b	b If "Yes," explain the arrangement in Part XIV.  2016 Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.											
	(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back											
		***************************************	(b) Pri	or year	(c) Two years	back	(d) Three years b	ack (e) Fo	ur years back			
1a		11,205,152										
b	Contributions	367,931 -1,948,338										
C	Investment earnings or losses .	-1,940,336			100000000000000000000000000000000000000							
đ	Grants or scholarships	<u> </u>										
е	Other expenditures for facilities	396,560			0.000							
	and programs	18,420			<del> </del>							
g	Administrative expenses End of year balance	9,209,765										
2	Provide the estimated percentage of		lance hel	d 2e.	4							
а	Board designated or quasi-endowm			u us.								
b	Permanent endowment ► 88.3											
С	Term endowment ▶ 5.1 %											
	Are there endowment funds not in the		se organiz	ation tha	it are held an	d admi	nistered for ti	ne				
	organization by:	, poddadaidi, 5, ti	10 01 921112		a die noie an	w dann	matered for th		Yes No			
	(i) unrelated organizations							3a(i)	<b>V</b>			
	(ii) related organizations							3a(ii)	<b>1</b>			
	If "Yes" to 3a(ii), are the related orga	inizations listed a	is require	d on Scl	hedule R? .			. 3b				
4	Describe in Part XIV the intended us											
i el	it VI Investments—Land, Bu			t. See F	orm 990, Pa	art X, li	ne 10.					
	Description of investment	(a) Cost er ot (investm			st or other s (other)	(c) D	epreciation	(d) Boo	ok value			
1a	Land	•	0		1,180,378				1,180,378			
b	Buildings		0	1	5,482,465		6,254,295		9,228,170			
C	Leasehold improvements		0		92,174		0	*****	92,174			
	Equipment		0		9,673,149	***************************************	8,347,151		1,325,998			
	Other		0		7,136,898		5,137,756		1,999,142			
ota	I. Add lines 1a-1e. (Column (d) should ed	qual Form 990, Pai	rt X, colun	nn (B), lin	e 10(c).)	, ,		1	3,825,862			

Schedule D (Form 990) 2008			Page 3
Part VII Investments—Other Securities	See Form 990, Part X	(, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	
Financial derivatives and other financial products			
Closely-held equity interests			
Other Funds of funds/Real estate funds	\$7,208,056	F	
	*******		
	***************************************		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
***************************************			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)	7,208,056		
Part VIII Investments—Program Relate	d. See Form 990, Part X	, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mark	
		Gost of end-or-year man	Ret value
		<u> </u>	
100			
			****
	*****		······································
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Par			
	(a) Description		(b) Book value
		••••••••••••••••••••••••••••••••••••••	
44444			
)			
***************************************	······································		····
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) should equal Form 990, Part X, col.	(B) line 15.)		*****
Pari X Other Liabilities. See Form 990, I			
(a) Description of liability Federal income taxes	(b) Amount		
Accrued benefit liability	\$7,152,79		
	Ψ1,10E,13		
	**************************************		
	· •••		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.) ▶	7.152.790	)	

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.

10	Reconciliation of Change in Net Assets from Form 990	~ -			, 434
					1
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	217,412,844
2	Total expenses (Form 990, Part IX, column (A), line 25)			_2	204,977,788
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	12,435,056
4	Net unrealized gains (losses) on investments			4	-6,505,488
5	Donated services and use of facilities			5	0
6	Investment expenses		· · · · · · · · ·	6	0
7	Prior period adjustments			_ <del>7</del> 8	-7,011
8	Other (Describe in Part XIV)		<i>, , , , , , </i>	-	-4,633,467
9 10	Total adjustments (net). Add lines 4-8			9	-11,145,966
	Reconciliation of Revenue per Audited Financial Sta	s 3 a	no 9	10	1,289,090
1				<del></del>	<del></del>
2	Total revenue, gains, and other support per audited financial statemen	nts .		1	210,906,508
a	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a			
b	The same and a second and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second	2b		1000000	
C		20			
d	The second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of th			- 1333	
					0 700 074
2	Add lines 2a through 2d			2e	
3 4		i ·	1	3	217,696,379
-	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	140	E0 F70		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b		••• ASSING	
b	Other (Describe in Part XIV)	40		15000000000	
5	Add lines 4a and 4b			4c	
	Reconciliation of Expenses per Audited Financial Sta	e iz.	onto With France	5	217,412,844
					·····
1 2	Total expenses and losses per audited financial statements	•		1	205,278,150
_	Amounts included on line 1 but not on Form 990, Part IX, line 25:	۱.۵-			
a	Donated services and use of facilities	2a		(100 Mag	
b	Prior year adjustments	2b			
Ç	Losses reported on Form 990, Part IX, line 25	2c		- 665	
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	, ·		3	204,927,215
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	١.	F0.570		
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		1000	
b	Other (Describe in Part XIV)	4b			
С 5	Add lines 4a and 4b			4c	
2 7000	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part Supplemental Information	t I, IIr	ie 18.)	5	204,977,788
Corr	plete this part to provide the descriptions required for Part II, lines 3, 5, 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and P	and Part >	9; Part III, lines 1a an (III, lines 2d and 4b.	d 4; l	Part IV, lines 1b
See	: Statement 9				
			***************************************		

Schedule D (For	m 990) 2008	Page 5
Part XIV	Supplemental Information (continued)	· -9v ·
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#### Schedule F (Form 990)

## Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Name of the organization Employer identification number CHILDFUND INTERNATIONAL USA 54 | 0536100

Pē	<b>General Informa</b> "Yes" to Form 990	ation on Activ	vities Outsic	le the United States	. Complete if the organi	zation answered
1	For grantmakers. Does assistance, the grantees' the grants or assistance?	the organizatio eligibility for th	n maintain red e grants or a	ssistance, and the sele	ction criteria used to aw	sor vard . 🗹 Yes 🗌 No
2	For grantmakers. Describe United States.	be in Part IV th	e organizatior	n's procedures for mon	itoring the use of grant f	unds outside the
_3_	Activities per Region. (Use	Schedule F-1	(Form 990) if	additional space is nee	eded.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 in region
See	Statement 10		× 3000			
						*****
			•			
						***************************************
		Thomas and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the sta				***************************************
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otal	s	32	1,424			163 236 064

163,236,064

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Schedule F (Form 990) 2008

	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,
		See Statement 11				***************************************		other
				A THE ASSESSMENT	1 2000	Attition		
		***************************************		and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the 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Schedule F (Form 990) 2008

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Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. Schedule F (Form 990) 2008

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Schedule F (Form 990) 2008

Schedule F (For	m 990) 2008	Page 4
Part IV	Supplemental Information	
	Complete this part to provide the information required in Part I, line 2, and any other additional information.	
See Staten		
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### SCHEDULE G (Form 990 or 990-EZ)

## **Supplemental Information Regarding** Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, Department of the Treasury Internal Revenue Service 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a,

OMB No. 1545-0047

Name of the organization

Employer identification number CHILDFUND INTERNATIONAL USA 54 | 0536100 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e <a>Solicitation of non-government grants</a> Email solicitations Solicitation of government grants c Phone solicitations Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 🗸 Yes 🔲 No 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. Form 990-EZ filers are not required to complete this table. (i) Name of individual (v) Amount paid to (or retained by) fundraiser listed in col. (i) (ii) Activity (iii) Did fundraiser have (iv) Gross receipts (vi) Amount paid to or entity (fundraiser) custody or control of contributions? (or retained by) organization from activity Yes No See Statement 13 6,504,210 581,231 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. See Statement 14

	Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.							
4)			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))		
Revenue	2	Gross receipts						
	4	Cash prizes						
nses	5	Non-cash prizes						
Direct Expenses	6	Rent/facility costs				<u> </u>		
	7	Other direct expenses		-vinana.				
(Da	8 9	Direct expense summary. Ad Net income summary. Comb	ine lines 3 and 8 in colu	ımn (d)		( )		
	<u> </u>	Gaming. Complete if than \$15,000 on Form	tne organization ansv 990-EZ, line 6a.	vered "Yes" to Form	990, Part IV, line 19,	or reported more		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))		
Rev	1	Gross revenue						
ses	2	Cash prizes						
Direct Expenses	3	Non-cash prizes						
Direct	4	Rent/facility costs	White .					
	5	Other direct expenses .						
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes% ☐ No			
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)		( )		
	8	Net gaming income summary	. Combine lines 1 and	7 in column (d)	<b>&gt;</b>			
9 a b	ls	ter the state(s) in which the or the organization licensed to o 'No," Explain:	rganization operates ga perate gaming activities	uming activities:s in each of these state	s?	. <u>9a</u>		
		ere any of the organization's g Yes," Explain:	jaming licenses revoked	d, suspended or termina	ated during the tax yea	10a		
11 12	s		aming activities with no	onmembers?	a partnership or other	. 11		

Sche	dule G (Form 990 or 990-EZ) 2008				F	age 3
					Yes	
13	Indicate the percentage of gaming activity operated in:		1			
а	The organization's facility	13a	%			
b	An outside facility	13b	%			
14	Provide the name and address of the person who prepares the organization's gaming and records:	/spec	ial events books			
	Name b					
	Name ▶					
	Address ▶					
			****			
15a	Does the organization have a contract with a third party from whom the organizar evenue?	tion r	eceives gaming	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ amount of gaming revenue retained by the third party ▶ \$		and the			
C	If "Yes," enter name and address:					
	Name ▶					
	Address ▶					
16	Gaming manager information:					
	Name &					
	Name >		~~~			
	Gaming manager compensation ▶ \$					
	Cashing manager compensation of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the					
	Description of services provided ▶					
	☐ Director/officer ☐ Employee ☐ Independent contractor					

a Is the organization required under state law to make charitable distributions from the gaming proceeds to

Mandatory distributions:

17a

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

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

▶ Attach to Form 990.

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OMB No. 1545-0047

Open to I

**2**□ (h) Purpose of grant or assistance 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. Use Employer identification number Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on  $\square$ : 0536100 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance 54 (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance (d) Amount of cash grant Part IV and Schedule 1-1 (Form 990) if additional space is needed For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (b) EIN Enter total number of other organizations CHILDFUND INTERNATIONAL USA 1 (a) Name and address of organization or government See Statement 15

Schedule I (Form 990) 2008

Cat. No. 50055P

Schedule I (Form 990) 2008

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance See Statement 16 Part III

#### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

CHILDFUND INTERNATIONAL USA

## **Compensation Information**

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

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23. OMB No. 1545-0047

**2008** 

Open to Public Inspection

0536100

Employer identification number

54

**Questions Regarding Compensation** 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. ☐ First-class or charter travel Housing allowance or residence for personal use ☑ Travel for companions ☐ Payments for business use of personal residence ☑ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If line 1a is 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a: a Receive a severance payment or change of control payment? . . . . . . . . . . . 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan?.... 4b 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. Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a 5b If "Yes" to line 5a or 5b, describe in Part III. 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: a The organization?...... 6a 6b If "Yes" to line 6a or 6b, describe in Part III. 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 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 Regs. section 53.4958-4(a)(3)? If "Yes," describe

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Part III

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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

MAX	-	(B) Breakdown of W	W-9 and/or 1099-MISC componential	SC. componention		AND THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF T	***************************************	William III
(A) Name		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
See Statement 17 (ii)				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7 7 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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Schedule J (Form 990) 2008

#### SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

#### **NonCash Contributions**

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047

Open To Public Inspection

Employer identification number CHILDFUND INTERNATIONAL USA 54 | 0536100 Para Types of Property (a) (b) (c) Method of determining Check if Number of contributions Revenues reported on applicable Form 990, Part VIII, line 1q revenues Art-Works of art . . . 1 Art—Historical treasures Art—Fractional interests 4 Books and publications . . Clothing and household goods . . . . . . . . 46,333 FMV Cars and other vehicles . 6 7 Boats and planes . . Intellectual property . . . 8 9 Securities-Publicly traded . 10 Securities-Closely held stock . Securities-Partnership, LLC, or trust interests . . . . 12 Securities-Miscellaneous Qualified conservation contribution (historic structures) , , , , , , , Qualified conservation contribution (other) . . Real estate-Residential . . 15 16 Real estate—Commercial . . 17 Real estate-Other . . . . 1,056 FMV 18 Collectibles 20 28,000 19 Food inventory . . . . FMV Drugs and medical supplies 1 2,525 20 FMV 21 Taxidermy . . . . . . Historical artifacts . . . . 22 Scientific specimens . . . 24 Archeological artifacts . . . 25 Other ▶ (.....) Other ▶ (.....) Other ▶ (.....) 28 Other ▶ (.....) Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . Yes No 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 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 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a b If "Yes," describe in Part II. 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

describe in Part II.

Schedule M (i	orm 990) 2008 Page
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.
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#### **SCHEDULE 0** (Form 990)

## **Supplemental Information to Form 990**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

**CHILDFUND INTERNATIONAL USA** 

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection Employer identification number 54 0536100

See Statement 19	
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3cheddie O (Forth 990) 2006			Page 4
Name of the organization		oyer identification number	
CHILDFUND INTERNATIONAL USA	54	0536100	
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Statement 1 : Activity Or Mission Description

Statement 2 : Program Service Accomplishments

Statement 3: Name Of Foreign Country

Statement 4: States Where Copy Of Return Is Filed

Statement 5 : The Books Are In Care Of Statement 6 : Form990 PartVII SectionA Statement 7 : Contractor Compensation

Statement 8: N/A

Statement 9 : Supplemental Information

Statement 10 : Accounts and Activities Outside the United States

Statement 11: Grants To Organization Outside US

Statement 12 : Supplemental Information

Statement 13 : Fundraiser Activity Information

Statement 14: Licensed States

Statement 15: Description of Grants and Other Assistance to Governments and

Organizations in the United States

Statement 16: Description of Procedures for Monitoring the Use of Grant Funds in the

**United States** 

Statement 17: Description of Individuals' Compensation

Statement 18 : Explanation of Questions Regarding Compensation

Statement 19 : Additional Information for Responses to Specific Questions for The Form 990

or OthersStatement

CHILDFUND INTERNATIONAL USA 54-0536100

Form: 990 Page: 1

Line Number: Part I Line 1 ActivityOrMissionDescription

# **Activity Or Mission Description**

# Description

To help deprived, excluded and vulnerable children living in poverty have the capacity to become young adults, parents and leaders who bring lasting and positive change to their communities, and to promote societies whose individuals and institutions participate in valuing, protecting, and advancing the worth and the rights of children.

Form: 990

Page: 2

Line Number: Part III Line 4a

Activity

**Program Service Accomplishments** 

Activity Code	Description	Expense	Grants	Revenue
	BASIC EDUCATION: ChildFund believes that the well-being of all children leads to the well-being of the world; we empower children to thrive throughout all stages of life and become leaders of enduring change. In 2008, ChildFund programs reached an estimated 15.2 million infants, children, youth and parents: 2.8 million enrolled in sponsorship programs, 3.8 million non-enrolled beneficiaries in communities served by ChildFund, and almost 8.6 million who benefited from grants (mostly outside of sponsorship areas). ChildFund's educational programs work with educators, community groups, parents, and children alike to transform schools into places that motivate and support students. These programs served an estimated 2.1 million children, youth and family members in 2008 (including enrolled and non-enrolled populations). Benefits include improved school facilities, enhanced teaching methodologies, and safer school environments, as well as improved policy to	\$51,241,712	\$41,058,404	\$392,17
	enhance student access and safety.  HEALTH & SANITATION: What happens in the first years of life is the cornerstone upon which a child grows and develops. Core program areas for infants and young children include safe motherhood, neonatal care, integrated community management of childhood illnesses and nutrition. ChildFund's work with youth and young parents focuses on reproductive health services and education as well as community based family planning. ChildFund health programs served more than 1.65 million children, youth and adults (including enrolled and non-enrolled populations).	\$41,134,530	\$32,959,829	\$314,822
	EARLY CHILDHOOD DEVELOPMENT: ChildFund is committed to effective programs that promote child development and secure infants and young children. Early childhood development and protection services reached an estimated 1.1 million children and adults (including enrolled and non-enrolled populations). Services include parenting education and support groups, home based outreach to support and promote child development, and preschool services in community managed centers. ChildFund also combines special activities for children, training for early childhood development and first grade teachers as well as parents to improve a child's transition from early childhood centers to primary school.	\$27,610,282	\$22,123,267	\$211,314
	EMERGENCY RESPONSE: ChildFund provided aid and assistance to numerous victims of disaster during 2008. In East Africa where severe drought impacted millions of people, food rations and clean water were provided to local schools in Kenya. To displaced persons from the war in Sri Lanka, safe drinking water and sanitation facilities were provided to children and their families. After heavy rains in southern India flooded the states of Andhra Pradesh and Karnataka, ChildFund and its partners undertook immediate relief and rescue operations helping approximately 10,000	\$11,919,192	\$9,550,481	\$91,223

Statement 2		CHILDFUND INTER	AZII IANOITAN
people in the devastated areas. ChildFund also provided similar assistance to victims of typhoons in the Phillppines, earthquake victims in Sumatra and flood victims in Brazil and Taiwan.			MATIONAL BOA
NUTRITION: Hunger and malnourishment contribute to more than half of the nearly ten million worldwide deaths of children under age 5. More than five hundred thousand women die annually in child birth, 99% of them in the developing countries of Africa and Asia with many deaths resulting from maternal malnutrition and anemia. Yet the causes of maternal and child hunger and death are predictable, preventable and can be addressed through affordable means. ChildFund International promotes interventions which have immediate impact for children and mothers and can be rapidly augmented. These practical measures include nutrition education and promotion, micronutrient supplementation, parasite control measures, and situation-specific household food security interventions.	\$15,192,590	\$12,173,354	\$116,276
MICRO-ENTERPRISE DEVELOPMENT: The world is experiencing a youth employment crisis with young people making up 47% of the global unemployed. ChildFund's approach is to provide insight into youth livelihood development with a focus on skills training, preparation for employment, and guidance on business development. Protection from exploitative labor practices, identification of youth livelihood opportunities and generation of income to meet daily needs are key objectives of the approach.	\$19,005,992	\$15,242,399	\$145,591

\$166,104,298

\$133,107,734

\$1,271,403

Ultimately, ChildFund's program efforts help youth in the workforce achieve greater impact and sustainability.

Total:

Form: 990

Page: 5

Line Number: Part V Line 4b NameOfForeignCountry

### **CHILDFUND INTERNATIONAL USA** 54-0536100

# Name Of Foreign Country

#### Name

Afghanistan

Angola

Bolivia

Belarus

Brazil

Chad

Sri Lanka

Dominica

Ecuador

Ethiopla

The Gambia

Guatemala

Guinea

Honduras

Indonesia

India

Kenya

Liberia

Mexico

Mozambique

Panama

Philippines

South Africa

Senegal

Sierra Leone

Thailand

East Timor

Uganda

St. Vincent and the Grenadines

Zambia

Form: 990

Page: 6

Line Number: Part VI Section C Line 17 StatesWhereCopyOfReturnIsFiled

# CHILDFUND INTERNATIONAL USA 54-0536100

# States Where Copy Of Return Is Filed

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Form: 990

James Tuite

Page: 6

Line Number: Part VI Section C Line 20

TheBooksAreInCareOf

Name and address:

2821 Emerywood Pkwy Richmon, VA 23294-3726

The Books Are In Care Of Telephone Number (804)756-2700

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CHILDFUND INTERNATIONAL USA 54-0536100 Statement 6 Form: 990 Page: 7

Line Number: Part VII Section A Form990PartVIISectionA

### Form990 PartVII SectionA

	Form990 PartVII SectionA										
Name	Title	Hours	C1	C2	C3	C4	C5	C6	Reportable Comp From Organization	Reportable Comp From RelatedOrgs	Other Compensation
Charles Carava	ti Trustee	2	Yes						\$0	\$0	\$0
A Scott Andrew	s Trustee	2	Yes						\$0	\$0	\$0
Louis Weeks	Trustee	2	Yes						\$0	\$0	\$0
Jesus Amadeo	Trustee	2	Yes						\$0	\$0	\$0
A Hugh Ewing I	Il Trustee	2	Yes						\$0	\$0	\$0
Lynne Verson- Feagans	Trustee	2	Yes						\$0	\$0	\$0
Roger Gregory	Trustee	2	Yes						\$0	\$0	\$0
Marilyn Grist	Trustee	2	Yes					-	\$0	\$0	\$0
Sarah Hanson	Trustee	2	Yes						\$0	\$0	\$0
Karen Hein	Trustee	2	Yes						\$0	\$0	\$D
Barbara Joynes	Trustee	2	Yes						\$0	\$0	\$0
William Leahey Jr	Trustee	2	Yes						\$0	\$0	\$0
Darrell Martin	Trustee	2	Yes						\$0	\$0	\$0
Maureen Denlea-Massey	Trustee	2	Yes						\$0	\$0	\$0
Velma McBride Murry	Trustee	2	Yes						\$0	\$0	\$0
Robert Norfleet Jr	Trustee	2	Yes					***	\$0	\$0	\$0
John Purnell Jr	Trustee	2	Yes						\$0	\$0	\$0
Masood Rehmani	Trustee	2	Yes						\$0	\$0	\$0
Thomas Siegfried	Trustee	2	Yes					•	\$0	\$0	\$0
Peter Tanous	Trustee	2	Yes						\$0	\$0	\$0
Thomas Weisne	r Trustee	2	Yes						\$0	\$0	\$0
Brian Wilcox	Trustee	2	Yes						\$0	\$0	\$0
Anne Goddard	President	40			Yes*	,			\$255,824	\$0	\$33,921
James Tuite	Vice President, CFO	40			Yes				\$186,954	\$0	\$26,263
Betty Forbes	Vice President	40				Yes			\$193,791	\$0	\$22,032
Dula James	Vice President	40				Yes			\$190,668	\$0	\$45,853
Isam Ghanim	Vice President	40				Yes			\$174,127	\$0	\$111,070
Charles Davy	Vice President	40				Yes			\$174,996	\$0	\$53,499
Diane Willis	Vice President	40				Yes			\$173,481	\$0	\$20,845
Cheri Dahl	Vice President	40				Yes			\$168,288	\$0	\$29,334
Shirley Dady	Director	40					Yes		\$163,781	\$0	\$49,922
Dolamani	Director	40					Yes		\$147,197	\$0	\$22,624

Statement	6
Mohapatra	

# CHILDFUND INTERNATIONAL USA

wonapana						
John Watts	Director	40	Yes	\$138,938	\$0	\$31,134
Benjamin Woodson	Director	40	Yes	\$135,751	\$0	\$24,257
Mary Arnold	Director	40	Yes	\$128,828	\$0	\$30,203
Total:				\$2,232,624	\$0	\$500.957

C1 = Individual Trustee Or Director

C2 = Institutional Trustee

C3 = Officer

C4 = Key Employee

C5 = Highest Compensated Employee

C6 = Former

Form: 990 Page: 8

Line Number: Part VII Section B ContractorCompensation

CHILDFUND INTERNATIONAL USA 54-0536100

# **Contractor Compensation**

Name and address:	Description Of Services	Compensation
Corinthian Media Inc 214 West 29th St New York, NY 10001	Media/Advertising	\$5,520,716
Broadcast Buying Services Inc 901 Manchester St Toms River, NJ 08757	Media/Advertising	\$3,622,869
Dataprose Inc 1451 N Rice Avenue Ste A Oxnard, CA 93030-7991	Printing & Postage	\$1,357,178
Carat Fusion 200 Clarendon St Boston, MA 02116	Media/Advertising	\$1,289,612
Van Groesbeck 2211 Dickens Road Suite 300 Richmond, VA 23230	Fundraising services	\$891,381
Total:	100000	\$12,681,756

CHILDFUND INTERNATIONAL USA 54-0536100

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Form: Schedule D

Page: 4

Line Number: Part XIV Form990ScheduleDPartXIV

# Supplemental Information

-		Explanation:
Reference: Identifier:	Schedule D, Part X SchD_P10_S00_L00	Other Liabilities include accrued benefit liablity and federal withholding taxes payable
Reference: Identifier:	Schedule D, Part XI, Line 8 SchD_P11_S00_L08	Change in accrued benefit liability -\$4,332,257 Change in value split interest CGA -\$301,210
Reference: Identifier:	Schedule D, Part XII, Line 2d SchD_P12_S00_L02d	Change in Value split interest CGA -301,210
Reference: Identifier:	Schedule D, Part XII, Line 4b SchD_P12_S00_L04b	Rental Expenses Part VIII Line 6b -334,108
Reference: Identifier:	Schedule D, Part XIII, Line 2d SchD_P13_S00_L02d	Rental expense allocation \$334,108
Reference:	Schedule D, Part V, Line 4	ChildFund has several endowments which include assets of donor-restricted funds that the organization must hold in perpetuity or for a donor-specified period as well as board-designated funds. Investment gains and yields on the invested principal are used to provide food, education, basic health care, scholarships, and program support beyond the reach of traditional sponsorship funding.
ldentifier:	SchD_P05_S00_L04	

Form: Schedule F

Page: 1

Line Number: Part I Line 3 AcctsActvsOutUSTable

# Accounts and Activities Outside the United States

******		Offices	Employees	Total
Region Activities Services	Sub-Saharan Africa Program Services Basic eductation, Health & Sanitation, Emergency Response, Early Childhood Development, Micro-Enterprise Development	14	558	\$65,923,675
Region Activities Services	South America Program Services Basic eductation, Health & Sanitation, Emergency Response, Early Childhood Development, Micro-Enterprise Development	3	127	\$27,385,525
Region Activities Services	East Asia and the Pacific Program Services Basic eductation, Health & Senitation, Emergency Response, Early Childhood Development, Micro-Enterprise Development	5	274	\$23,503,874
Region Activities Services	South Asia Program Services Basic eductation, Health & Sanitation, Emergency Response, Early Childhood Development, Micro-Enterprise Development	3	288	\$21,782,216
Region Activities Services	Central America and the Caribbean Program Services Basic eductation, Health & Sanitation, Emergency Response, Early Childhood Development, Micro-Enterprise Development	5	145	\$16,177,335
Region Activities Services	North America (including Canada and Mexico, but not the United States) Program Services Basic eductation, Health & Sanitation, Emergency Response, Early Childhood Development, Micro-Enterprise Development	1	27	\$7,381,083
Region Activities Services	Russia and the newly independent States Program Services Basic eductation, Health & Sanitation, Early Childhood Development	1	5	\$1,082,356
	Total:	32	1424	\$163,236,064

Form: Schedule F

Page: 2

Line Number: Part II Line 1 GrantsToOrgsOutsideUS

# Grants To Organization Outside US

	Grants To Organization Outsi	de US	
		Cash Grant	Non-Cash Assistance
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Russia and the newly independent States Health/social education Wire transfer	\$993,658	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South Asia Rehabilitation and reconstruction Wire transfer	\$3,018,505	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Health and Child Labor Wire transfer	\$1,292,135	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South America MED Wire transfer	\$159,630	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South America Education Wire transser	\$128,451	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Emergency response Wire transfer	\$748,244	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Central America and the Caribbean Health/ECD Wire transfer	\$174,938	- Paradesia
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South America ECD/Child Labor Wire transfer	\$229,944	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/vulnerable children/emergency Wire transfer	\$1,953,688	
Region Grant Cash Disbursement Non-Cash Assistance /aluation	Sub-Saharan Africa ECD Wire transfer	\$179,628	

Statement 11		CHILDFUND INTERNATIONAL USA
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa AIDS/ECD/Sanitation Wire transfer	\$491,606
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Central America and the Caribbean Health Wire transfer	\$60,992
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Central America and the Caribbean ECD/Education Wire transfer	\$2,106,017
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South Asia Education Wire transfer	\$324,211
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Emergency/MED Wire transfer	\$1,659,948
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Health/ECD/Nutrition Wire transfer	\$2,639,780
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Emergency/Sanitation/Food security Wire transfer	\$1,308,299
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa AIDS/vulnerable children Wire transfer	\$177,905
Region  Grant  Cash Disbursement  Non-Cash Assistance  Valuation	North America (including Canada and Mexico, but not the United States)  ECD/Nutrition  Wire transfer	\$315,296
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Health/Education Wire transfer	\$989,739
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Health/Nutrition Wire transfer	\$5,223,732

Statement 11		CHILDFUND INTERNATIONAL USA
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Child protection Wire transfer	\$903,049
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South Asia MED/Education Wire transfer	\$1,241,898
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific MED/Education Wire transfer	\$909,926
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Nutrition/ECD Wire transfer	\$638,825
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Child Protection/Health Wire transfer	\$1,295,094
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Health/Education Wire transfer	\$1,383,509
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South America Health Wire transfer	\$324,782
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency response/ECD/MED Wire transfer	\$1,741,8 <u>19</u>
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South America Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$4,334,448
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South America Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$13,683,967
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$57,90B

Statement 11 Region Grant Cash Disbursement Non-Cash Assistance Valuation	Central America and the Caribbean Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	CHILDFUND INTERNATIONAL USA \$1,087,460
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South America Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$3,632,095
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$6,022,304
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$1,081,588
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$2,834,070
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Central America and the Caribbean Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$4,362,021
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Central America and the Caribbean Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$4,647,676
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South Asia Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$10,617,791 ·
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$4,589,184
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$7,296,407
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$1,002,869
Region	North America (including Canada and Mexico, but not the United	\$5,586,536

Statement 11	States)	CHILDFUND INTERNATIONAL USA
Grant Cash Disbursement Non-Cash Assistance Valuation	Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$5,828,826
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$3,432,032
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$1,805,038
Region Grant Cash Disbursement Non-Cash Assistance Valuation	South Asia Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$2,465,412
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$2,727,405
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$1,323,428
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$223,892
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$4,812,870
Region Grant Cash Disbursement Non-Cash Assistance Valuation	East Asia and the Pacific Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$883,180
Region Grant Cash Disbursement Non-Cash Assistance Valuation	Sub-Saharan Africa Education/Health & Sanitation/Emergency Response/ECD/MED Wire transfer	\$3,768,092

Form: Schedule F

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Line Number: Part IV Form990ScheduleFPartIV CHILDFUND INTERNATIONAL USA 54-0536100

#### Supplemental information

#### Explanation:

Reference: So

Schedule F, Part I, Line 2

Although ChildFund does not consider its use of funds by the overseas local community organizations as a use of grants coming from the organization, internal controls have been established to ensure that the financial assistance provided is used for ChildFund's tax-exempt purpose. Each community organization is chosen for partnership based on its integrity and ability to carry out ChildFund's mission in the project areas. These partner organizations must undergo a thorough screening process to ensure that they are legitimate, demonstrate good governance, and are viable to help meet regulatory requirements. In addition to the financial support, ChildFund provides technical assistance and oversight to the organizations to help build capacity of all local community health and education program activities. Additional controls are established for the flow of funds. Banking relationships in each local community are established and managed by the corporate office in Richmond, Virginia. No local signatories are permitted on any of the overseas transmittal accounts. All wire transfers of funds to the local community banks must be approved by the corporate office as well as any disbursements of funds for the program related expenditures. The local organization must provide an accounting of its use of funds by submitting monthly financial reports to the National Office. Annual audits are also required for all local community projects and programs to provide assurance and acceptance by any legal, governmental or professional body. ChildFund also operates as a pass through entity for certain U.S. Government grant funding to projects where specific needs have been identified. To ensure that grant expenditures are properly accounted for, ChildFund submits detailed budgets for approval to the respective agencies prior to the start of a grant. ChildFund also has established procedures for all sub-recipients to monitor expenses, program quality and compliance. Staff members responsible for implementation are required to complete necessary education requirements and have a working knowledge of OMB Circular A-122.7. Professional audits are conducted annually for all grants related activities.

Identifier:

SchF_P01_S00_L02

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Form: Schedule G

Page: 1

Line Number: Part I Line 2b FundraiserActivityInformation

CHILDFUND INTERNATIONAL USA 54-0536100

### **Fundraiser Activity Information**

Name	Activity	C1	Gross Receipts	Amount Or	Net To
			•	Retained By Contractor	Organization
VanGroesbeck	Direct Mail	No	\$3,467,293	\$150,850	\$3,316,443
iSandbox	Direct mail	No	\$1,702,263	\$198,401	\$1,503,862
Infocision	Outbound telemarketing	No	\$1,334,654	\$231,980	\$1,102,674
Total:	,		\$6,504,210	\$581,231	\$5,922,979

C1 = Fundraiser control of funds?

Form: Schedule G

Page: 1

Line Number: Part I Line 3

LicensedStates

# CHILDFUND INTERNATIONAL USA 54-0536100

# **Licensed States**

·	 	Licenseu otates	 	
States				
АК			 	
AL				
AR				
AZ				
CA				
co				
CT				
DC				
FL				
GA				
HI				
IL				
IN				
KS				
KY				
LA				
MA				
MD				
ME				
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PA			2	
RI				
SC				
SD				
TN				
TX				
UT	**			
VA	▼.			
WA				
WI				
wv				

Form: Schedule 1

Page: 1

Line Number: Part II RecipientTable

Description of Grants and Other Assistance to Governments and Organizations in the United States

	· · · · · · · · · · · · · · · · · · ·	Amount of cash grant	Amount of non-cash assistance
Name and address	Operation Shoestring Inc	\$162,372	
	1711 Bailey Avenue		
	Jackson, MS 39283		
EIN	64-0471554		
IRC code section			
Method of valuation			
Description of non-	•		
cash assistance Purpose of grant	Education II In the Constant - IFOD		
****	Education/Health & Sanitation/ECD	***************************************	
Name and address	Child Health Investment Partnership	\$8,848	
	1201 Third St SW		
	Roanoke, VA 24016		
EIN	54-1566451		
IRC code section  Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	Education/Health & Sanitation/ECD		
			TIRION TIRION
Name and address	North Delta Youth Development Center	\$48,368	
	703 Darby Street		
EIN	Lambert, MS 38643 64-0849178		
IRC code section	04-0049176		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	Education/Health & Sanitation/ECD		
Name and address	We Care Community Services	\$70,204	7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-ANN. 7-
	909 Walnut Street	\$10,204	
	Vicksburg, MS 39180		
EIN	51-0188737		
IRC code section			ž
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	Education/Health & Sanitation/ECD		
Name and address	Brickfire Project	\$163,918	
	143 Westside Drive		
	Starkville, MS 39759		
EIN	64-0712270		
IRC code section			
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	Education/Health & Sanitation/ECD		16ft ·
Name and address	AVANCE Rio Grande Valley	\$649,399	
	1418 Beech Avenue Ste 137		
	McAllen, TX 78501		
EIN	74-1769114		
IRC code section			

Method of valuation

Statement 15 Description of non- cash assistance		CHILDFUND INTERNATIONAL USA
Purpose of grant	Education/Health & Sanitation/ECD	
Name and address	Turtle Mt Youth and Family Center 1208 West Main Avenue Rolla, ND 58367	\$103,085
EIN IRC code section Method of valuation	-	
Description of non- cash assistance Purpose of grant	Education/Health & Sanitation/ ECD	
Name and address	Youth Development Program 2430 Gnugnuska Drive Rapid City, SD 57701	\$205,012
EIN IRC code section Method of valuation Description of non- cash assistance		
Purpose of grant	Education/Health&Sanitaiton/ECD	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
Name and address	Oyate Networking Mission Office 2nd and Grant Street Mission, SD 57555	\$300,282
EIN IRC code section Method of valuation Description of non-	46-0438929	
cash assistance Purpose of grant	Education/Health and Sanitation/ECD	
Name and address	Boys and Girls Club of Delaware County 508 W Dial Street Jay, OK 74346	\$117,645
EIN IRC code section Method of valuation Description of non- cash assistance	73-1214669	
Purpose of grant	Education/Health and Sanitation/ ECD	
EIN IRC code section Method of valuation Description of non- cash assistance	Boys and Girls Club of Green County 1478 South Elliot Pryor, OK 74362 73-1527045	\$186,612
Purpose of grant	Education/Health and Sanitation/ ECD	
	Boys and Girls Club of Sequoyah County 111 North Elm Sallisaw, OK 74955	\$117,873
EIN IRC code section Method of valuation Description of non- cash assistance	73-1128670	
Purpose of grant	Education/Health and Sanitation/ ECD	

Name and address Kids Connections Inc

816 South College Avenue

Tahlequah, OK 74464

EIN

73-1421532

IRC code section Method of valuation Description of noncash assistance

Purpose of grant

Education/Health and Sanitation/ ECD

CHILDFUND INTERNATIONAL USA

\$128,272

Form: Schedule I

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Line Number: Part IV Form990ScheduleIPartIV

# CHILDFUND INTERNATIONAL USA 54-0536100

# Description of Procedures for Monitoring the Use of Grant Funds in the United States

		Explanation:
Reference:	Schedule I, Part I, Line 2	Although ChildFund does not consider its use of funds by domestic local community organizations as a use of grants coming from the organization, internal controls have been established to ensur that the financial assistance provided is used for ChildFund's tax-exempt purpose.
ldentifier:	Schl_P01_S00_L02	

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Line Number: Part II Form990ScheduleJPartII

Description of Individuals' Compensation

	Description of Individuals' Compensation						
	Base	Bonus and	Other		Nontaxable	Total Co	mp reported
	compensation		compensation	compensation	benefits (\$)		prior 990
	(\$)	compensation	(\$)	(\$)			
Anne Goddard		(\$)	·····	TANTANA.			
From org.	\$255,824	en	**	<b>*</b> 00 544	***	<b>.</b>	
From related orgs	\$0	\$0 \$0	\$0 \$0	\$23,511 \$0	\$10,410 \$0	\$289,745 \$0	\$( \$(
James Tuite						40	ą.
From org.	\$186,954	\$0	\$0	\$17,569	\$8,694	\$213,217	• •
From related orgs	\$0	\$0	\$0	\$0	\$0,054 \$0	\$213,217 \$0	\$0 \$0
Dula James			7-				ΨC
From org.	\$190,668	\$0	\$25,561	\$16,736	to 550	énne saa	•
From related orgs	\$0	\$0	\$0	\$10,730	\$3,556 \$0	\$236,521 \$0	\$0 \$0
Isam Ghanim					70	40	40
From org.	\$174,127	\$0	\$87,099	\$13,054	\$10,917	\$285,197	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Charles Davy		***************************************		***************************************	71107		***
From org.	\$174,996	\$0	\$43,042	\$0	\$10,457	\$228,495	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0
Diane Willis	HANNAN I						
From org.	\$173,481	\$0	\$0	\$14,248	\$6,597	\$194,326	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0
Cheri Dahl	**********			***************************************	····		
From org.	\$168,288	\$0	\$0	\$18,998	\$10,336	\$197,622	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0
Shirley Dady							
From org.	\$163,781	\$0	\$25,672	\$13,793	\$10,457	\$213,703	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0
Dolamani Mohapatra	···········						
From org.	\$147,197	\$0	\$0	\$12,327	\$10,297	\$169,821	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$0	\$0
John Watts						****	
From org.	\$138,938	\$0	\$0	\$21,178	\$9,956	\$170,072	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$170,072	\$0 \$0
Benjamin Woodson	****						
From org.	\$135,751	\$0	\$0	\$20,455	\$3,802	\$160,008	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0,55 <u>2</u>	\$100,008	\$0 \$0
Mary Arnold							
From org.	\$128,828	\$0	\$0	\$19,695	\$10,508	\$159,031	\$0
From related orgs	\$0	\$0	\$0	\$0	\$10,500	\$0	\$0 \$0
Betty Forbes				***	<del></del>		
From org.	\$193,791	\$0	\$0	\$14,278	\$7,754	\$215,823	\$0
From related orgs	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0

Form: Schedule J

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Line Number: Part III Form990ScheduleJPartIII

# CHILDFUND INTERNATIONAL USA 54-0536100

# **Explanation of Questions Regarding Compensation**

		Explanation:
Reference: Identifier:	Schedule J, Part I, Line 1a SchJ_P01_S00_L01a	Tax gross-up payments and housing allowances may be given to expatriate employees.
Reference:	Schedule J, Part II	IRS guidance stipulates that, except for items specifically listed in the instructions, organizations are not required to report on any item of "other compensation" if its total value is less than \$10,000 for the calendar year ending with or within the organization's tax year. ChildFund International includes all occurences of compensation in Part VII and Schedule J regardless of allowable monetary exclusions.
ldentifier:	SchJ_P02_S00_L00	

Form: Schedule O

Page: 1

Line Number: ScheduleO GeneralExplanation

# Additional Information for Responses to Specific Questions for The Form 990 or Others

	7//	Explanation:
Reference:	Form 990, Part VI, Section A, Line 4 F990_P06_S0A_L04	The organizing documents were modified to reflect a change in the organization's name, from Christian Children's Fund to ChildFund International.
Reference:	Form 990, Part VI, Section A, Line 10 F990_P06_S0A_L10	The Form 990 is reviewed by our controller, CFO, and member of the Board of Directors.
Reference:	Form 990, Part VI, Section B, Line 12c	The Board of Directors and key employees (President and Vice Presidents) are required to annually review the organizations Conflict of Interest Policy and complete a disclosure statement. The statement requires disclosure of any relationship or activity which may constitute a conflict of interest. Board members are also required to promptly update their disclosure statement with new relationships or activities which may constitute a conflict of interest. Disclosures made, are reviewed by the full Board of Directors in consultation with the Assurance Department and action is taken to avoid potential or actual conflict. Members of staff are required to receive a copy of the Conflict of Interest policy and complete a disclosure statement when hired. Non-key employees are required to promptly disclose to their supervisor as soon as they become aware of a conflict, potential conflict or appearance of a conflict. Management in consultation with the Assurance Department reviews the disclosure and takes action to avoid potential or actual conflict.
Reference:	Form 990, Part VI, Section C, Line 19	ChildFund International's audited financial statements are made available to the public through posting on the organization's website at www.childfund.org. The organization's Conflict of Interest Policy is available upon request.
identifier:	F990_P06_S0C_L19	, and the available apair roques.
Reference:	Form 990, Part VI, Section B, Line 15 F990_P06_S0B_L15	ChildFund provided external market data for compensation benchmarks to the Board Compensation Committee for review. This was for the CEO in the Richmond, Virginia office.