efil	e GR	APHIC print - DO NOT PROCESS As Filed Data -		DL	N: 93493321099544						
	99	Return of Organization Exempt From	Income <sup>-</sup>	Tax	OMB No 1545-0047						
Form	コフ		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private								
Denetin		foundations)			2013						
•		generally cannot redact the information on the	form	aw, the IK.	Open to Public Inspection						
		▶ Information about Form 990 and its instructions is at <u>www.IRS.gov</u>	•								
		2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31 pplicable C Name of organization DELITE INTERNATIONAL	-2013	D Employe	r identification number						
	lress ch	RELIEF INTERNATIONAL		95-4300							
— Nar	ne cha	Doing Business As nge		55 4500	0002						
— Inıt	ıal retu	rn Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telephone	number						
— Ter	minate										
Am	ended			(323)93	32-7888						
— Арр	lication	LOS ANGELES, CA 90036 n pending		<b>G</b> Gross rece	eipts \$ 26,954,196						
		F Name and address of principal officer	<b>H(a)</b> Is th	ıs a group re	turn for						
		NANCY WILSON 5455 WILSHIRE BLVD	subo	rdınates?	🔽 Yes 🔽 No						
		LOS ANGELES, CA 90036	H(b) Area	all subordına	tes ┌Yes┌No						
r Ta	x-exem	npt status 🔽 501(c)(3) 🔽 501(c)() ◀ (Insert no) 🔽 4947(a)(1) or 🔽 527	INCLU If "N		list (see instructions)						
		:► WWW RI ORG	_								
			H(c) Grou	ip exemptior	n number 🕨						
	n of or <u>g</u> rt I	ganization 🔽 Corporation 🗍 Trust 🦳 Association 🗍 Other 🕨	L Year of fo	rmation 1990	M State of legal domicile CA						
		Briefly describe the organization's mission or most significant activities									
sovemance	- - - 2 (	Check this box 崎 if the organization discontinued its operations or disposed of	more than 2	25% of its ne	et assets						
	- - - 2 (				et assets						
	- - 2 ( 3	Check this box I if the organization discontinued its operations or disposed of Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)		· L	1						
	- - 2 ( 3   4	Number of voting members of the governing body (Part VI, line 1a)	· · · ·	·	3 9						
	- - 2 ( 3   4   5 <sup>-</sup> 6 <sup>-</sup>	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	· · · · · · · · · · · ·	·   · ·   · ·	3 9 4 9 5 166 6 65						
	- - 2 ( 3   4   5 <sup>-</sup> 6 <sup>-</sup> 7a <sup>-</sup>	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12	   	· · ·	3     9       4     9       5     166       6     65       7a     0						
	- - 2 ( 3   4   5 <sup>-</sup> 6 <sup>-</sup> 7a <sup>-</sup>	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	· · · ·		3						
	- - 2 ( 3   4   5 <sup>-</sup> 6 <sup>-</sup> 7a <sup>-</sup>	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	· · · ·	· · ·	3     9       4     9       5     166       6     65       7a     0       7b     0       Current Year						
ACTIVITIES &	- - - 2 ( 4   5 <sup>-</sup> 6 <sup>-</sup> 7a <sup>-</sup> <i>7</i> a <sup>-</sup>	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12	· · · ·		3						
ACUMIES &	- - - 2 ( 3   4   5 <sup>-</sup> 7a <sup>-</sup> 7a <sup>-</sup> 7a <sup>-</sup>	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary)	· · · ·	• • • • • • • • • • • • • • • • • • •	3						
	- 2 ( 3   4   5 - 7a - 7a - 8 9 10 11	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d ) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	    	• • • • • • • • • • • • • • • • • • •	3						
ACTIVITIES &	- - - - - - - - - - - - - - - - - - -	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d ) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	    	• • • • • • • • • • • • • • • • • • •	3     9       4     9       5     166       6     65       7a     0       7b     0       Current Year       4     23,068,938       5     3,829,780       8     3,953       0     0						
Activities &	- 2 ( 3   4   5 - 7a - 7a - 8 9 10 11	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d ) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	    	• • • • • • • • • • • • • • • • • • •	3     3       4     3       5     166       6     65       7a     0       7b     0       Current Year       4     23,068,938       5     3,829,780       8     3,953       0     0       1     26,902,671						
ACTIVITIES &	- - - 2 ( 3   4   5 - 6 - 7a - 7a - 8 9 10 11 12	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Program service revenue (Part VIII, line 1h) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	    	• • • • • • • • • • • • • • • • • • •	3     3       4     3       5     166       6     65       7a     0       7b     0       Current Year       4     23,068,938       5     3,829,780       8     3,953       0     0       1     26,902,671						
Revenue Activities &	- - - - - - - - - - - - - - - - - - -	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Investment income (Part VIII, column (A), lines 3, 4, and 7d )	    	• • • • • • • • • • • • • • • • • • •	3						
Revenue Activities &	- 2 ( 3   4   5 - 6 - 7a - 7a - 8 9 10 11 12 13 14	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	    		3						
Revenue Activities &	- - - - 2 ( - - - - - - - - - - - - - - - - - - -	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d )	    		3     3       4     3       5     166       6     6       7a     0       7b     0       Current Year       4     23,068,938       5     3,829,780       8     3,953       0     0       1     26,902,671       8     4,678,351       0     0       1     10,861,395						
Activities &	- 2 ( 3   4   5 - 6 - 7a - b   8 9 10 11 12 13 14 15 16a	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	    		3						
Revenue Activities &	- - - - 2 ( 3   4   5 - - 6 - 7a - 7a - 6 - 7a - 7a - 10 11 12 13 14 15 16a b	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Other revenue (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	                   	• • • • • • • • • • • • • • • • • • •	3       3       3         4       3       3         5       166         6       6       6         7a       0       0         7b       Current Year       4         4       23,068,938       3,953         5       3,829,780       8         8       3,953       0         1       26,902,671       8         8       4,678,351       0         0       0       0         1       10,861,395       0         0       0       0         1       10,861,395       0         8       13,761,431       7         2       9,301,177       2						
Expenses Revenue Activities &	- - - - - - - - - - - - - - - - - - -	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Contributions and grants (Part VIII, line 1h)	            		3						
Expenses Revenue Activities &	- 2 ( 3   4   5 - 7a - 6 - 7a - 7a - 10 11 12 13 14 15 16a b 17 18	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Other revenue (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	            	• • • • • • • • • • • • • • • • • • •	3						
Expenses Revenue Activities &	- 2 ( 3   4   5 - 7a - 6 - 7a - 7a - 10 11 12 13 14 15 16a b 17 18	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Other revenue (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	            	• • • • • • • • • • • • • • • • • • •	3						
	- 2 ( 3   4   5 - 6 - 7a - b   7a - b   7a - 10   11   12   13   14   15   16a   b   17   18   19	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) . Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	            		3         9           4         9           5         166           6         6           7a         0           7b         0           Current Year         4           4         23,068,938           5         3,829,780           8         3,953           0         0           1         26,902,671           8         4,678,351           0         0           1         10,861,395           0         0           1         10,861,395           0         0           29,301,177         6           6         -2,398,506           End of Year         6           6         16,813,066						

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

	**	***					
Sign	SI	gnature of officer					
Here	STEVEN HANSCH TREASURER						
	📕 Ту	pe or print name and title					
Daid		Print/Type preparer's name Nicole Bencik	Preparer's signature				
Paid Prepare	Firm's name FCROWE HORWATH						
Use Onl		Firm's address > 400 CAPITOL MALL SUITE 1400 SACRAMENTO, CA 958144434					

May the IRS discuss this return with the preparer shown above? (see instructio

Form	990 (2	013)								Page <b>2</b>
Part			f Program Servi ule O contains a resp			s Part III .				<b>.</b>
1			ganızatıon's mission							· · ·
DEVE IS SO RELIE CHILI GROU	LOPM LELY I FINT DREN, PS AN	ENT ASSISTAN DEDICATED TO ERNATIONAL'S VICTIMS OF NA ID CASES - PR(	S A HUMANITARIA CE, AND PROGRAM REDUCING HUMA MISSION IS TO ATURAL DISASTER OVIDE HOLISTIC, I ONG-TERM DEVEL	I SERVICES T N SUFFERINC SERVE THE N S & CIVIL CC MULTI-SECT	TO VULNERABL G AND IS NON- NEEDS OF THE I ONFLICTS, AND ORAL, SUSTAIN	E COMMUNIT POLITICAL AI MOST VULNEF THE POOR, W NABLE, AND P	IES WORLDWID ND NON-SECTA RABLE - PARTIC VITH A SPECIFI RO-POOR PROC	E RELIEFIN RIAN IN ITS ULARLY WO C FOCUS ON GRAMS THA	NTERNATIO 5 MISSION MEN AND N NEGLECT	DNAL
	the pri	or Form 990 or 9	ndertake any signific 990-EZ? se new services on S				vere not listed or	ſ	- Yes 🔽 N	ło
3	Did the	-	ease conducting, or r		nt changes ın ho	wit conducts,	any program		TYes 🔽 N	No
	If "Yes	s," describe thes	e changes on Sched	ule O						
	expens	ses Section 501	tion's program servic L(c)(3) and 501(c)(4 d revenue, if any, for	) organization	is are required to	o report the am				
4a	(Code		) (Expenses \$	11,878,628	including grants o	of \$ 2	,893,300 ) (Revenue	2 \$	)	
	WORLI EMERC OPERA	DWIDE WITH THE PR GENCY SITUATIONS, TING CLINICS AND	SANITATION RELIEF IN ROVISION OF FOOD RATI RELIEF INTERNATIONAL' TRAINING HEALTH WORK ESS TO CLEAN WATER, DI	ONS, CLEAN WAT S FIELD TEAMS P ERS RELIEF INT	ER, NON-FOOD ITEI ROVIDE LONG TERM ERNATIONAL ALSO F	MS, TRANSITIONAI I HEALTH AND NUT PROVIDES WATER	L SHELTER AND EME TRITION SERVICES T AND SANITATION PR	RGENCY MEDIC O COMMUNITIE OGRAMMING, P	AL SERVICES S IN NEED BY ROVIDING	BEYOND
	(Code		) (Expenses \$	8,633,485	including grants of	of ¢	323,424 ) (Revenue	<u>، د</u>	3,829,780)	
-	LIVELI FACILI RESUL TO SU	HOODS AND ENTERP TATES THIS PROCES T OF THESE EFFORT PPORT THEIR FAMIL	PRISE FINDING NEW OR SS BY PROVIDING VOCATI TS, FARMERS IN SENEGAI IES THESE PROGRAMS A ADDITIONAL RESOURCES	BETTER WORK I IONAL TRAINING, L CAN GET THEIR RE AIMED AT LO	S THE MOST DIRECT OFFERING MICROF CROPS TO MARKET NG-TERM, RELIABLE	F PATH OUT OF PO INANCE OPPORTU F BEFORE THEY SF	OVERTY FOR FAMILIE INITIES, AND DEVELO POIL AND WOMEN IN	S IN NEED REL PING PROMISII AFGHANISTAN	IEF INTERNAT NG VALUE CHA CAN EARN AN	INS AS A INCOME
4c	(Code		) (Expenses \$	2,129,450	including grants of	of \$	459,293 ) (Revenue	e \$	)	
	FOOD CLIMA COMM RELIEF	AND AGRICULTURE TE CHANGE, NATUR/ UNITIES' KNOWLED( INTERNATIONAL EN	RELIEF INTERNATIONAL AL RESOURCE MANAGEM GE OF SOUND AGRICULTU MPOWERS FARMERS HOW E RESULT IS COMMUNITI	ENT, AND CONSE JRAL METHODS S V TO DIVERSIFY Y	ERVATION PRINCIPLE SUITABLE TO THE RE VIABLE CROPS, MAK	es into projects Gional Landsca E the best use o	S THAT IMPROVE GLO PE, CULTURAL NEED OF THE LOCAL GROW	DBAL FOOD SEC S, AND ENVIRO ING SEASON, A	URITY BY INC NMENT CONCE	CREASING ERNS,
	(Code		) (Expenses \$	1,986,430	including grants of	of \$	841,646 ) (Revenue	<u>ج</u>	)	
	EDUCA A SIGN INCLU FURNI	ATION AND EMPOWE NIFICANT FOCUS ON DE A WIDE RANGE C TURE TO UNDER-RE	RMENT EDUCATION IS V THIS SECTOR TO ENSUR OF ACTIVITIES TEACHER ESOURCED SCHOOLS, AN IP TRAINING TO BECOME	VITAL TO THE SO RE THAT CHILDRE TRAINING PROG D PROMOTING E	CIAL AND ECONOMIC EN AFFECTED BY CO RAMS, BUILDING LIF QUAL ACCESS TO EE	C INTEGRATION O NFLICT CAN CONT BRARIES AND INTE DUCATION THESE	F FUTURE GENERAT TINUE TO PURSUE T ERNET CENTERS, PR PROGRAMS ALSO EM	IONS RELIEF IN HEIR EDUCATIO OVIDING BOOKS	N PROGRAMS	5 ООМ
	(Code		) (Expenses \$	442,474	including grants of	of ¢	160,688 ) (Revenue	<u>، د</u>		
	PROTE IS ON RESOL ENCOU	CTION AND HUMAN THE FOREFRONT OF UTION THE RESULT JRAGES DEMOCRATI NATIONAL'S PROGRA	RIGHTS MILLIONS OF IN IMPLEMENTING PROGRA IS PROGRAMMING THAT IC GOVERNANCE THE RI- AMS RELIEF INTERNATIO FRABLE AND UNDER-REPF	NDIVIDUALS WOR AMS TO PROTECT PROVIDES LEGA GHTS OF WOMEN NAL'S APPROACH	LDWIDE FACE DISC AND SUPPORT THE L-ASSISTANCE, FIG AND GIRLS IS A CF TO CIVIL SOCIETY	RIMINATION, PER SE INDIVIDUALS A TS TRAFFICKING RITICAL ISSUE IN T	SECUTION, AND EVE AND ENCOURAGE PE IN PERSONS, PROM THIS SECTOR, AND I	N VIOLENCE RI ACE THROUGH I OTES MEDIA AN S INCORPORATI	NONVIOLENT C ID JOURNALISI ED IN MANY O	CONFLICT M, AND F RELIEF
	(Code		) (Expenses \$	47,452	including grants of	of \$	) (Revenue	\$	)	
	SHELT PROVI IRRIG/ THEY HELP N	ER AND INFRASTRUG DES FOR TEMPORAR ATION CANALS, AND CAN PARTICIPATE IN MAKE HOMES SAFER	CTURE WHEN NATURAL RY AND PERMANENT SHEI COMMUNITY CENTERS I N THE CONSTRUCTION PF AND MORE COMFORTAB THE NEED TO GATHER FL	DISASTERS DEST LTER RELIEF INT N IMPOVERISHEL ROCESS, CREATI LE BY PROMOTIN	FROY HOUSING OR ( TERNATIONAL ALSO ( COMMUNITIES RE NG LIVELIHOOD OPP	CONFLICT FORCES CONTRIBUTES TO LIEF INTERNATION ORTUNITIES FOR	S FAMILIES TO FLEE LOCAL INFRASTRUC NAL SUPPORTS TRAI COMMUNITY MEMBE	THEIR HOMES, I TURE BY BUILDI NING FOR LOCA RS COMPLEME	RELIEF INTERN ING SCHOOLS, IL RESIDENTS NTARY PROGR	SO THAT
4d	Othe	r program servic	es (Describe in Sche	edule O )						
	(Expe	enses \$	2,476,356 inc	ludıng grants	of\$	1,002,334 )(F	Revenue \$		)	

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? $\ldots$ .	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		No
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	Yes	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔒 🧏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 📆	35b	Yes	
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		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Form **990** (2013)

Form	990 (2013)			Page <b>5</b>
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u>	<u> </u>	<u>.</u>
15	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable <b>1a</b> 40		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable <b>1b</b> 0	_		
		4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2Ь	Yes	
Зa	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	Зb		
<b>4</b> a	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	Yes	
Ь	AF, AJ, BG, BM, EG, GH, GV, HA, HU, IZ, KE, LE, NP, If "Yes," enter the name of the foreign country NG, PK, RP, SG, SO, SU, TU, UG, YM, OC	-		
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	<u> </u>		<u> </u>
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
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 receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided? $\ldots$ . $\ldots$	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	<b>7</b> f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a b	Initiation fees and capital contributions included on Part VIII, line 12       10a         Gross receipts, included on Form 990, Part VIII, line 12, for public use of club       10b	-		
	facilities	]		
11	Section 501(c)(12) organizations. Enter			
a L	Gross income from members or shareholders	-		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	-		
	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	12a		
	year	-		
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans <b>13b</b>	_		
	Enter the amount of reserves on hand	ļ		
	Did the organization receive any payments for indoor tanning services during the tax year? $\ldots$ $\ldots$ .	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7L "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chang See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI	•		<b>.</b>
Se	ction A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	76 75		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а		8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	<i>e.</i> )
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
.1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
.4	Did the organization have a written document retention and destruction policy?	14	Yes	
.5	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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	O ther officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 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 with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
.7	List the States with which a copy of this Form 990 is required to be filed►CA			
.8	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply Own website Another's website V upon request Other (explain in Schedule O)			

19	Describe in Schedule O whether (and if so,	how) the o	rganization	made its o	overnina	documents.	conflict of
	interest policy, and financial statements av		-	-	-	,	

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization >LES RUBIN 5455 WILSHIRE BLVD

LOSANGELES,CA 90036 (323)932-7888

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . . . . . . . . . . . . .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

• List all of the organization's current key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	<b>(B)</b> A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other compensation
	for related organızatıons below dotted lıne)	Individual trustee or director	Institutional Trustee	Officei	Ke; emplo;ee	Highest compensited employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organızatıon and related organızatıons
(1) FARSHAD RASTEGAR	60 00	x		x				137,175	0	12,286
PRESIDENT & CEO (PARTIAL YEAR)								,		
(2) GEOFF BELL	40 00	х		x				0	0	75,000
BOARD MEMBER & INTERIM CEO (3) STEVEN HANSCH	5 00									
TREASURER	5.00	х		х				0	0	0
(4) CHIP DUNCAN	1 00									
BOARD MEMBER (PARTIAL YEAR)		Х						0	0	0
(5) CHIP LEVENGOOD	10 00	x						0	0	0
BOARD MEMBER		^						0	0	0
(6) DEBORAH SENIOR	2 00	x						0	0	0
BOARD MEMBER (PARTIAL YEAR)										_
(7) ELLEN FROST BOARD MEMBER	1 00	х						0	0	0
(8) HERNANDO GARZON BOARD MEMBER (PARTIAL YEAR)	2 00	x						0	0	0
(9) IRENE WURTZEL BOARD MEMBER	2 00	x						0	0	0
(10) JIM MOODY BOARD MEMBER	1 00	x						0	0	0
(11) JOHN GAGE	1 00	x						0	0	0
BOARD MEMBER (12) KEITH ALLMAN	1 00					$\left  \right $				
BOARD MEMBER	100	х						0	0	0
(13) LEON IRISH	1 00									
BOARD MEMBER		х						0	0	0
(14) SARA ABBASI	2 00	x						0	0	0
BOARD MEMBER (PARTIAL YEAR)		^							0	
(15) SIMON GOODALL BOARD MEMBER (PARTIAL YEAR)	1 00	х						0	0	0
(16) ADAM KOONS	60 00									
SVP OF INTERNATIONAL PROGRAMS						×		122,587	0	3,534
(17) ANN KOONTZ	60 00					x		128,555	0	10,416
SVP OF SOCIAL ENTERPRISE								120,333		
										Form <b>990</b> (2013)

## Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	<b>(B)</b> A verage hours per week (list any hours	more pers	than on is	one bot	not bo: bo: th a	chec x, unle n offic rustee	ess er	<b>(D)</b> Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estin amount compe fror	<b>F)</b> mated of other nsation n the
		for related organızatıons below dotted lıne)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensate employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	andr	ızatıon elated zatıons
(10)							ê					
	ELIA MAKAR	60 00					x		111,362		0	13,468
	PRESIDENT OF HUMAN RESOURCEES ESLIE RUBIN	60 00										
		80.00					x		104,439		0	12,708
	FINANCIAL OFFICER SEAN CANTELLA	60 00										
• •	OF PART						x		107,096		o	0
	OF FART											
						-						
1b	Sub-Total						•				•	
с	Total from continuation sheets to Part	VII, Section A					►					
d	Total (add lines 1b and 1c)		-				►		711,214	0		127,412
2	Total number of individuals (including b \$100,000 of reportable compensation f				ed al	bov	e) who	rec	eıved more than			
											Yes	No
3	Did the organization list any former offic			e, key	y em	nplo	yee, o	r hıg	ihest compensate	d employee		
	on line 1a? If "Yes," complete Schedule J			•	•	•	• •	• •		•••	3	No
4	For any individual listed on line 1a, is the organization and related organizations of									om the		
	individual	, eater tridil ֆ1			, es	э, с •	•	•				No
5	Did any person listed on line 1a receive	or accrue com	pensat	tion fi	rom	anv	unrel	ated	l organization or ir		-	
	services rendered to the organization? .									· · ·   s	5	No
										L	•	- <u> </u>
	ection B. Independent Contracto											
1	Complete this table for your five highes compensation from the organization Re											r
		(A)			2010		. yeur	unu		(B)	(	C)
	Name and business address         Description of services           O'MELVENY & MYERS LLP 400 SOUTH HOPE STREET 18TH FLOOR LOS ANGELES CA 90071         LEGAL SERVICE							on of services	Comp	ansation 301,389		
	AN ROSENBERG & FREEDMAN 4550 MONTGOMER								AUDIT/ACCOUNT	ING	1	203,423
	NELL LESLIE 725 SOUTH FIGUEROA STREET31ST F								LEGAL SERVICE			151,156
	Total number of independent contractors	(including but					liater			make then	+	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►3

Form 99								Page <b>9</b>
Part V	/1111	Statement o			a in this Dart VIII			-
			<u>ile O contains a respon</u>		(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
60 M	1a	Federated camp	baigns 1a					
unt	Ь	Membershıp du	es <b>1b</b>					
й Ю	с	Fundraising eve	ents 1c					
ΓA,	d	- Related organız						
ija Gi	e	Government grants		21,538,222				
Sin's								
utio ier	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> t included above	1,530,716				
<u>ē</u> Đ	g	Noncash contributio 1a-1f \$	ons included in lines	919,049				
Contributions, Gifts, Grants and Other Similar Amounts	h	<b>Total.</b> Add lines	s1a-1f		23,068,938			
				₽ Business Code				
nue	2a	LOAN INTEREST		900099	2,072,476	2,072,476		
Program Service Revenue	ь	PROGRAM INCOME		900099	1,140,996	1,140,996		
	с				0	, ,		
яrи	d				0			
ð E	е		_		0			
Progran	f	All other progra	m service revenue		616,308	616,308	0	0
	g	<b>Total.</b> Add lines	;2a-2f	►	3,829,780			
	3	Investment inc	ome (ıncludıng dıvıdenc	ls, interest,	3,953			3,953
	4		ar amounts) tment of tax-exempt bond p		0			3,933
	4 5	Royalties			0			
			(I) Real	(II) Personal				
	6a	Gross rents	51,525					
	b	Less rental expenses	51,525					
	с	Rental income or (loss)	0	0				
	d	. ,	me or (loss)		0			
			(I) Securities	(11) Other				
	7a	Gross amount from sales of assets other than inventory						
	b	Less cost or other basis and						
	c	sales expenses Gaın or (loss)	0	0				
	d		s)		0			
Iue	8a	Gross income fi events (not incl \$	rom fundraısıng					
Other Revenue			reported on line 1c) e 18 a					
thei	Ь	Less directex	penses b					
õ	с	Net income or (	loss) from fundraising e	events 🕨	0			
	9a	Gross income fi See Part IV , lin	rom gamıng actıvıtıes e 19 <b>a</b>					
	Ь	Less direct exp	penses b					
	с	Net income or (	loss) from gaming activ	/ities 🕨	0			
	10a	Gross sales of returns and allo	wances .					
	L		a					
	b		oods sold b	entory ►	0			
		Miscellaneous		Business Code				
	11a				0			
	Ь				0			
	с				0			
	d	All other revenu	Je		0	0	0	0
	e	<b>Total.</b> Add lines	11a-11d	· · · 🕨	0			
	12	Total revenue.	See Instructions	· · · •	26,902,671	3,829,780	0	3,953

Part IX Statement of Functional Expenses

Sectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	lete column (A)						
Check if Schedule O contains a response or note to any line in this Part IX										
	ot include amounts reported on lines 6b, 9, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,447,092	1,447,092							
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0								
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	3,231,259	3,231,259							
4	Benefits paid to or for members	0								
5	Compensation of current officers, directors, trustees, and key employees	224,461	29,892	179,623	14,946					
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								
7	Other salaries and wages	9,032,001	7,309,223	1,661,238	61,540					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	153,773	115,149	38,122	502					
9	Other employee benefits	1,052,603	888,438	161,607	2,558					
10	Payroll taxes	398,557	259,828	133,257	5,472					
11	Fees for services (non-employees)									
а	Management	0								
b	Legal	737,025	131,824	603,497	1,704					
с	Accounting	368,192	163,082	203,578	1,532					
d	Lobbying	0								
е	Professional fundraising services See Part IV, line 17	0								
f	Investment management fees	0								
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	4 200 522	1 102 100	110.070	c 100					
10	Schedule O)	1,300,533	1,183,100	110,973	6,460					
12	Advertising and promotion	64,490	61,975	1,180	1,335					
13	Office expenses	637,881	589,446	46,122	2,313					
14 15	Information technology	0								
15	Royalties	-	1 012 251	202.410	17 720					
16 17	Occupancy	1,323,398	1,013,251	292,419	17,728					
18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	1,378,986	1,195,185	181,672	2,129					
19	Conferences, conventions, and meetings	0								
20		52,660	8,403	40,052	4,205					
21	Payments to affiliates	0	0,105	10,032	1,205					
22	Depreciation, depletion, and amortization	6,581	6,581							
23	Insurance	355,701	297,035	58,666						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)									
а	PROJECTS	5,928,992	5,868,212	60,780						
b	BAD DEBT EXPENSE	300,859	283,815	17,044						
с	VEHICLE & EQUIPMENT	618,432	557,609	60,622	201					
d	OTHER OPERATING	434,946	316,488	, 99,852	18,606					
е	All other expenses	252,755	161,032	90,921	802					
25	Total functional expenses. Add lines 1 through 24e	29,301,177	25,117,919	4,041,225	142,033					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ┌ if following SOP 98-2 (ASC 958-720)	0								
				Fo	rm <b>990</b> (2013)					

		check in Schedule of contains a response of note to any line in th	mo i are,			-	
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing		•	75,849		5,142
	2	Savings and temporary cash investments			2,833,384	2	4,306,379
	3	Pledges and grants receivable, net		1,800,013	_	1,988,223	
	4	Accounts receivable, net		•	3,121,369	-	1,575,690
	5	Loans and other receivables from current and former officers, di	trustees kev	0, 121,000		1,010,000	
		employees, and highest compensated employees. Complete Pa Schedule L	0	5	0		
ts	6	Loans and other receivables from other disqualified persons (as section 4958(f)(1)), persons described in section 4958(c)(3)(E employers and sponsoring organizations of section 501(c)(9) v beneficiary organizations (see instructions) Complete Part II of	3), and co oluntary	ontributing employees'			
Assets	_				0	-	0
As	7	Notes and loans receivable, net			9,437,283	-	7,584,059
-	8	Inventories for sale or use			79,654		59,845
	9	Prepaid expenses and deferred charges	т т.	•	128,091	9	176,193
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	672,490			
	b	Less accumulated depreciation	10b	614,147	40,269	<b>10</b> c	58,343
	11	Investments—publicly traded securities		•	11,171	11	15,510
	12	Investments—other securities See Part IV, line 11	• •		0	12	0
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets				14	
	15	Other assets See Part IV , line 11		•	1,807,793	15	1,043,682
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	<u></u>		19,334,876	16	16,813,066
	17	Accounts payable and accrued expenses		•	3,331,699	17	2,116,876
	18	Grants payable				18	
	19	Deferred revenue				19	1,987,831
	20	Tax-exempt bond liabilities				20	
Ś	21	Escrow or custodial account liability Complete Part IV of Sche	dule D			21	
ilities	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi		ees,			
Liabi		persons Complete Part II of Schedule L		•	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	5		1,396,686	23	1,574,101
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Par	t X of Sc	hedule			
		D			1,117,242		39,725
	26	Total liabilities. Add lines 17 through 25			5,845,627	26	5,718,533
ces		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	and co	mplete			
lan	27	Unrestricted net assets		•	1,723,441	27	3,614,054
Ba	28	Temporarily restricted net assets	• •	•	11,765,808	28	7,480,479
pu	29	Permanently restricted net assets	• •	•		29	
Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere 🕨 🦵	and			
20	30	Capital stock or trust principal, or current funds				30	
set	31	Paid-in or capital surplus, or land, building or equipment fund				31	
As	32	Retained earnings, endowment, accumulated income, or other fu	unds			32	
Net	33	Total net assets or fund balances			13,489,249	33	11,094,533
Z	34	Total liabilities and net assets/fund balances			19,334,876	34	16,813,066
							Form <b>990</b> (2013)

Form	990	(201	3)
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Par	<b>t XI</b> Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		26.9	902,671
2	Total expenses (must equal Part IX, column (A ), line 25)	_			
3	Revenue less expenses Subtract line 2 from line 1	2		29,.	301,177
5		3		-2,3	398,506
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A ))	4		13,4	489,249
5	Net unrealized gains (losses) on investments	_			
6	Donated services and use of facilities	5			3,790
Ū		6			
7	Investment expenses	7			
8	Prior period adjustments	_			
9	Other changes in net assets or fund balances (explain in Schedule O)	8			
3		9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		11 (	094,533
Par	t XII Financial Statements and Reporting			,	
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990  Cash 🔽 Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	irate			
	🔽 Separate basis 🔰 Consolidated basis 👘 Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

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(For	m 990	or 990EZ		nplete if the organiz	ation is a sec nonex	ction 501(c)( empt charita	ble trust.	ion or a sect	ion 4947(a)(	(1)	2	01	3
Treas		of the enue Service		<ul> <li>Attach to I</li> <li>Informatio</li> </ul>	n about Sche		n 990 or 990-			is at		n to P spect	ublic ion
		he organiza	ation				<u></u> .		Employer i	ident if ic	ation n	umber	I.
RELIE	F INTER	RNATIONAL							05 42006				
Da	rt I	Peaco	n for Du	blic Charity Sta	tus (All or	anizations	must com	alata this n	95-43006		one		
				te foundation becaus						<u>isti ucti</u>	5115.		
1	Г			ion of churches, or a									
2	, L			d in section 170(b)(1					//-//-//-//-//-/				
3	Ē			perative hospital se				n 170(b)(1)	(A)(iii).				
4	, L			h organization operat	_					1)(A)(ii	i).Ente	r the	
	,	hospital'	s name, c	ity, and state	-		-				-		
5	Γ	An orgar	nization op	erated for the benefi	t of a college	e or universit	y owned or o	perated by a	a government	tal unit d	lescribe	ed in	
		section 1	L70(b)(1)(	( <b>A)(iv).</b> (Complete P	art II )								
6	Γ	A federa	l, state, or	local government o	r government	tal unit desc	rıbed ın <b>secti</b>	on 170(b)(1	)(A)(v).				
7 8	되 기	describe	d in <b>sectic</b>	at normally receives on 170(b)(1)(A)(vi). : described in <b>sectior</b>	(Complete F	Part II )			ntal unit or fi	rom the (	general	public	:
9	, L		-	at normally receives			-	-	utions mem	harchini	foos an	daros	e e
5	,			vities related to its e									13
				oss investment inco									
			-	ganization after June				•		cuxynon	n basin.		
10	Г			ganized and operated									
11	Ē	An orgar one or m the box t	nization or ore public hat descr	ganized and operated ly supported organiz ibes the type of supp	d exclusively ations descr porting organ	for the bene ibed in secti ization and c	efit of, to perf on 509(a)(1 complete line	orm the fund ) or section s 11e throu	e functions of, or to carry out the purposes of stion 509(a)(2) See <b>section 509(a)(3).</b> Check				
e f	Γ	other that section !	an foundat 509(a)(2) ganization	ion managers and ot	her than one	rganization is not controlled directly or indirectly by one or more disqualified persons r than one or more publicly supported organizations described in section 509(a)(1) or ermination from the IRS that it is a Type I, Type II, or Type III supporting organization,							
g		Since Au	ugust 17, 2	2006, has the organ	ization accep	oted any gift	or contributi	on from any	ofthe				,
			persons? son who d	rectly or indirectly o	ontrols eith	er alone or t	ogether with	nersons des	cribed in (ii)			Yes	No
				governing body of th					senbed in (ii)		11g(i)	103	
				er of a person descr							<u>s(i)</u> 11g(ii)		
				lled entity of a perso			above?			-	11g(iii)		
h		• •		ng information about		., .,				L			<u> </u>
(i) Name of supported organization		rted	organization		ationorganization inthe organizationbed oncol (i) listed inin col (i) of yourb aboveyour governingsupport?ectiondocument?			(vi) Is f organizati col (i) org in the U	ion in anized			etary	
				instructions))	Yes	No	Yes	No	Yes	No			
Tota	ıl												

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

_	edule A (Form 990 or 990-EZ) 201	or Organizatio	ons Described	in Sections 1	70(b)(1)(A)(i	v) and	170(b)	Page 2 (1)(A)(vi)
	(Complete only if you Part III. If the organiz	checked the bo ation fails to gi	ox on line 5, 7, o Jalify under the f	or 8 of Part I or tests listed belo	ow, please com	tion fail plete Pa	ed to qu art III.)	alify under
S	ection A. Public Support				,			
Cal	endar year (or fiscal year beginning	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2	013	(f) Total
1	in) <b>&gt;</b> Gifts, grants, contributions, and							
-	membership fees received (Do	26,634,24	7 36,114,034	29,643,609	20,961,884	23	,068,938	136,422,712
	not include any "unusual	20,001,21	,	2370 137003	20,501,001		,000,500	100,122,712
2	grants ") Tax revenues levied for the							
-	organization's benefit and either							0
	paid to or expended on its							Ŭ
3	behalf The value of services or facilities							
5	furnished by a governmental unit							0
	to the organization without							Ŭ
4	charge <b>Total.</b> Add lines 1 through 3	26,634,24	7 36,114,034	29,643,609	20,961,884	23	,068,938	136,422,712
5	The portion of total contributions	20,031,21	, 30,111,031	23,013,003	20,501,001	23	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	130,122,712
•	by each person (other than a							
	governmental unit or publicly							1,336,340
	supported organization) included on line 1 that exceeds 2% of the							1,550,540
	amount shown on line 11, column							
_	(f) Ballis summert Culture the F							
6	Public support . Subtract line 5 from line 4							135,086,372
s	ection B. Total Support	-	11	I				
Cal	endar year (or fiscal year	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 20	013	(f) Total
7	beginning in) 🕨	26,634,247	36,114,034	29,643,609	20,961,884		,068,938	136,422,712
7 8	Amounts from line 4 Gross income from interest,	20,034,247	30,114,034	29,043,009	20,901,004	23	,000,930	130,422,712
0	dividends, payments received on							
	securities loans, rents, royalties	17,987	23,916	12,178	3,415		55,478	112,974
	and income from similar sources							
9	Net income from unrelated							
	business activities, whether or							0
	not the business is regularly carried on							
10	Other income Do not include							
	gain or loss from the sale of	0	8,873	13,728	0		о	22,601
	capıtal assets (Explaın ın Part IV )		,	,				,
11	Total support (Add lines 7							126 550 207
	through 10)							136,558,287
12	Gross receipts from related activi					12		16,473,151
13	<b>First five years.</b> If the Form 990 is							
s	this box and stop here ection C. Computation of Pu			<u></u>				· · · · · · · ·
14	Public support percentage for 201			11, column (f))		14		98 920 %
15	Public support percentage for 201	2 Schedule A, Pa	irt II, line 14			15		99 610 %
16a	<b>33</b> 1/3% support test-2013. If the			on line 13, and li	ne 14 is 33 1/3%		check th	
	and stop here. The organization qu	ualifies as a public	cly supported organ	nization				
b	33 1/3% support test-2012. If the				and line 15 is 33	1/3 <b>% or</b>	more, che	
17a	box and stop here. The organization 10%-facts-and-circumstances tes				e 13, 16a. or 16h	o, and lin	e 14	
	is 10% or more, and if the organiz	ation meets the "	facts-and-circums	tances" test, che	ck this box and <b>s</b>	top here	. Explain	
	in Part IV how the organization me	eets the "facts-ar	id-circumstances"	test The organiz	zation qualifies as	a public	ly suppor	
b	organization 10%-facts-and-circumstances tes	t—2012. If the ord	anization did not c	heck a box on lin	e 13,16a,16b o	or 17a a	nd line	▶
5	15 is 10% or more, and if the orga	anization meets th	ne "facts-and-cırcı	ımstances" test,	check this box ar	nd stop h	iere.	
	Explain in Part IV how the organiz	ation meets the "	facts-and-cırcums	tances" test The	e organızatıon qua	llífies as	a publicly	
	supported organization							▶

supported organization
 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

▶□

Part	Support Schedule for Organizations Described in Section 509(a)(2)
	Support Schedule for Siguilizations Beschibed in Section Sos(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under

<ul> <li>alendar year (o</li> <li>Gifts, grant membershi include any</li> <li>Gross rece merchandis performed, any activity organizatio purpose</li> <li>Gross rece are not an u</li> <li>business ui</li> <li>Tax revenu organizatio paid to or e</li> <li>behalf</li> <li>The value of furnished b</li> <li>the organiz</li> <li>Total. Add</li> <li>Ta A mounts in received frod disqualified the greater amount on c Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. T</li> <li>alendar year (o</li> <li>9 A mounts fr</li> <li>Gross inco dividends, securities 1</li> <li>Net income business a in line 10b, business is</li> <li>Other income gain or loss capital ass IV )</li> <li>Total support</li> </ul>	Public Support (or fiscal year beginning in) ▶ ants, contributions, and ship fees received (Do not any "unusual grants ") ceipts from admissions, dise sold or services ad, or facilities furnished in	1				mplete Part II.	)
<ol> <li>Gifts, grant membershi include any</li> <li>Gross rece merchandis performed, any activity organizatio purpose</li> <li>Gross rece are not an u business ui</li> <li>Tax revenu organizatio paid to or e behalf</li> <li>The value of furnished b the organiz</li> <li>Total. Add</li> <li>A mounts in received fro disqualified the greater amount on c Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. T alendar year (o</li> <li>A mounts fr</li> <li>Gross inco dividends, securities 1</li> <li>Net income business a in line 10b, business is capital ass IV )</li> <li>Total support</li> </ol>	in) ► ants, contributions, and ship fees received (Do not any "unusual grants ") ceipts from admissions, dise sold or services				1	1	
<ol> <li>Gifts, grant membershi include any Gross rece merchandis performed, any activity organizatio purpose</li> <li>Gross rece are not and business uit</li> <li>Tax revenu organizatio paid to or e behalf</li> <li>The value of furnished b the organizatio</li> <li>Total. Add</li> <li>A mounts in received fro disqualified the greater amount on c Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. T alendar year (o</li> <li>A mounts fr and income sources</li> <li>Unrelated B income (les from busine June 30, 10 c Add lines 1</li> <li>Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV )</li> <li>Total support</li> </ol>	ants, contributions, and ship fees received (Do not any "unusual grants") ceipts from admissions, dise sold or services	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
<ul> <li>Include any Gross rece merchandis performed, any activity organizatio purpose</li> <li>Gross rece are not an u business uit</li> <li>Tax revenu organizatio paid to or e behalf</li> <li>The value of furnished b the organizatio</li> <li>Total. Add</li> <li>A mounts in received fird disqualified the greater amount on</li> <li>A dd lines 7</li> <li>Public supp from line 6</li> <li>Section B. T alendar year (o</li> <li>A mounts fr Gross inco dividends, securities 1</li> <li>A mounts fr and income sources</li> <li>Unrelated b income (les from busine June 30, 10</li> <li>Net income business a in line 10b, business is</li> <li>Other income gain or loss capital ass IV )</li> <li>Total support</li> </ul>	ny "unusual grants ") ceipts from admissions, dise sold or services						
<ul> <li>Gross recemerchandis performed, any activity organizatio purpose</li> <li>Gross recement are not an organizatio purpose</li> <li>Gross recement are not an organizatio paid to or emeters</li> <li>Tax revenu organizatio paid to or emeters</li> <li>The value of furnished bithe organizatio paid to or emeters</li> <li>Total. Add</li> <li>Amounts in received from line 6</li> <li>Section B. T</li> <li>Indiana securities for a Gross inco dividends, securities for and income sources</li> <li>Unrelated bincome (less from busines and lines of line 30, 10</li> <li>Add lines 1</li> <li>Net income sources</li> <li>Other income sources</li> <li>Other income sources</li> <li>Other income sources</li> <li>Net income sources</li> <li>Other incomes sources</li> </ul>	ceipts from admissions, dise sold or services						
merchandis performed, any activity organizatio purpose Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T lendar year (o Amounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV ) <b>Total suppo</b>	dise sold or services						
performed, any activity organizatio purpose Gross rece are not an u business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T lendar year (o D Amounts fr Gross inco dividends, securities I and income sources D Unrelated t income (les from busines June 30, 14 C Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) B Total support							
any activity organizatio purpose Gross rece are not an u business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T lendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines June 30, 14 Add lines 1 Net income business a in line 10 b, business is O ther incol gain or loss capital ass IV ) B Total support	a, or facilities furnished in						
organizatio purpose Gross rece are not an in business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons Amounts in received fro disqualified the greater amount on C Add lines 7 B Public supp from line 6 Section B. T ilendar year (o Amounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) Total support	vity that is related to the						
purpose Gross rece are not an u business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T and income sources D Amounts fr Gross inco dividends, securities and income sources D Unrelated t income (les from busines June 30, 14 c Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) <b>Total suppo</b>	tion's tax-exempt						
<ul> <li>Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf</li> <li>The value of furnished b the organiz</li> <li>Total. Add</li> <li>A mounts in and 3 recei persons</li> <li>A mounts in received fro disqualified the greater amount on</li> <li>C Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. T</li> <li>Idendar year (or a Gross inco dividends, securities i and income sources</li> <li>Unrelated ti income (les from busines june 30, 14</li> <li>Add lines 1</li> <li>Net income business a in line 10b, business is</li> <li>O ther income gain or loss capital ass IV )</li> <li>Total support</li> </ul>							
are not and business un organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recen- persons b Amounts in received fro- disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T and income sources D Amounts fr Gross inco dividends, securities and income sources D Unrelated to income (less from busines June 30, 14 c Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) <b>5 Total suppo</b>	ceipts from activities that						
<ul> <li>Tax revenu organizatio paid to or e behalf</li> <li>The value of furnished b the organiz</li> <li>Total. Add</li> <li>Amounts in and 3 receipersons</li> <li>Amounts in received fro disqualified the greater amount on</li> <li>Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. T</li> <li>Idendar year (or a Gross inco dividends, securities 1 and income sources</li> <li>Unrelated b income (less from busines june 30, 14</li> <li>Add lines 1</li> <li>Net income business a in line 10b, business is</li> <li>Other incol gain or loss capital ass IV )</li> <li>Total support</li> </ul>	n unrelated trade or						
organizatio paid to or e behalf The value of furnished b the organiz Total. Add A mounts in and 3 receipersons A mounts in received fro disqualified the greater amount on C Add lines 7 Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated b income (less from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O Other incol gain or loss capital ass IV ) Total support	under section 513						
paid to or e behalf The value of furnished b the organiz Total. Add A mounts in and 3 receipersons A mounts in received fro disqualified the greater amount on C Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated b income (less from busines June 30, 14 C Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) Total support	nues levied for the						
<ul> <li>behalf</li> <li>The value of furnished by the organiz</li> <li>Total. Add</li> <li>A mounts in and 3 receipersons</li> <li>A mounts in received frod disqualified the greater amount on</li> <li>c Add lines 7</li> <li>Public suppfrom line 6</li> <li>Section B. Talendar year (or a Gross inco dividends, securities land income sources</li> <li>Unrelated by income (less from busines a in line 10b, business a in line 10b, business is 0 ther income gain or loss capital ass IV )</li> <li>Total support of the securities of the se</li></ul>	tion's benefit and either						
<ul> <li>The value of furnished by the organiz</li> <li>Total. Add</li> <li>A mounts in and 3 received from disqualified the greater amount on</li> <li>A dd lines 7</li> <li>Public supp from line 6</li> <li>Section B. Talendar year (or dividends, securities la and income sources</li> <li>Unrelated by income (less from busines and income gain or loss capital ass IV )</li> <li>Total supp</li> <li>Total supp</li> </ul>	r expended on its						
furnished b the organiz <b>5</b> Total. Add 7a Amounts in and 3 recei- persons b Amounts in received fro disqualified the greater amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 Amounts fr a Gross inco dividends, securities a and income sources b Unrelated b income (les from busine June 30, 1 c Add lines 1 Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV ) 3 Total support	e of services or facilities						
the organiz Total. Add A mounts in and 3 recei- persons A mounts in received fro- disqualified the greater amount on C Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr a Gross inco dividends, securities 1 and income sources Unrelated b income (less from busines June 30, 14 C Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) 3 Total support	by a governmental unit to			1			
<ul> <li>Total. Add</li> <li>Amounts in and 3 receipersons</li> <li>Amounts in received fro disqualified the greater amount on</li> <li>Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. T</li> <li>Iendar year (o</li> <li>Amounts fr</li> <li>Gross inco dividends, securities in and income sources</li> <li>Unrelated b income (les from busine June 30, 14</li> <li>Add lines 1</li> <li>Net income business a in line 10b, business is</li> <li>Other incoing gain or loss capital ass IV )</li> <li>Total support</li> </ul>	nization without charge			1			
<ul> <li>A mounts in and 3 receipersons</li> <li>A mounts in received frod disqualified the greater amount on</li> <li>Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. T</li> <li>Idendar year (or</li> <li>A mounts from Gross inco dividends, securities la and income sources</li> <li>Unrelated bincome (less from busines income (less from busines a in line 10b, business a in line 10b, business is</li> <li>O ther income gain or loss capital ass IV )</li> <li>Total support</li> </ul>	Id lines 1 through 5						
and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities I and income sources Unrelated I income (les from busine June 30, 1 c Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV ) B Total support	s included on lines 1, 2,				1		
<ul> <li>Amounts in received froe disqualified the greater amount on</li> <li>Add lines 7</li> <li>Public supp from line 6</li> <li>Section B. Talendar year (or</li> <li>Amounts fra Gross inco dividends, securities la and income (les from busines ources)</li> <li>Unrelated bincome (les from busines and income (les from busines and income sources)</li> <li>Net income (les from busines and income (les from busines and income gine 30, 11)</li> <li>Add lines 1</li> <li>Net income business a in line 10b, business is</li> <li>Other incom gain or loss capital ass IV )</li> <li>Total support</li> </ul>	ceived from disqualified						
received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T alendar year (o D A mounts fr a Gross inco dividends, securities l and income sources D Unrelated H income (les from busine June 30, 19 C Add lines 1 Net income business a in line 10b, business is O Other incol gain or loss capital ass IV ) B Total support							
disqualified the greater amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities l and income sources 9 Unrelated H income (les from busine June 30, 19 c Add lines 1 L Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV ) 3 Total suppo	included on lines 2 and 3			1			
the greater amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities and income sources 9 Unrelated I income (les from busine June 30, 1 c Add lines 1 L Net income business a in line 10b business is 2 Other incol gain or loss capital ass IV ) 3 Total suppo	from other than						
amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities la and income sources 9 Unrelated H income (les from busine June 30, 19 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV ) 3 Total support	ied persons that exceed						
<ul> <li>c Add lines 7</li> <li>8 Public supp from line 6</li> <li>Section B. T</li> <li>alendar year (o</li> <li>A mounts fr</li> <li>a Gross inco dividends, securities li and income sources</li> <li>b Unrelated B income (les from busine June 30, 10</li> <li>c Add lines 1</li> <li>L Net income business a in line 10b, business is</li> <li>c Other income gain or loss capital ass IV )</li> <li>3 Total support</li> </ul>	ter of \$5,000 or 1% of the on line 13 for the year						
B Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities l and income sources Unrelated l income (les from busine June 30, 10 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV ) B Total support							
from line 6 Section B. T alendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated f income (les from busine June 30, 19 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV ) B Total suppo	<b>ipport</b> (Subtract line 7c						
Section B. T alendar year (o A mounts fr Gross inco dividends, securities i and income sources Unrelated I income (les from busine June 30, 10 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV ) Total support							
<ul> <li>A mounts fr</li> <li>A mounts fr</li> <li>Gross incodividends, securities</li> <li>and income sources</li> <li>Unrelated from busine June 30, 14</li> <li>Add lines 1</li> <li>Net income business a in line 10b, business is</li> <li>O ther income gain or loss capital ass IV )</li> <li>Total support</li> </ul>	Total Support	1	•	1	1	•	1
<ul> <li>9 A mounts fr Gross inco dividends, securities l and income sources</li> <li>b Unrelated b income (les from busine June 30, 14</li> <li>c Add lines 1</li> <li>1 Net income business a in line 10b, business is</li> <li>2 O ther incol gain or loss capital ass IV )</li> <li>3 Total support</li> </ul>	(or fiscal year beginning	<b>(a)</b> 2009	<b>(b)</b> 2010	(a) 2011	(d) 2012	(a) 2012	
<ul> <li>a Gross inco dividends, securities l and income sources</li> <li>b Unrelated b income (les from busine June 30, 14</li> <li>c Add lines 1</li> <li>I Net income business a in line 10b, business is</li> <li>2 Other incol gain or loss capital ass IV )</li> <li>3 Total support</li> </ul>	in) 🕨	(a) 2009	<b>(B)</b> 2010	(c) 2011	(d) 2012	(e) 2013	<b>(f)</b> Total
dividends, securities and income sources Unrelated B income (les from busine June 30, 19 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) <b>Total suppo</b>	s from line 6						
securities and income sources Unrelated to income (les from busine June 30, 1 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV ) <b>Total supp</b>	come from interest,						
and income sources Unrelated b income (les from busine June 30, 14 Add lines 1 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) <b>3 Total suppo</b>	s, payments received on						
sources Unrelated b income (less from busine June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV ) 3 Total support	es loans, rents, royalties						
<ul> <li>b Unrelated b income (less from busine June 30, 14</li> <li>c Add lines 1</li> <li>1 Net income business a in line 10b, business is</li> <li>2 Other incol gain or loss capital ass IV )</li> <li>3 Total support</li> </ul>	me from similar						
income (les from busine June 30, 19 Add lines 1 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) <b>3 Total supp</b>	d business taxable						
from busine June 30, 1 Add lines 1 Net income business a in line 10b business is Other incol gain or loss capital ass IV ) <b>Total supp</b>	less section 511 taxes)						
June 30, 14 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total suppo	inesses acquired after						
<ol> <li>Net income business a in line 10b, business is</li> <li>Other incol gain or loss capital ass IV )</li> <li>Total support</li> </ol>							
business a in line 10b, business is 0 Other incol gain or loss capital ass IV ) 3 Total suppo	s 10a and 10b						
In line 10b, business is O ther incol gain or loss capital ass IV ) <b>3 Total supp</b>	me from unrelated						
business is O ther incol gain or loss capital ass IV ) <b>3 Total supp</b>	s activities not included						
2 Other Incol gain or loss capital ass IV) 3 Total suppo	Ob, whether or not the						
gaın or loss capıtal ass IV) <b>3 Total supp</b>	s is regularly carried on						
capital ass IV) 3 Total suppo	come Do not include						
IV) 3 Total suppo	oss from the sale of ssets (Explain in Part						
B Total suppo							
11, and 12	port. (Add lines 9, 10c,						
		for the organızatı	on's fırst, second	, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	12) <b>years.</b> If the Form 990 is f						▶
	12) 2 <b>years.</b> If the Form 990 is f is box and <b>stop here</b>			10 1 (0)		- I - I	
Public supp	12) years. If the Form 990 is f is box and stop here Computation of Publ	(line 8, column (	f) divided by line	13, column (f))		15	
Public supp	12) 2 <b>years.</b> If the Form 990 is f is box and <b>stop here</b>		art III, lıne 15			16	
Section D. C	12) years. If the Form 990 is f is box and stop here Computation of Publ	.2 Schedule A, P		ae			
	12) <b>years.</b> If the Form 990 is f is box and <b>stop here</b> <b>Computation of Publ</b> ipport percentage for 2013		me Percenta		(	17	
	12) <b>e years.</b> If the Form 990 is f is box and <b>stop here</b> <b>Computation of Publ</b> upport percentage for 2013 upport percentage from 201	estment Inco			ın (f))	1 1/ 1	
	12) <b>e years.</b> If the Form 990 is f is box and <b>stop here</b> <b>Computation of Publ</b> upport percentage for 2013 upport percentage from 201 <b>Computation of Inve</b> ent income percentage for 2	estment Inco 2013 (line 10c, c	olumn (f) dıvıded	by line 13, colum	in (f))		
	12) <b>e years.</b> If the Form 990 is f is box and <b>stop here</b> <b>Computation of Publ</b> upport percentage for 2013 upport percentage from 201 <b>Computation of Inve</b> ent income percentage for 2 ent income percentage from	<b>estment Inco</b> 2013 (line 10c, ca n <b>2012</b> Schedule	olumn (f) dıvıded A, Part III, lıne 1	by line 13, colum 7		18	
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2 ent income percentage from support tests—2013. If the	estment Inco 2013 (line 10c, co n 2012 Schedule organization did	olumn (f) divided A , Part III , line 1 not check the bo	by line 13, colum 7 x on line 14, and	line 15 is more t	<b>18</b> han 33 1/3%, and	
IS not more	12) <b>e years.</b> If the Form 990 is f is box and <b>stop here</b> <b>Computation of Publ</b> upport percentage for 2013 upport percentage from 201 <b>Computation of Inve</b> ent income percentage for 2 ent income percentage from	estment Inco 2013 (line 10c, co n 2012 Schedule organization did and stop here. Th	olumn (f) divided A , Part III , line 1 not check the bo e organization qu	by line 13, colum 7 x on line 14, and alifies as a public	line 15 is more t cly supported org	<b>18</b> han 33 1/3%, and anization	►

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

Facts And Circumstances Test							
Return Reference	Explanation						
Schedule A, Part II, Line 10, Other Income	DESCRIPTION - MISC INCOME, COLUMN A - , COLUMN B - 8873, COLUMN C - 13728, COLUMN D - , COLUMN E - , COLUMN F - 22601,						

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC	print - DO NOT PROCESS As F	iled Data -		D	LN: 93493321099544
<b>CHEDULE D</b> Form 990)			al Statements		омв № 1545-0047 <b>2013</b>
			ered "Yes," to Form 990 2, 11d, 11e, 11f, 12a, or :		2013
epartment of the Treasury	🕨 Attach to Form 990. 🕨 See separate	instructions. 🕨	Information about Sche		
emal Revenue Service		tions is at <u>www</u>	<u>irs.gov/form990</u> .		Inspection
Name of the organ RELIEF INTERNATIONA				Employer id	entification number
				95-430066	
	nizations Maintaining Donor Adv zation answered "Yes" to Form 990			unds or Acc	counts. Complete if th
organi			or advised funds	<b>(b)</b> Fun	ds and other accounts
Total number a	at end of year				
Aggregate con	tributions to (during year)				
Aggregate gra	nts from (durıng year)				
Aggregate valu	ue at end of year				
	zation inform all donors and donor advision of the second structure of the second second second second second s			nor advised	∏Yes ∏No
used only for c conferring imp	zation inform all grantees, donors, and d charitable purposes and not for the bene ermissible private benefit?	fit of the donor o	r donor advisor, or for a	ny other purpo	∏Yes ∏No
art II Conse	ervation Easements. Complete if	the organizat	ion answered "Yes" t	o Form 990,	Part IV, line 7.
Preservati	conservation easements held by the org on of land for public use (e g , recreation of natural habitat			-	nportant land area 1c structure
	on of open space				
	s 2a through 2d if the organization held a he last day of the tax year	a qualified conse	ervation contribution in f		onservation d at the End of the Year
Total number	of conservation easements			2a	a at the End of the Year
	restricted by conservation easements			2b	
-	nservation easements on a certified histo	oric structure in	cluded in (a)	2c	
Number of con	nservation easements included in (c) acc sure listed in the National Register			2d	
	nservation easements modified, transferi 	red, released, ex	tinguished, or terminate	ed by the organ	nization during
Number of sta	tes where property subject to conservat	ion easement is	located 🕨		
	nızatıon have a written policy regardıng f the conservation easements it holds?	the periodic mor	nitoring, inspection, han	dlıng of vıolatıc	ons, and <b>Ves No</b>
Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enfor	cıng conservatıon easer	ments during th	ne year
•	penses incurred in monitoring, inspecting	g, and enforcing	conservation easement	s during the ye	ar
	nservation easement reported on line 2( 70(h)(4)(B)(II)?	d) above satisfy	the requirements of sec	ction 170(h)(4	)(B)(I) <b>ΓYes ΓΝα</b>
balance sheet	lescribe how the organization reports co , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the			
	nizations Maintaining Collection			or Other Si	milar Assets.
	lete if the organization answered "Y ition elected, as permitted under SFAS 1			nue statement	and balance sheet
works of art, h	istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for publi	c exhibition, education,	or research ın	
works of art, h	ition elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for publi			
(i) <sub>Revenues</sub>	included in Form 990, Part VIII, line 1			•	\$
(ii) Assets inc	luded in Form 990, Part X			<b>•</b> 9	
If the organiza	ation received or held works of art, histor unts required to be reported under SFAS			or financial gai	
Revenues incl	uded in Form 990, Part VIII, line 1			•	\$
<b>b</b> Assets include	ed ın Form 990, Part X			<b>►</b> 9	5

For Paperwork Reduction Act Notice	

Sche	edule D (Form 990) 2013									Page <b>2</b>
Par	<b>1111</b> Organizations Maintaining Collections of A	rt, His	tori	cal Tre	easur	es, or Othe	er Simila	r Asse	<b>ts</b> (cc	ntinued)
3	Using the organization's acquisition, accession, and other rec collection items (check all that apply)	ords, ch	neck	any of th	e follo	wing that are	a sıgnıfıcan	t use of	ıts	
а	F Public exhibition	d	Γ	Loan o	rexch	ange program	s			
b	☐ Scholarly research	е	Γ	Other						
с	Preservation for future generations									
4	Provide a description of the organization's collections and exp Part XIII	plaın hov	w the	y further	the or	ganızatıon's e	xempt purp	ose in		
5	During the year, did the organization solicit or receive donatic assets to be sold to raise funds rather than to be maintained a						mılar	L .	Yes	∏ No
Par	rt IV Escrow and Custodial Arrangements. Com					answered "	Yes" to Fo	rm 990	),	
1a	Part IV, line 9, or reported an amount on Form Is the organization an agent, trustee, custodian or other inter included on Form 990, Part X?					r other assets	not	 ب	Yes	<b>∏</b> No
b	If "Yes," explain the arrangement in Part XIII and complete t	he follov	wing t	able						
								Amou	Int	
С	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					<b>1</b> f				
2a	Did the organization include an amount on Form 990, Part X, I	line 21?						L .	Yes	
b	If "Yes," explain the arrangement in Part XIII Check here if t								· • •	ļ
Ра	rt V Endowment Funds. Complete if the organizat									<u> </u>
1-	(a)Current year	(b)	)Prior	year L	<b>o (c)</b> ⊺w	o years back (d	)Three years	back (e)	)Four ye	ears back
1а ь	Beginning of year balance							<u> </u>		
Ь								<u> </u>		
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current year end bala	ance (lin	ne 1 a	. column	(a)) h	eld as				
- a	Board designated or quasi-endowment ►			, corunn	(4))					
b	Permanent endowment									
с	Temporarily restricted endowment <b>&gt;</b> The percentages in lines 2a, 2b, and 2c should equal 100%									
3a	Are there endowment funds not in the possession of the organ organization by	nization	that a	are held	and ad	lmınıstered fo	r the	ļ	Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		<u> </u>
	If "Yes" to 3a(II), are the related organizations listed as requi				• •			3b		
4	Describe in Part XIII the intended uses of the organization's					1 1 / 1 1 -	<b>E</b>		<u></u>	
Pai	<b>rt VI</b> Land, Buildings, and Equipment. Complete 11a. See Form 990, Part X, line 10.	if the o	rgan	ization	answ	ered Yes to	) Form 99	J, Part	1V, III	ıe
	Description of property			a) Cost or sıs (ınvest		(b)Cost or othe basis (other)	r <b>(c)</b> Accur deprec		(d) B	ook value
1a	Land		+		0				1	0
	Buildings				0				1	0
	Leasehold improvements				0				1	0
	Equipment					672,49	0	614,147	<u> </u>	58,343

e Other .

. . . . . . . . . . . . . .

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

chedule [	) (Form	990)	) 2013

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58,343

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Schedule D (Form 990) 2013 Part VII Investments—Other Securities. Com	plete if the organization	answered 'Yes' to Forr	Page <b>3</b> n 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	<b>(c)</b> Method of va Cost or end-of-year n	luation
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )         Part VIIII         Investments—Program Related. Co	mplete if the organization		rm 990 Dart IV line 11c
See Form 990, Part X, line 13.	Inplete il the organizatio	in answered tes to for	
(a) Description of investment	(b) Book value	(c) Method of val	
		Cost or end-of-year n	harket value
	•		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )         Part IX       Other Assets.       Complete if the organization		0 Part IV line 11d See F	orm 990 Part X line 15
(a) Descri			(b) Book value
(1) SECURITY DEPOSITS			269,569
(2) DUE FROM RELIEF INTERNATIONAL-UK			774,113
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)		1,043,682
Part X Other Liabilities. Complete if the orga		•••••••••••••••••••••••••••••••••••••	
Form 990, Part X, line 25.		, ,	
1 (a) Description of liability	(b) Book value	ļ	
Federal Income taxes	0		
PAYROLL TAXES	39,725	-	
		1	
		1	
		4	
		1	

39,725 2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

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**Total.** (Column (b) must equal Form 990, Part X, col (B) line 25)

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Schedule D (Form 990) 2013	Schedule	D (Form	990)2013
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Par	<b>t XI</b> Reconciliation of Revenue per Audited Financial Statements With Rev the organization answered 'Yes' to Form 990, Part IV, line 12a.	enue p	er Re	<b>eturn</b> Complete ıf
1	Total revenue, gains, and other support per audited financial statements		1	26,954,196
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	ĺ		
а	Net unrealized gains on investments			
b	Donated services and use of facilities	51,525		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII )	0		
е	Add lines <b>2a</b> through <b>2d</b>		2e	51,525
3	Subtract line <b>2e</b> from line <b>1</b>	[	3	26,902,671
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII)	0		
с	Add lines <b>4a</b> and <b>4b</b>		4c	0
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)		5	26,902,671
Part	t XII Reconciliation of Expenses per Audited Financial Statements With Ex If the organization answered 'Yes' to Form 990, Part IV, line 12a.	penses	per	Return. Complete
1	Total expenses and losses per audited financial statements	•	1	29,352,702
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities			
b	Prior year adjustments	51,525		
С	Other losses			
d	Other (Describe in Part XIII )	0		
е	Add lines <b>2a</b> through <b>2d</b>		2e	51,525
3	Subtract line <b>2e</b> from line <b>1</b>		3	29,301,177
4	Amounts included on Form 990, Part IX, line 25, but not on line <b>1:</b>			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII )	0		
с	Add lines <b>4a</b> and <b>4b</b>		4c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)		5	29,301,177
Par	t XIII Supplemental Information			
Part	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1 t V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete thi rmation			le any additional

Return Reference	Explanation
Schedule D, Part X, Line 2, FIN 48 (ASC 740) footnote	

Part XIII Supplemental Information (continued)					
Return Reference	Explanation				

Schedule D (Form 990) 2013

efile GRAPHIC print	- DO NOT PROCESS	As Filed Dat	ta -	DLN:	93493321099544		
SCHEDULE F (Form 990)	Statement of Activities Outside the United States						
	► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.						
Department of the Treasury Internal Revenue Service	Information about Schedule F (Form 990) and its instructions is at www.irs.dov/torm990.						
Name of the organization RELIEF INTERNATIONA	L			Employer ident	ification number		
	nformation on Activi rm 990, Part IV, line 14		ne United States. Co	omplete if the organiz	zation answered		
other assistance,	Does the organization the grantees' eligibility ts or assistance?	for the grants o	r assistance, and the s	election criteria used	nd F Yes F No		
	Describe in Part V the the United States.	organızatıon's pi	rocedures for monitori	ng the use of its gran	ts and other		
3 Activites per Region	ר (The following Part I, lin	e 3 table can be du	uplicated if additional spa	ice is needed )			
( <b>a)</b> Region	(b) Number ( offices in the region		(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region			
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continuat to Part I		02 1.051			27.421.422		
c Totals (add lines 3a		93 1,051	•		27,421,183		

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Schedule F (Form 990) 2013

Page **2** 

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	( <b>b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> A mount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
<b>(1)</b> See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
( 10)								
(11)								
( 12)								
(13)								
(14)								
( 15)								
(15)								
(18)								
2 Enter total nun tax-exempt by	nber of recipier the IRS, or for	nt organizations lis r which the grante	ted above that are r e or counsel has pro	ecognized as charit vided a section 501	ies by the foreign co .(c)(3) equivalency	ountry, recognized letter	as 	23
3 Enter total nur	nber of other o	rganızatıons or en	tıtıes					0
							Schedule F	(Form 990) 2013

Schedule F (Form 990) 2013

Page **3** 10

Part III Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	If the organization a	nswered "Yes" to Form	990, Part IV, line 16.
Part III can be (a) Type of grant or assistance	duplicated if additio (b) Region	nal space is no (c) Number of recipients	eeded. (d) A mount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> A mount of non-cash assistance	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1) DONATED FOOD AND RELIEF COMMODITIES		453,698				MEDICAL SUPPLIES AND FOOD COMMODITIES	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2013

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

Schedule F (Form 990) 2013

#### Part V Supplemental Information

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

Return Reference	Explanation
Schedule F, Part I, Line 2, Procedures for monitoring	1 NO SUB-GRANTS WILL BE DISBURSED UNLESS IT IS A PART OF THE AGREEMENT
use of grant funds	BETWEEN RELIEF INT ERNATIONAL AND A DONOR 2 THE SUB-GRANT WILL BE AWARDED BASED ON RELIEF INTERNATIONAL'S P
	ROCUREMENT POLICIES MANUAL TO THE MOST SUCCESSFUL BIDDER WHO HAS THE MOST ADVANTAGEOUS OFF
	ER TO RI, PRICE AND OTHER FACTORS WILL BE CONSIDERED IN RESPONSE TO A COMPETITIVE SOLICITA
	TION 3 SUB-GRANTEE'S OVERHEADS (ICR) RATE, IF ANY EXCEEDS THE RATE PROVIDED BY THE PRIME
	DONOR AGREEMENT 4 ALTHOUGH VARIOUS PROJECTS DIFFER IN TERMS OF FORMATTING AND INTERVENT
	IONS, THE RULES AND REGULATIONS OF RELIEF INTERNATIONAL AND THE DONOR WILL REMAIN THE SAME
	5 TO ASSIST WITH LOCAL RELIEF AND DEVELOPMENT ACTIVITIES RELIEF INTERNATIONAL GIVES PRE
	FERENCE TO LOCAL NGO'S IN THE SELECTION OF SUB-GRANTEES 6 RELIEF INTERNATIONAL PROVIDES
	ASSISTANCE TO THE SUB-GRANTEE IN THEIR ACTIVITIES TO ENSURE THAT THE SUB-GRANTEE IS MEETIN
	G THEIR CONTRACTUAL OBLIGATIONS TO THE DONOR 7 RELIEF INTERNATIONAL ASSURES THAT THE SUB
	-GRANTEE'S ACTIVITIES CONFORM TO THE MAIN OBJECTIVES AND OUTPUTS OF THE PROJECT 8 RELIEF
	INTERNATIONAL MONITORS THE PROJECT IMPLEMENTATION FOR COMPLIANCE WITH THE REQUIREMENTS AN
	D REGULATIONS OF THE SUB-GRANT AGREEMENT WITH REGARD TO PERSONNEL, PROCUREMENT, MARKETING,
	REPORTING, FINANCIAL PROCEDURES AND CONTROLS, COMMODITY MANAGEMENT AND ASSET CONTROL 9
	IT IS NECESSARY THAT THE SUB-GRANTEE MAINTAINS AND RECONCILES RECORDS TO VERIFY THAT THE C
	OSTS CHARGED TO THE SUB-GRANT AWARD ARE BASED ON THE SUPPORTING DOCUMENTATION 10 RELIEF
	INTERNATIONAL IS RESPONSIBLE FOR PROPERTY AND EQUIPMENT A CQUIRED BY THEIR SUB GRANTEES 11 RELIEF INTERNATIONAL IS RESPONSIBLE FOR OBSERVING THEIR SUB GRANTEE'S
	COMPETITIVE BIDDIN G REQUIREMENTS, IF APPLICABLE, TAGGING AND INVENTORY ING SUCH PROPERTY
	AND EQUIPMENT OF THE IR GRANTEES AND ACCOUNTING FOR THE DISPOSITION OF SUCH PROPERTY AND
	EQUIPMENT 12 SUB-GRA NTEE SENDS TO RELIEF INTERNATIONAL A ONE COPY OF THE MONTHLY EXPENSE
	STATEMENT AND AN IN VOICE BY THE 10TH WORKING DAY OF THE FOLLOWING MONTH B ONE COPY OF A
	MONTHLY PROGRESS RE PORT C WITHIN ONE MONTH AFTER THE COMPLETION DATE OF THE SUB-GRANT,
	THE SUB-GRANTEE SUBM ITS TWO COPIES OF COMPREHENSIVE FINAL EXPENSE AND PROGRESS REPORTS TO
	RELIEF INTERNATIONAL D PROPERTY AND EQUIPMENT REPORT ACQUIRED UNDER THE SUB-GRANT 13
	DURING THE PROJECT PER IOD EVENTS MAY OCCUR THAT CAN HAVE SIGNIFICANT IMPACT UPON THE
	PROGRAM IN SUCH INSTANCES, THE SUB-GRANTEE INFORMS RELIEF INTERNATIONAL AS SOON AS THE FOLLOWING
	TYPES OF CONDITIONS BECOME KNOWN A PROBLEMS, DELAYS OR ADVERSE CONDITIONS THAT WILL
	MATERIALLY AFFECT THE A BILITY TO ATTAIN PROGRAM OBJECTIVES, PREVENT THE MEETING OF TIME
	SCHEDULES AND GOALS THIS DISCLOSURE ACCOMPANIES A STATEMENT OF ACTION TAKEN AND, OR
	CONTEMPLATED, AND ANY RI'S ASS ISTANCE NEEDED TO RESOLVE THE SITUATION B IF ANY PERFORMANCE REVIEW CONDUCTED BY THE SUB
	CONDUCTED BY THE SUB -GRANTEE DISCLOSES THE NEED FOR CHANGES, THE SUB-GRANTEE SUBMITS A DEOLIEST FOR BUIDGET REV(1
	REQUEST FOR BUDGET REVI SION (REALIGNMENT) TO RELIEF INTERNATIONAL NO LATER THAN 3(THREE) MONTHS BEFORE THE PROJEC
	T END

Return Reference	Explanation
Schedule F, Part I, Line 3, Method to account for expenditures on org 's financial statements	MIDDLE EAST AND NORTH AFRICA ACCRUAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL

Return Reference	Explanation
Schedule F, Part II, Line 1, Method used to account for grants on org's financial statements	MIDDLE EAST AND NORTH AFRICA ACCRUAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL

Return Reference	Explanation		
Schedule F, Part I, Line 3, Method to account for expenditures on org 's financial statements	MIDDLE EAST AND NORTH AFRICA ACCRUAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL		

Return Reference	Explanation		
Schedule F, Part II, Line 1, Method used to account for grants on org's financial statements	MIDDLE EAST AND NORTH AFRICA ACCRUAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL		

# Software ID: 13000248 Software Version: 2013v3.1 EIN: 95-4300662 Name: RELIEF INTERNATIONAL

(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 for region
CENTRAL AMERICA AND THE CARIBBEAN	1	1	PROGRAM SERVICES	EMERGENCY RESPONSE, EDUCATION, PROTECTION, ECONOMIC DEVELOPMENT	40,192
EAST ASIA AND THE PACIFIC	7	200	PROGRAM SERVICES	NATURAL RESOURCES/ BIODIVERSITY CONSERVATION, WASH, PROTECTION, HEALTH, LIVELIHOODS, EDUCATION, EMERGENCY RESPONSE	383,251
EUROPE (INCLUDING ICELAND AND GREENLAND)	2	7	PROGRAM SERVICES	ADMINISTRATIVE SERVICES	401,334

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents ın 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 for region
MIDDLE EAST AND NORTH AFRICA	21	358	PROGRAM SERVICES	WATER AND SANITATION, NUTRITION, FOOD SECURITY AND LIVELIHOODS, WOMEN'S EMPOWERMENT, YOUTH EMPOWERMENT, MICROFINANCE, LIVESTOCK SERVICES, EMERGENCY RESPONSE	7,827,397
RUSSIA AND THE NEWLY INDEPENDENT STATES	1	3	PROGRAM SERVICES	MICROFINANCE	426,516
SOUTH ASIA	35	92	PROGRAM SERVICES	SHELTER AND INFRASTRUCTURE, HUMAN RIGHTS AND PROTECTION, HEALTH, LIVESTOCK SERVICES, LIVELIHOODS AND ECONOMIC DEVELOPMENT, FOOD SECURITY	2,508,616

(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 for region
SUB-SAHARAN AFRICA	26	390		HEALTH, WATER AND SANITATION, FOOD SECURITY AND NUTRITION, LIVELIHOODS, LIVESTOCK SERVICES, SHELTER, REFUGEE/RETURNEE SERVICES	13,422,626
MIDDLE EAST AND NORTH AFRICA	0		GRANTS TO RECIPIENTS LOCATED IN REGION		675,645
SOUTH ASIA	0		GRANTS TO RECIPIENTS LOCATED IN REGION		60,334

(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 for region
SUB-SAHARAN AFRICA	0	-	GRANTS TO RECIPIENTS LOCATED IN REGION		1,675,272

#### Form 990 Schedule F Part II - Grants or Entities Outside The United States

Form 990 Schedi			ties Outside The Unit	ied States	1		1	
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	LOCAL NGO PARTNER ASSISTING WASH PROJECT IMPLEMENTATION IN THE JUABOSO DISTRICT OF WESTERN REGION	6,094		0		
		SUB-SAHARAN AFRICA	LOCAL NGO PARTNER ASSISTING WASH PROJECT IMPLEMENTATION IN THE BIA DISTRICT OF WESTERN REGION	34,400	WIRE	0		
		SUB-SAHARAN AFRICA	PROVIDING COMMUNITY LEVEL TECHNICAL ASSISTANCE IN COMMUNITY MOBILIZATION, TRAINING & BEHAVIOUR CHANGE COMMUNICATION ACTIVITIES FOR THE G-WASH PROJECT	55,498	WIRE	0		
		SUB-SAHARAN AFRICA	PROVIDING COMMUNITY LEVEL TECHNICAL ASSISTANCE IN COMMUNITY MOBILIZATION, TRAINING & BEHAVIOUR CHANGE COMMUNICATION ACTIVITIES FOR THE G-WASH PROJECT	10,887	WIRE	0		

#### (b) IRS code (I) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant cash non-cash cash disbursement organization and EIN(If cash grant (book, FMV, assistance assistance applicable) appraisal, other) 135,214 WIRE SUB-SAHARAN MANAGING THE 0 AFRICA PROJECT TRAINING COMPONENT FOR THE YOUTH EMPOWERMENT PROGRAM IN EGYPT 422,682 WIRE SUB-SAHARAN MANAGING THE 0 AFRICA PROJECT TRAINING COMPONENT AND UMBRELLA OF NAYR AND YWB FOR THE YOUTH EMPOWERMENT PROGRAM IN EGYPT 84,911 WIRE SUB-SAHARAN ESTABLISHMENT 0 AFRICA AND MANAGING OF TAMKEEN CENTERS FOR THE YOUTH EMPO WERMENT PROGRAM IN EGYPT SUB-SAHARAN 175,982 WIRE MANAGING MEDIA 0 AFRICA COMPONENT FOR ТНЕ ҮООТН EMPO WERMENT PROGRAM IN EGYPT

#### Form 990 Schedule F Part II - Grants or Entities Outside The United States

Torin 550 Selica	1	1					1	
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			FORMATION OF ANTI TRAFFICKING COMMUNITY COMMITTEE, RESCUE AND REHABILITATION SERVICES FOR TRAFFICKING PERSONS,CREATION OF SUPPORT NETWORK OF AT RISK GROUPS, ANDLIVELIHOODS TRAINING			0		
		AFRICA	IMPLEMENTATION OF TRAINING AND EMPLOYMENT SERVICES FOR WIDOWS IN BAGHDAD	25,728	WIRE	0		
		NORTH AFRICA	IMPLEMENTATION OF TRAINING AND EMPLOYMENT SERVICES FOR WIDOWS IN KIRKUK	24,773	WIRE	0		
		NORTH AFRICA	IMPLEMENTATION OF TRAINING AND EMPLOYMENT SERVICES FOR WIDOWS IN BASRA	73,180	WIRE	0		

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assıstance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		NORTH AFRICA	IMPLEMENTATION OF TRAINING AND EMPLOYMENT SERVICES FOR WIDOWS IN BAGHDAD	63,742	WIRE	0		
		NORTH AFRICA	IMPLEMENTATION OF TRAINING AND EMPLOYMENT SERVICES FOR WIDOWS IN BAGHDAD	35,998	WIRE	0		
		NORTH AFRICA	IMPLEMENTATION OF TRAINING AND EMPLOYMENT SERVICES FOR WIDOWS IN KIRKUK	29,277	WIRE	0		
		NORTH AFRICA	IMPLEMENTATION OF TRAINING AND EMPLOYMENT SERVICES FOR WIDOWS IN SULAIMANIYA	71,695	WIRE	0		

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
		NORTH AFRICA	IMPLEMENTATION OF HUMAN RIGHTS COURSES, CRISIS HOTLINE, ROUND TABLE DISCUSSION, AND LEADERSHIP PROGRAMS	100,355	WIRE	0		
		NORTH AFRICA	MARKETING AND BUSINESS DEVELOPMENT FOR POLITICAL TRAINING ACADEMY	22,857	WIRE	0		
		NORTH AFRICA	EMERGENCY WASH AND PROTECTION ACTIVITIES IN SYRIA	119,623	WIRE	0		
		NORTH AFRICA	EMERGENCY HEALTH ACTIVITIES IN SYRIA	42,438	WIRE	0		

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
		NORTH AFRICA	EMERGENCY WASH AND PROTECTION ACTIVITIES IN SYRIA	91,706	WIRE	0		
		AFRICA	REDUCING MORBIDITY AND MORTALITY IN SOUTH CENTRAL SOMALIA	526,408	WIRE	0		
		AFRICA	REDUCING MORBIDITY AND MORTALITY IN SOUTH CENTRAL SOMALIA	197,468	WIRE	0		

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -				DI	<u>N: 93493321099544-</u>
Schedule I (Form 990)		Grants and Otl Governments ar	nd Individuals i	Form 990, Part IV, line	ates		2013
Department of the Treasury Internal Revenue Service	► Infor	mation about Schedule I	Attach to Form 9 • Form 990) and its inst		<u>gov /form990</u> .		Open to Public Inspection
Name of the organization RELIEF INTERNATIONAL						<b>Employer ident</b> 95-4300662	fication number
Part I General Inform	nation on Grants	s and Assistance				95-4300662	
<ol> <li>Does the organization main the selection criteria used</li> <li>Describe in Part IV the or</li> <li>Part II Grants and Oth Form 990, Part IV</li> </ol>	I to award the grants ganization's procedu <b>Ter Assistance t</b> o	orassistance?	e of grant funds in the Organizations in	United States the United States.	Complete if the	organization answere	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	<b>(e)</b> A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ADVENTIST DEVELOPMENT AND RELIEF AGENCY 12501 OLD COLUMBIA PIKE SILVER SPRING, MD 20904	52-1314847	501(C)(3)	605,192	0			ASSIST IN THE IMPLEMENTATION OF WATER & SANITATION ACTIVITIES
(2) WINROCK INTERNATIONAL 2101 RIVERFRONT DRIVE LITTLE ROCK,AR 72202	71-0603560	501(C)(3)	628,647	0			ASSIST IN THE IMPLEMENTATION OF WATER & SANITATION ACTIVITIES
(3)INOVATION FOR POVERTY ACTION (IPA) 1731 CONNECTICUT AVE 4TH FLOOR WASHINGTON,DC 20009	06-1660068	501(C)(3)	60,126	0			EVALUATION OF THE FLEXIBLE RAIN WATER STORAGE DEVICES AS PART OF THE DOMESTIC RAIN WATER HARVESTING LEARNING & PILOT PROGRAM IN UGANDA
(4) SAFE WATER NETWORK 10 SAUGATUCK AVENUE WESTPORT,CT 06880	51-0570455	501(C)(3)	90,00	0			ASSIST IN THE IMPLEMENTATION OF WATER & SANITATION ACTIVITIES
(5) KIVA 875 HOWARD ST SUIE 340 SANFRANSISCO,CA 94103	71-0992446	501(C)(3)	63,122	0			DEVELOPING AN SME LENDING PLATFORM POSTING WLIFT PROGRAM LOANS TO THEIR INTERNET LENDING PLATFORM
<ul> <li>2 Enter total number of sect</li> <li>3 Enter total number of othe</li> </ul>						· · · · <b>&gt;</b>	<u> </u>
For Paperwork Reduction Act Notic	ce, see the Instruction	ns for Form 990.		Cat No 50055P		Se	hedule I (Form 990) 2013

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

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

<b>(a)</b> Type of grant or assistance	(b)Number of recipients	<b>(c)</b> A mount of cash grant	( <b>d)</b> A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
		ormation required in Pa	art I, line 2, Part III, col	lumn (b), and any other a	dditional information.
	xplanation				
Procedures for monitoring use of grant funds	HE SUB-GRANT WILL BE AW, DDER WHO HAS THE MOST OMPETITIVE SOLICITATIO GREEMENT 4 ALTHOUGH V RELIEF INTERNATIONAL GIV COVIDES ASSISTANCE TO T ONTRACTUAL OBLIGATION HE MAIN OBJECTIVES AND OMPLIANCE WITH THE REQ COUREMENT, MARKETING, IT IS NECESSARY THAT TH B-GRANT AWARD ARE BAS ND EQUIPMENT ACQUIRED CANTEE'S COMPETITIVE BI THEIR GRANTEES AND AC CLIEF INTERNATIONAL A COLOWING MONTH B ONE C DE-GRANT, THE SUB-GRANT TERNATIONAL D PROPER AY OCCUR THAT CAN HAVE TERNATIONAL AS SOON A ONDITIONS THAT WILL MAT CHEDULES AND GOALS THI SSISTANCE NEEDED TO RES HE NEED FOR CHANGES, TH OLATER THAN 3(THREE) MO	ARDED BASED ON RELIE ADVANTAGEOUS OFFEI N 3 SUB-GRANTEE'S O ARIOUS PROJECTS DIF AND THE DONOR WILL R ES PREFERENCE TO LOO THE SUB-GRANTEE IN TH S TO THE DONOR 7 RE OUTPUTS OF THE PROJI UIREMENTS AND REGUL REPORTING, FINANCIA IE SUB-GRANTEE MAINT ED ON THE SUPPORTIN BY THEIR SUB GRANTEE DDING REQUIREMENTS COUNTING FOR THE DI DNE COPY OF THE MON COPY OF A MONTHLY PR TE SUBMITS TWO COPI TY AND EQUIPMENT RELIS S THE FOLLOWING TYPE TERIALLY AFFECT THE A S DISCLOSURE ACCOM SOLVE THE SITUATION E SUB-GRANTEE SUBMIT	F INTERNATIONAL'S PRO R TO RI, PRICE AND OTH VERHEADS (ICR) RATE, I FER IN TERMS OF FORMA EMAIN THE SAME 5 TO CAL NGO'S IN THE SELEC HEIR ACTIVITIES TO ENS LIEF INTERNATIONAL AS ECT 8 RELIEF INTERNAT ATIONS OF THE SUB-GR L PROCEDURES AND CO TAINS AND RECONCILES G DOCUMENTATION 10 ES 11 RELIEF INTERNAT , IF APPLICABLE, TAGGIN SPOSITION OF SUCH PR THLY EXPENSE STATEME ROGRESS REPORT C WIT ES OF COMPREHENSIVE PORT ACQUIRED UNDER UPON THE PROGRAM IN ES OF CONDITIONS BECO ABILITY TO ATTAIN PRO B IF ANY PERFORMANC TS A REQUEST FOR BUDO DJECT END	DCUREMENT POLICIES MAN ER FACTORS WILL BE CONS F ANY EXCEEDS THE RATE F TTING AND INTERVENTION ASSIST WITH LOCAL RELIE TION OF SUB-GRANTEES & SURE THAT THE SUB-GRAN SSURES THAT THE SUB-GRAN TONAL MONITORS THE PRO ANT AGREEMENT WITH REC NTROLS, COMMODITY MAN RECORDS TO VERIFY THAT RELIEF INTERNATIONAL IS IONAL IS RESPONSIBLE FO NG AND INVENTORYING SU OPERTY AND EQUIPMENT NT AND AN INVOICE BY TH THIN ONE MONTH AFTER TH FINAL EXPENSE AND PROG THE SUB-GRANT 13 DURIN I SUCH INSTANCES, THE SUD OME KNOWN A PROBLEMS, GRAM OBJECTIVES, PREVEN F ACTION TAKEN AND, OR E REVIEW CONDUCTED BY	TEE IS MEETING THEIR ANTEE'S ACTIVITIES CONFORM TO DJECT IMPLEMENTATION FOR GARD TO PERSONNEL, AGEMENT AND ASSET CONTROL THE COSTS CHARGED TO THE S RESPONSIBLE FOR PROPERTY OR OBSERVING THEIR SUB CH PROPERTY AND EQUIPMENT 12 SUB-GRANTEE SENDS TO IE 10TH WORKING DAY OF THE RESS REPORTS TO RELIEF IG THE PROJECT PERIOD EVENTS IB-GRANTEE INFORMS RELIEF DELAYS OR ADVERSE NT THE MEETING OF TIME CONTEMPLATED, AND ANY RI'S THE SUB-GRANTEE DISCLOSES INT) TO RELIEF INTERNATIONAL
Purpose of grant or assistance PL	2	POVERTY ACTION (IPA	),06-1660068 EVALUAT	ION OF THE FLEXIBLE RAIN	Schedule I (Form 990) 2013

efile GRAPHI	C print -	DO I	NOT PR	OCESS	As Filed I	Data -				DLN	: 9349	3321	099544
Schedule L Form 990 or 990	0-EZ)		_	► C on Form 9	omplete if th 90, Part IV, li	e organization	6, 27, 28a, 28b		1			201	-
epartment of the Treasury nternal Revenue Service											Open to Public Inspection		
Name of the organization Employer ider								er ident	ificatio	n numb	er		
	ONAL							g	5-430	0662			
Part I Exce												4.0.1	
	e of disquali					n disqualified	e 25a or 25b, (c) Desc						rrected?
		-		pers	son and organ	Ization						Yes	No
1) FARSHAD RA	ASTAGAR		0	FFICER			SEE PART V						No
													-
2 Enter the ar	mount of ta	x incu	urred by c	organization	n managers o	disqualified p	ersons during t	he year	under	section	1	0	-
4958	· · · ·	•	• • •		• • •			• •	• •	<b>F</b> \$			
		-			-		tion	• •		▶ \$		0	
Part II Loa Com	ans to an nplete if the	nd/or e orga porte hip	r From	Interest answered " unt on Forr (d) Loa	t <b>ed Person</b> Yes" on Form <u>m 990, Part X</u> n to the	s.	V, line 38a, or 2	Form 9				or if the	ritten ment?
Part III Loa Com orga (a) Name of Interested	ans to an mplete if the anization re (b) Relationsl with	nd/or e orga porte hip	r From Inization a d an amo (c) Purpose o	Interest answered " unt on Forr (d) Loa of or from organiza	ted Person Yes" on Form <u>990, Part X</u> n to the tion?	<b>S.</b> 990-EZ, Part , line 5, 6, or 2 ( <b>e)</b> Original principal	V , line 38a, or 2 ( <b>f)</b> Balance	Form 9 (g) In defaul	t?	rt IV, lı ( <b>h</b> ) Approv by board or commit	red	or if the (i)W agree	ritten ment?
Part III Loa Com orga (a) Name of Interested	ans to an mplete if the anization re (b) Relationsl with	nd/or e orga porte hip	r From Inization a d an amo (c) Purpose o	Interest answered " unt on Forr (d) Loa of or from	t <b>ed Person</b> Yes" on Form <u>m 990, Part X</u> n to the	<b>S.</b> 990-EZ, Part , line 5, 6, or 2 ( <b>e)</b> Original principal	V , line 38a, or 2 ( <b>f)</b> Balance	Form 9 (g) In		nt IV , li (h) Approv by board or	ed	or if the	ritten
Part II Loa Con orga (a) Name of Interested	ans to an mplete if the anization re (b) Relationsl with	nd/or e orga porte hip	r From Inization a d an amo (c) Purpose o	Interest answered " unt on Forr (d) Loa of or from organiza	ted Person Yes" on Form <u>990, Part X</u> n to the tion?	<b>S.</b> 990-EZ, Part , line 5, 6, or 2 ( <b>e)</b> Original principal	V , line 38a, or 2 ( <b>f)</b> Balance	Form 9 (g) In defaul	t?	rt IV, lı ( <b>h</b> ) Approv by board or commit	red	or if the (i)W agree	ritten ment?
Part II Loa Con orga (a) Name of Interested	ans to an mplete if the anization re (b) Relationsl with	nd/or e orga porte hip	r From Inization a d an amo (c) Purpose o	Interest answered " unt on Forr (d) Loa of or from organiza	ted Person Yes" on Form <u>990, Part X</u> n to the tion?	<b>S.</b> 990-EZ, Part , line 5, 6, or 2 ( <b>e)</b> Original principal	V , line 38a, or 2 ( <b>f)</b> Balance	Form 9 (g) In defaul	t?	rt IV, lı ( <b>h</b> ) Approv by board or commit	red	or if the (i)W agree	ritten ment?
Part III Loa Con orga (a) Name of Interested	ans to an mplete if the anization re (b) Relationsl with	nd/or e orga porte hip	r From Inization a d an amo (c) Purpose o	Interest answered " unt on Forr (d) Loa of or from organiza	ted Person Yes" on Form <u>990, Part X</u> n to the tion?	<b>S.</b> 990-EZ, Part , line 5, 6, or 2 ( <b>e)</b> Original principal	V , line 38a, or 2 ( <b>f)</b> Balance	Form 9 (g) In defaul	t?	rt IV, lı ( <b>h</b> ) Approv by board or commit	red	or if the (i)W agree	ritten ment?
Part III Loa Com orga (a) Name of Interested	ans to an mplete if the anization re (b) Relationsl with	nd/or e orga porte hip	r From Inization a d an amo (c) Purpose o	Interest answered " unt on Forr (d) Loa of or from organiza	ted Person Yes" on Form <u>990, Part X</u> n to the tion?	<b>S.</b> 990-EZ, Part , line 5, 6, or 2 ( <b>e)</b> Original principal	V , line 38a, or 2 ( <b>f)</b> Balance	Form 9 (g) In defaul	t?	rt IV, lı ( <b>h</b> ) Approv by board or commit	red	or if the (i)W agree	ritten ment?
Part III Loa Con orga (a) Name of Interested person	ans to an mplete if the anization re (b) Relationsl with	nd/or e orga porte hip	r From Inization a d an amo (c) Purpose o	Interest answered " unt on Forr (d) Loa of or from organiza	ted Person Yes" on Form <u>990, Part X</u> n to the tion?	<b>S.</b> 990-EZ, Part , line 5, 6, or 2 ( <b>e)</b> Original principal	V , line 38a, or 2 ( <b>f)</b> Balance	Form 9 (g) In defaul	t?	rt IV, lı ( <b>h</b> ) Approv by board or commit	red	or if the (i)W agree	ritten ment?
Part III Loa Com orga (a) Name of Interested person Cotal Fotal Part III Gra	ans to an mplete if the anization re (b) Relationsl with organizati	ad/or e orga porter hip F on	r From inization a d an amo (c) Purpose o loan b s ance Be	Interest answered " unt on Forr (d) Loa or from organiza To To enefittin	ted Person Yes" on Form <u>990, Part X</u> n to the tion? From	s. 990-EZ, Part , line 5, 6, or 2 (e)Original principal amount	V , line 38a, or 2 (f)Balance due	Form 9 (g) In defaul Yes	t?	rt IV, lı ( <b>h</b> ) Approv by board or commit	red	or if the (i)W agree	ritten ment?
Part III Loa Com orga (a) Name of Interested person Cotal Cotal Cotal Cotal	ans to an mplete if the anization re (b) Relationsl with organizati	ad/or e orga portes hip F on on ssist	r From Inization a d an amo (c) Purpose o loan ban sance Be ganizati Relations rested pe	Interest answered " unt on Forr (d) Loa or from organiza To To enefittin on answe ship betwee	ted Person Yes" on Form m 990, Part X n to the tion? From From g Interest red "Yes" on en (c) Amo	s. 990-EZ, Part , line 5, 6, or 2 (e)Original principal amount	V, line 38a, or 2 (f)Balance due	Form 9 (g) In defaul Yes	No	rt IV , II A pprov by board or commit Yes	red	or if the agree Yes	ritten ment?
Part III Loa Com orga (a) Name of Interested person 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ans to an mplete if the anization re (b) Relationsl with organizati	ad/or e orga portes hip F on on ssist	r From Inization a d an amo (c) Purpose o loan	Interest answered " unt on Forr (d) Loa or from organiza To To enefittin on answe ship betwee	ted Person Yes" on Form m 990, Part X n to the tion? From From g Interest red "Yes" on en (c) Amo	S. 990-EZ, Part , line 5, 6, or 2 (e)Original principal amount 	V, line 38a, or 2 (f)Balance due	Form 9 (g) In defaul Yes	No	rt IV , II A pprov by board or commit Yes	red	or if the agree Yes	ritten ment?
Part III Loa Com orga (a) Name of Interested person 4 Cotal Part III Gra Com (a) Name of Int	ans to an mplete if the anization re (b) Relationsl with organizati	ad/or e orga portes hip F on on ssist	r From Inization a d an amo (c) Purpose o loan ban sance Be ganizati Relations rested pe	Interest answered " unt on Forr (d) Loa or from organiza To To enefittin on answe ship betwee	ted Person Yes" on Form m 990, Part X n to the tion? From From g Interest red "Yes" on en (c) Amo	S. 990-EZ, Part , line 5, 6, or 2 (e)Original principal amount 	V, line 38a, or 2 (f)Balance due	Form 9 (g) In defaul Yes	No	rt IV , II A pprov by board or commit Yes	red	or if the agree Yes	ritten ment?
Part III Loa Com orga (a) Name of Interested person 4 Cotal Part III Gra Com (a) Name of Int	ans to an mplete if the anization re (b) Relationsl with organizati	ad/or e orga portes hip F on on ssist	r From Inization a d an amo (c) Purpose o loan ban sance Be ganizati Relations rested pe	Interest answered " unt on Forr (d) Loa or from organiza To To enefittin on answe ship betwee	ted Person Yes" on Form m 990, Part X n to the tion? From From g Interest red "Yes" on en (c) Amo	S. 990-EZ, Part , line 5, 6, or 2 (e)Original principal amount 	V, line 38a, or 2 (f)Balance due	Form 9 (g) In defaul Yes	No	rt IV , II A pprov by board or commit Yes	red	or if the agree Yes	ritten ment?
Part III Loa Com orga (a) Name of Interested person 4 Cotal Part III Gra Com (a) Name of Int	ans to an mplete if the anization re (b) Relationsl with organizati	ad/or e orga portes hip F on on ssist	r From Inization a d an amo (c) Purpose o loan ban sance Be ganizati Relations rested pe	Interest answered " unt on Forr (d) Loa or from organiza To To enefittin on answe ship betwee	ted Person Yes" on Form m 990, Part X n to the tion? From From g Interest red "Yes" on en (c) Amo	S. 990-EZ, Part , line 5, 6, or 2 (e)Original principal amount 	V, line 38a, or 2 (f)Balance due	Form 9 (g) In defaul Yes	No	rt IV , II A pprov by board or commit Yes	red	or if the agree Yes	ritten ment?

f	(e) Sha of	(d) Description (	(c) A mount of (d) Description of transaction	between interested transaction
ues?	organız revenu			person and the organization
No	Yes	 <u> </u>		

#### Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
SCHEDULE L, PART I, LINE 1, COLUMN (C), DESCRIPTION OF TRANSACTION	IN 2012, AT THE CONCLUSION OF AN INTERNAL INVESTIGATION CONDUCTED AT THE DIRECTION OF THE AUDIT COMMITTEE, THE BOARD LEARNED AND CONCLUDED THAT THE THEN PRESIDENT/CEO OF THE CORPORATION DIRECTED, OUTSIDE OF THE CORPORATION'S
	PAYROLL PROCESS, AN UNAUTHORIZED LUMP-SUM PAYMENT TO HIMSELF IN THE AMOUNT OF \$412,199 IN MARCH 2012 SPECIFICALLY, THE BOARD DETERMINED THAT THE LUMP- SUM CASH PAYMENT OF \$412,199 WAS NEVER PRESENTED TO THE BOARD FOR ITS
	AUTHORIZATION THE BOARD FURTHER FOUND THAT NO COMPENSATION ANALYSIS WAS PERFORMED, OR PRESENTED TO THE BOARD, TO DETERMINE THE REASONABLENESS OF THAT \$412,199 PAYMENT ACCORDINGLY, THE PRESIDENT/CEO'S UNAUTHORIZED PAYMENT
	TO HIMSELF OF SUCH AMOUNT IN SUCH MANNER MAY CONSTITUTE AN AUTOMATIC EXCESS BENEFIT TRANSACTION UNDER TREASURY REGULATION SECTION 53 4958-4(C)(1) MOREOVER, EVEN IF THE PAYMENT DID NOT RESULT IN AN AUTOMATIC EXCESS BENEFIT ,
	ALL OR SOME PAYMENT OF AN EXCESS BENEFIT TO THE PRESIDENT/CEO THE BOARD OF DIRECTORS, THROUGH LEGAL COUNSEL, MADE A WRITTEN DEMAND ON AUGUST 20, 2013 TO THE FORMER PRESIDENT/CEO FOR THE PAYMENT OF THE \$412,199 THE FORMER PRESIDENT/CEO HAS FAILED TO RESPOND IN WRITING AND HAS FAILED TO REPAY ANY
	AMOUNT

efi	e GRAPHIC p	rint - DO NOT	<b>PROCES</b>	S As Filed Data -		DLN:	9349332:	1099!	544
	EDULE M			Noncash Contr	ibutions		OMBNo 1	545-0	047
(Fori	n 990)		I		ibutions		20	10	
			►Complete	e if the organizations an			20	13	
Departn	nent of the Treasury			990, Part IV, lines 2 ► Attach to Form			Open to	Pub	lic
	Revenue Service		about Scheo	lule M (Form 990) and its ir	nstructions is at <u>www.irs.g</u>		Inspe	ction	
	e of the organiza F INTERNATIONAL	tion				Employer identi	fication nur	nber	
	INTERNATIONAL					95-4300662			
Ра	rtI Types	of Property							
			(a)	(b)	(c)		(d)		
			Check If	Number of contributions or items contributed	Noncash contribution amounts reported on		of determir		5
			applicable		Form 990, Part VIII, line		inclubation a	inounc	5
					1g				
	Art-Works of an								
	Art—Historical t Art—Fractional i								
	Books and publi								
	Clothing and ho								
-	goods								
	Cars and other v								
	Boats and plane					<u> </u>			
	Intellectual prop								
	Securities—Pub								
	Securities—Clos	sely held stock .							
	or trust interest								
12	Securities—Mise	cellaneous							
13	Qualified conse								
	contribution—Hi structures .								
14	Qualified consei								
	contribution—O								
	Real estate—Re								
		mmercial							
	Real estate—Ot								
	Collectibles . Food inventory		x	1	205 752	MARKET VALU			
	Drugs and medi		x	1	,	MARKET VALU			
	Taxidermy .		~		, 13,230				
	Historical artifa								
23	Scientific specii	mens							
24	Archeological a	rtıfacts							
	Other►(								
	Other►(								
	Other►(								
	Other►(		by the orga		r for contributions				
				inization during the tax yea 283, Part IV, Donee Ackn		29			0
	-			, ,	-			Yes	No
30a	During the year	r, dıd the organıza	ation receiv	e by contribution any prope	erty reported in Part I, lines	s 1 through 28, t	hat 🛛		
	ıt must hold for	at least three ye	ars from th	e date of the initial contribu	ition, and which is not requ	ired to be used			
				period?			- 30a		No
b	If"Yes," descr	be the arrangem	ent in Part I	II					
31	Does the organ	ization have a gi	ft acceptand	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	=			ies or related organizations	to solicit, process, or sell	noncash			
-		• • • • •					32a		No
	If "Yes," descri		t an amount	: in column (c) for a type of	property for which column	(a) is checked			
55	describe in Par		ι απ απισυήτ	in column (c) for a type of	property for which column	(a) is checked,			
				tions for Form 990.	Cat No 51227J	Cabad	ule M (Form		

Part II

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
	FOOD INVENTORY NUMBER OF CONTRIBUTIONS RECEIVED DRUGS AND MEDICAL SUPPLIES NUMBER OF CONTRIBUTIONS RECEIVED
Schedule M, part I, column (b), Line 19, Number of contributions or items contributed	NUMBER OF CONTRIBUTIONS RECEIVED
Schedule M, part I, column (b), Line 20, Number of contributions or items contributed	NUMBER OF CONTRIBUTIONS RECEIVED

Schedule M (Form 990) (2013)

efile GRAPHIC pri	nt - DO NOT PROCESS	As Filed Data -		DLN: 93493321099544						
SCHEDULE O				OMB No 1545-0047						
(Form 990 or 990-EZ)	Supplementa	Supplemental Information to Form 990 or 990-EZ								
Department of the Treasury Internal Revenue Service	Complete to provi Form 99	2013 Open to Public Inspection								
Name of the organization	า	Employer identification number								
			95-430	0662						

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1, MISSION STATEMENT CONTINUED	
FORM 990, PART V, LINE 4B, LIST OF OTHER FOREIGN COUNTRIES	THE 2 "OTHER COUNTRIES" LISTED ABOVE REFER TO OCCUPIED PALESTINE TERRITORIES, AND SOUTH SUDAN
Form 990, Part VI, Sec B, Line 11b, Review of form 990 by governing body	THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS WITH THE ASSISTANCE OF THE ORGANIZAIT ON'S CFO THE CFO AND PRESIDENT/CEO REVIEW THE RETURN BEFORE SUBMITTING VIA EMAIL TO THE F ULL BOARD FOR THIER REVIEW PRIOR TO ITS SUBMISSION TO THE IRS
Form 990, Part VI, Sec B, Line 12c, Conflict of interest policy	ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST ST ATEMENT ON AN ANNUAL BASIS UPON DISCOVERY OF A POTENTIAL CONFLICT, EITHER IN PROCUREMENT OR HIRING OR ANY OTHER AREA OF ORGANIZATIONAL INTEREST, THE EMPLOYEE OR BOARD MEMBER MAKES PROMPT DISCLOSURE TO THE COUNTRY DIRECTOR, BUT NO LATER THAN 30 DAYS AFTER THE OCCURRENCE MEMBERS OF THE BOARD AND EMPLOYEES WHO HAVE A CONFLICT OF INTEREST IN ANY MATTER WILL RE FRAIN FROM PARTICIPATING IN THE CONSIDERATION OF THE PROPOSED TRANSACTION FAILURE ON THE PART OF THE OFFICERS, DIRECTORS OR EMPLOYEE TO ABIDE BY THE CONFLICT OF INTEREST POLICY W ILL BE CONSIDERED A MAJOR MISCONDUCT AND THE EMPLOYEE WILL BE TERMINATED IMMEDIATELY FROM EMPLOY MENT WITH RELIEF INTERNATIONAL
Form 990, Part VI, Sec B, Line 15a, Process to establish compensation of top management official	THE BOARD OF DIRECTORS APPROVES AND DECIDES UPON CEO AND CFO COMPENSATION BASED ON MARKET AND COMPARATIVE ANALYSIS IN 2013
Form 990, Part VI, Sec B, Line 15b, Process to establish compensation of other employees	THE BOARD OF DIRECTORS, THROUGH THE HUMAN RESOURCES COMMITTEE, APPROVED HEAD OFFICE SALARY SCALE THAT WAS DESIGNED BY HR DEPARTMENT BASED ON MARKET ANALYSIS THIS SALARY SCALE ALSO COVERED SENIOR STAFF'S COMPENSATION
Form 990, Part VI, Sec C, Line 19, Required documents available to the public	RI PRESENTS ITS FINANCIAL STATEMENTS ON THE WEBSITE. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST

efile GRAPHIC print - DO NO	OT PROCESS As Filed Data -					DLN: 93493321099544
SCHEDULE R (Form 990) Department of the Treasury nternal Revenue Service	OMB No 1545-0047 <b>2013</b> Open to Public Inspection					
Name of the organization RELIEF INTERNATIONAL					Employer i	dentification number
					95-43006	62
Part I Identification of I	Disregarded Entities Complete	If the organization	answered "Yes" or	n Form 990, P	art IV, line 33.	
(a) Name, address, and EIN (ıf applı	cable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
	Related Tax-Exempt Organizat		the organization ar	swered "Yes"	' on Form 990, Pa	art IV, line 34 because it had one

(a) Name, address, and EIN of related organization	( <b>D)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(T) Direct controlling entity	Section (13) co ent	<b>3)</b> 512(b) ntrolled ity?
						Yes	No
						-	
For Papapuork Poduction Act Natica, soo the Instructions for Form 990		Cat No E01	257		Schodulo B / Form	0001 2	012

		-						_					
Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.													
(a) Name, address, and EIN of related organization	(b) (c) Primary activity Legal domicile (state or foreign country)		<b>(d)</b> Direct controlling entity	ontrolling Predominant				) rtionate ions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner? 1 )		(k) Percentage ownership	
							Yes	No		Yes	No		
(1) ENTERPRISE WORKS LLC 818 CONNECTICUT AVE NW SUITE 600 WASHINGTON, DC 20006 52-1079034	PROMOTES SUSTAINABLE, ENTERPRISE- ORIENTED SOLUTIONS TO ECONOMIC CHALLENGES IN THE DEVELOPING WORLD		RELIEF INTERNATIONAL	RELATED	0	0		No	0	Yes		0 %	

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

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total ıncome	<b>(g)</b> Share of end- of-year assets	<b>(h)</b> Percentage ownership	(i) Section 512 (b)(13) controlled entity?		
								Yes		-

Schedule R (Form 990) 2013

Part	<b>Transactions With Related Organizations</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	s No
<b>1</b> Dur	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
<b>a</b> R	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		No
<b>b</b> G	Gift, grant, or capital contribution to related organization(s)	1b		No
<b>c</b> G	Gift, grant, or capital contribution from related organization(s)	1c		No
d L	Loans or loan guarantees to or for related organization(s)	1d		No
e L	Loans or loan guarantees by related organization(s)	1e	$\vdash$	No
fΓ	Dividends from related organization(s)	1f		No
g S	Sale of assets to related organization(s)	<b>1</b> g		No
h P	Purchase of assets from related organization(s)	1h		No
i E	Exchange of assets with related organization(s)	<b>1</b> i		No
j L	Lease of facilities, equipment, or other assets to related organization(s)	<b>1</b> j	$\overline{+}$	No
k l	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I P	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
<b>m</b> P	Performance of services or membership or fundraising solicitations by related organization(s)	1m	4	No
n S'	Sharıng of facılıtıes, equipment, mailing lists, or other assets with related organization(s)	1n		No
o S	Sharıng of paıd employees with related organization(s)	10	$\overline{+}$	No
<b>p</b> R	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q R	Reimbursement paid by related organization(s) for expenses	1q	<u> </u>	No
r C	O ther transfer of cash or property to related organization(s)	1r		No
s C	Other transfer of cash or property from related organization(s)	<b>1</b> s		No

 2
 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

 (a)
 (b)
 (c)
 (d)

 Name of related organization
 Transaction
 Method of determining amount involved

 (b)
 (c)
 (d)

 (c)
 (c)

 (c)
 (c)

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

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

				_																					
<b>(a)</b> Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3)		501(c)(3)		501(c)(3)		501(c)(3)		501(c)(3)		501(c)(3)		501(c)(3)		<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations	ate	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No													
												1 1													

# Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

**Return Reference** 

Explanation

Schedule R (Form 990) 2013