

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 Do not enter social security numbers on this form as it may be made public
 Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2014
Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014, and ending 12-31-2014

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization RELIEF INTERNATIONAL Doing business as Number and street (or P O box if mail is not delivered to street address) Room/suite 5455 WILSHIRE BLVD SUITE 1280 City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90036	D Employer identification number 95-4300662 E Telephone number (323) 932-7888 G Gross receipts \$ 22,787,681
F Name and address of principal officer NANCY WILSON 5455 WILSHIRE BLVD SUITE 1280 LOS ANGELES, CA 90036		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW RI ORG		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation 1990 M State of legal domicile CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities RELIEF INTERNATIONAL IS A HUMANITARIAN NON-PROFIT AGENCY THAT PROVIDES EMERGENCY RELIEF, REHABILITATION, DEVELOPMENT ASSISTANCE, AND PROGRAM SERVICES TO VULNERABLE COMMUNITIES WORLDWIDE			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3		13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		12
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5		167
	6 Total number of volunteers (estimate if necessary)	6		60
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0
	b Net unrelated business taxable income from Form 990-T, line 34	7b		0
Revenue		Prior Year	Current Year	
	8 Contributions and grants (Part VIII, line 1h)	23,068,938	20,981,173	
	9 Program service revenue (Part VIII, line 2g)	3,829,780	1,806,268	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,953	240	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,902,671	22,787,681	
Expenses				
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,678,351	2,829,175	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	10,861,395	11,425,426	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0	
	b Total fundraising expenses (Part IX, column (D), line 25) 99,704			
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	13,761,431	11,985,295	
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	29,301,177	26,239,896	
	19 Revenue less expenses Subtract line 18 from line 12	-2,398,506	-3,452,215	
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	20 Total assets (Part X, line 16)	16,813,066	12,736,889	
	21 Total liabilities (Part X, line 26)	5,718,533	6,505,534	
	22 Net assets or fund balances Subtract line 21 from line 20	11,094,533	6,231,355	

Part II Signature Block

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 preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	***** Signature of officer STEVEN HANSCH TREASURER Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name Nicole Bencik	Preparer's signature Nicole Bencik
	Firm's name CROWE HORWATH LLP	
	Firm's address 15233 Ventura Boulevard Ninth Floor Sherman Oaks, CA 914032250	

May the IRS discuss this return with the preparer shown above? (see instructions)
For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

RELIEF INTERNATIONAL IS A HUMANITARIAN NON-PROFIT AGENCY THAT PROVIDES EMERGENCY RELIEF, REHABILITATION, DEVELOPMENT ASSISTANCE, AND PROGRAM SERVICES TO VULNERABLE COMMUNITIES WORLDWIDE RELIEF INTERNATIONAL IS SOLELY DEDICATED TO REDUCING HUMAN SUFFERING AND IS NON-POLITICAL AND NON-SECTARIAN IN ITS MISSION RELIEF INTERNATIONAL'S MISSION IS TO -SERVE THE NEEDS OF THE MOST VULNERABLE - PARTICULARLY WOMEN AND CHILDREN, VICTIMS OF NATURAL DISASTERS & CIVIL CONFLICTS, AND THE POOR, WITH A SPECIFIC FOCUS ON NEGLECTED GROUPS AND CASES - PROVIDE HOLISTIC, MULTI-SECTORAL, SUSTAINABLE, AND PRO-POOR PROGRAMS THAT BRIDGE EMERGENCY RELIEF AND LONG-TERM DEVELOPMENT AT THE GRASSROOTS LEVEL (SEE SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 11,767,926 including grants of \$ 2,145,451) (Revenue \$ 54,834)
 EMERGENCY, HEALTH AND SANITATION RELIEF INTERNATIONAL MEETS THE IMMEDIATE NEEDS OF VICTIMS OF NATURAL DISASTERS AND CIVIL CONFLICTS WORLDWIDE WITH THE PROVISION OF FOOD RATIONS, CLEAN WATER, NON-FOOD ITEMS, TRANSITIONAL SHELTER AND EMERGENCY MEDICAL SERVICES BEYOND EMERGENCY SITUATIONS, RELIEF INTERNATIONAL'S FIELD TEAMS PROVIDE LONG TERM HEALTH AND NUTRITION SERVICES TO COMMUNITIES IN NEED BY OPERATING CLINICS AND TRAINING HEALTH WORKERS RELIEF INTERNATIONAL ALSO PROVIDES WATER AND SANITATION PROGRAMMING, PROVIDING COMMUNITIES WITH ACCESS TO CLEAN WATER, DECREASING THE INCIDENCE OF COMMUNICABLE DISEASES, AND IMPROVING QUALITY OF LIFE

4b (Code) (Expenses \$ 6,571,966 including grants of \$ 487,916) (Revenue \$ 1,503,527)
 LIVELIHOODS AND ENTERPRISE FINDING NEW OR BETTER WORK IS THE MOST DIRECT PATH OUT OF POVERTY FOR FAMILIES IN NEED RELIEF INTERNATIONAL FACILITATES THIS PROCESS BY PROVIDING VOCATIONAL TRAINING, OFFERING MICROFINANCE OPPORTUNITIES, AND DEVELOPING PROMISING VALUE CHAINS AS A RESULT OF THESE EFFORTS, FARMERS IN SENEGAL CAN GET THEIR CROPS TO MARKET BEFORE THEY SPOIL AND WOMEN IN AFGHANISTAN CAN EARN AN INCOME TO SUPPORT THEIR FAMILIES THESE PROGRAMS ARE AIMED AT LONG-TERM, RELIABLE GROWTH, AND RELIEF INTERNATIONAL OFTEN ENGAGES PRIVATE SECTOR PARTNERS TO LEVERAGE ADDITIONAL RESOURCES AND GUARANTEE SUSTAINABILITY

4c (Code) (Expenses \$ 3,968,999 including grants of \$ 0) (Revenue \$ 245,942)
 FOOD AND AGRICULTURE RELIEF INTERNATIONAL'S FOOD AND AGRICULTURE PROGRAMMING EMBRACES ENVIRONMENTAL AWARENESS BY INCORPORATING CLIMATE CHANGE, NATURAL RESOURCE MANAGEMENT, AND CONSERVATION PRINCIPLES INTO PROJECTS THAT IMPROVE GLOBAL FOOD SECURITY BY INCREASING COMMUNITIES' KNOWLEDGE OF SOUND AGRICULTURAL METHODS SUITABLE TO THE REGIONAL LANDSCAPE, CULTURAL NEEDS, AND ENVIRONMENT CONCERNS, RELIEF INTERNATIONAL EMPOWERS FARMERS HOW TO DIVERSIFY VIABLE CROPS, MAKE THE BEST USE OF THE LOCAL GROWING SEASON, AND PRESERVE LOCAL NATURAL RESOURCES THE RESULT IS COMMUNITIES THAT CAN PRODUCE NUTRITIOUS FOOD FOR THEMSELVES IN A SUSTAINABLE WAY

See Additional Data

4d Other program services (Describe in Schedule O)
 (Expenses \$ 567,579 including grants of \$ 195,808) (Revenue \$ 1,965)

4e Total program service expenses **22,876,470**

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," complete Schedule A.</i> <input checked="" type="checkbox"/>	Yes	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		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? <i>If "Yes," complete Schedule C, Part II.</i>		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>		
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>		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>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		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>		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>		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		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> <input checked="" type="checkbox"/>	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>		No
c	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>		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>		No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>	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> <input checked="" type="checkbox"/>	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i> <input checked="" type="checkbox"/>	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	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> <input checked="" type="checkbox"/>	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? <i>If "Yes," complete Schedule F, Parts II and IV.</i> <input checked="" type="checkbox"/>	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> <input checked="" type="checkbox"/>	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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).		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>		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part 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 domestic 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 or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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	Yes	
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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	Yes	
b	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		No
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 "Yes," 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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	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
c	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? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part I</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? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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	

Part 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

Main form grid with columns for question numbers (1a-14b), Yes/No boxes, and numerical input fields. Includes questions about Form 1096, Form W-2G, Form W-3, and various tax compliance requirements.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (13); 1b Enter the number of voting members included in line 1a, above, who are independent (12); 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? (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? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (No); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (Yes); 10b 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? (Yes); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (Yes); b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b 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?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed CA
18 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. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20 State the name, address, and telephone number of the person who possesses the organization's books and records. LES RUBIN

5455 WILSHIRE BLVD
LOS ANGELES, CA 90036 (323) 932-7888

Part VII 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) Average hours per week (list any hours for related organizations below dotted line)	(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 (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHIP LEVENGOOD BOARD CHAIRMAN	10 00	X		X				0	0	0
(2) LEON IRISH BOARD SECRETARY	1 00	X		X				0	0	0
(3) STEVEN HANSCH TREASURER	5 00	X		X				0	0	0
(4) IRENE WURTZEL BOARD MEMBER	2 00	X						0	0	0
(5) GEOFF BELL BOARD MEMBER & ACTING CEO	40 00	X						0	0	50,000
(6) ELLEN FROST BOARD MEMBER	1 00	X						0	0	0
(7) JOHN GAGE BOARD MEMBER	1 00	X						0	0	0
(8) JIM MOODY BOARD MEMBER	1 00	X						0	0	0
(9) BARBARA SIMMONDS BOARD MEMBER	2 00	X						0	0	0
(10) ROB COPE BOARD MEMBER	1 00	X						0	0	0
(11) AMANDA BARNES BOARD MEMBER	2 00	X						0	0	0
(12) KEITH ALLMAN BOARD MEMBER	1 00	X						0	0	0
(13) NANCY WILSON PRESIDENT & CEO	60 00			X				185,271	0	6,400
(14) Les Rubin Chief Financial Officer	60 00			X				137,734	0	24,125

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(15) ELIA MAKAR VICE PRESIDENT OF HUMAN RESOURCES	60 00					X		120,202	0	10,972
(16) ANN KOONTZ SVP-Economic Opportunity & Sector Integration	60 00					X		128,367	0	23,477
(17) ADAM KOONS SVP OF INTERNATIONAL PROGRAMS	60 00					X		145,177	0	16,338
(18) Grover Jones Vice President Program Development	60 00					X		108,569	0	4,320

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	825,320	0	135,632

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **6**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a						
	b	Membership dues 1b						
	c	Fundraising events 1c						
	d	Related organizations 1d						
	e	Government grants (contributions) 1e	19,522,811					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	1,458,362					
	g	Noncash contributions included in lines 1a-1f \$	1,250,377					
	h	Total. Add lines 1a-1f	20,981,173					
Program Service Revenue	2a	LOAN INTEREST						
		Business Code						
		900099	999,628	999,628				
	b	PROGRAM INCOME						
		900099	393,775	393,775				
	c							
	d							
e								
f	All other program service revenue		412,865	412,865	0	0		
g	Total. Add lines 2a-2f		1,806,268					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	240			240		
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6a	Gross rents	(i) Real					
			(ii) Personal					
			b	Less rental expenses				
			c	Rental income or (loss)	0	0		
	d	Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory	(i) Securities					
			(ii) Other					
			b	Less cost or other basis and sales expenses				
			c	Gain or (loss)	0	0		
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18						
	a							
	b	Less direct expenses b						
	c	Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities See Part IV, line 19						
a								
b	Less direct expenses b							
c	Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less returns and allowances							
a								
b	Less cost of goods sold b							
c	Net income or (loss) from sales of inventory							
	Miscellaneous Revenue	Business Code						
11a								
b								
c								
d	All other revenue		0	0	0	0		
e	Total. Add lines 11a-11d		0					
12	Total revenue. See Instructions		22,787,681	1,806,268	0	240		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	548,925	548,925		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,280,250	2,280,250		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	353,529	48,428	305,101	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	8,454,697	7,131,353	1,308,360	14,984
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	301,818	185,539	115,268	1,011
9	Other employee benefits	1,971,554	1,524,397	437,451	9,706
10	Payroll taxes	343,828	172,646	169,997	1,185
11	Fees for services (non-employees)				
a	Management				
b	Legal	130,479	96,875	33,604	
c	Accounting	231,095	81,187	149,561	347
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	716,083	534,468	136,257	45,358
12	Advertising and promotion	287,169	278,512	8,657	
13	Office expenses	612,199	540,485	71,505	209
14	Information technology				
15	Royalties				
16	Occupancy	1,391,609	868,999	522,574	36
17	Travel	1,336,924	1,031,336	305,083	505
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	52,544	9,941	39,224	3,379
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	29,961	5,314	24,647	
23	Insurance	457,074	164,163	282,290	10,621
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)				
a	PROJECTS	4,846,998	4,846,998		
b	BAD DEBT EXPENSE	1,260,313	1,260,313		
c	VEHICLE & EQUIPMENT	691,260	552,020	139,240	
d	OTHER OPERATING	460,568	364,304	80,241	16,023
e	All other expenses	-518,981	350,017	-865,338	-3,660
25	Total functional expenses. Add lines 1 through 24e	26,239,896	22,876,470	3,263,722	99,704
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	5,142	1	5,378
	2 Savings and temporary cash investments	4,306,379	2	4,062,235
	3 Pledges and grants receivable, net	1,988,223	3	3,475,665
	4 Accounts receivable, net	1,575,690	4	649,559
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	
	7 Notes and loans receivable, net	7,584,059	7	3,550,090
	8 Inventories for sale or use	59,845	8	30,111
	9 Prepaid expenses and deferred charges	176,193	9	353,748
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 319,932		
	b Less accumulated depreciation	10b 276,901	58,343	10c 43,031
	11 Investments—publicly traded securities	15,510	11	50
	12 Investments—other securities See Part IV, line 11	0	12	
	13 Investments—program-related See Part IV, line 11	0	13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	1,043,682	15	567,022
16 Total assets. Add lines 1 through 15 (must equal line 34)	16,813,066	16	12,736,889	
Liabilities	17 Accounts payable and accrued expenses	2,116,876	17	3,312,285
	18 Grants payable		18	
	19 Deferred revenue	1,987,831	19	261,655
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	
	23 Secured mortgages and notes payable to unrelated third parties	1,574,101	23	1,659,098
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	39,725	25	1,272,496
	26 Total liabilities. Add lines 17 through 25	5,718,533	26	6,505,534
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,614,054	27	5,301,663
	28 Temporarily restricted net assets	7,480,479	28	929,692
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	11,094,533	33	6,231,355	
34 Total liabilities and net assets/fund balances	16,813,066	34	12,736,889	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,787,681
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,239,896
3	Revenue less expenses Subtract line 2 from line 1	3	-3,452,215
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,094,533
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-1,410,963
9	Other changes in net assets or fund balances (explain in Schedule O)	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	6,231,355

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	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	Yes	

Additional Data

Software ID: 14000329
Software Version: 2014v1.0
EIN: 95-4300662
Name: RELIEF INTERNATIONAL

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 544,497 including grants of \$ 195,808) (Revenue \$ 1,965)

PROTECTION AND HUMAN RIGHTS MILLIONS OF INDIVIDUALS WORLDWIDE FACE DISCRIMINATION, PERSECUTION, AND EVEN VIOLENCE RELIEF INTERNATIONAL IS ON THE FOREFRONT OF IMPLEMENTING PROGRAMS TO PROTECT AND SUPPORT THESE INDIVIDUALS AND ENCOURAGE PEACE THROUGH NONVIOLENT CONFLICT RESOLUTION THE RESULT IS PROGRAMMING THAT PROVIDES LEGAL-ASSISTANCE, FIGHTS TRAFFICKING IN PERSONS, PROMOTES MEDIA AND JOURNALISM, AND ENCOURAGES DEMOCRATIC GOVERNANCE THE RIGHTS OF WOMEN AND GIRLS IS A CRITICAL ISSUE IN THIS SECTOR, AND IS INCORPORATED IN MANY OF RELIEF INTERNATIONAL'S PROGRAMS RELIEF INTERNATIONAL'S APPROACH TO CIVIL SOCIETY DEVELOPMENT EMPHASIZES CROSS-CULTURAL UNDERSTANDING AND EMPOWERMENT OF VULNERABLE AND UNDER-REPRESENTED MEMBERS OF SOCIETY

(Code) (Expenses \$ 12,981 including grants of \$ 0) (Revenue \$ 0)

SHELTER AND INFRASTRUCTURE WHEN NATURAL DISASTERS DESTROY HOUSING OR CONFLICT FORCES FAMILIES TO FLEE THEIR HOMES, RELIEF INTERNATIONAL PROVIDES FOR TEMPORARY AND PERMANENT SHELTER RELIEF INTERNATIONAL ALSO CONTRIBUTES TO LOCAL INFRASTRUCTURE BY BUILDING SCHOOLS, IRRIGATION CANALS, AND COMMUNITY CENTERS IN IMPOVERISHED COMMUNITIES RELIEF INTERNATIONAL SUPPORTS TRAINING FOR LOCAL RESIDENTS SO THAT THEY CAN PARTICIPATE IN THE CONSTRUCTION PROCESS, CREATING LIVELIHOOD OPPORTUNITIES FOR COMMUNITY MEMBERS COMPLEMENTARY PROGRAMS HELP MAKE HOMES SAFER AND MORE COMFORTABLE BY PROMOTING PRODUCTS LIKE HIGH-EFFICIENCY COOK STOVES, WHICH DECREASE INDOOR AIR POLLUTION AND REDUCE THE NEED TO GATHER FUEL

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	10,101	including grants of \$	0) (Revenue \$	0)
EDUCATION AND EMPOWERMENT EDUCATION IS VITAL TO THE SOCIAL AND ECONOMIC INTEGRATION OF FUTURE GENERATIONS RELIEF INTERNATIONAL PLACES A SIGNIFICANT FOCUS ON THIS SECTOR TO ENSURE THAT CHILDREN AFFECTED BY CONFLICT CAN CONTINUE TO PURSUE THEIR EDUCATION PROGRAMS INCLUDE A WIDE RANGE OF ACTIVITIES TEACHER TRAINING PROGRAMS, BUILDING LIBRARIES AND INTERNET CENTERS, PROVIDING BOOKS AND CLASSROOM FURNITURE TO UNDER-RESOURCED SCHOOLS, AND PROMOTING EQUAL ACCESS TO EDUCATION THESE PROGRAMS ALSO EMPOWER YOUTH THROUGH SERVICE LEARNING AND LEADERSHIP TRAINING TO BECOME ACTIVE IN THEIR COMMUNITIES AND ACT AS AGENTS FOR CHANGE					

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
RELIEF INTERNATIONAL

Employer identification number
95-4300662

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	36,114,034	29,643,609	20,961,884	23,068,938	20,981,173	130,769,638
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	36,114,034	29,643,609	20,961,884	23,068,938	20,981,173	130,769,638
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,449,757
6 Public support. Subtract line 5 from line 4						129,319,881

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	36,114,034	29,643,609	20,961,884	23,068,938	20,981,173	130,769,638
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23,916	12,178	3,415	55,478	240	95,227
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,873	13,728	0	0	0	22,601
11 Total support. Add lines 7 through 10						130,887,466
12 Gross receipts from related activities, etc. (see instructions)					12	16,779,419

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	98 80 %
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	98 92 %

- 16a 33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 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 III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	

- 19a 33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).		
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV Supporting Organizations (continued)**Section B. Type I Supporting Organizations**

- 1** Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*
- 3** By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**)
- a** The organization satisfied the Activities Test. Complete **line 2** below.
- b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test **Answer (a) and (b) below.**

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*

3 Parent of Supported Organizations **Answer (a) and (b) below.**

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

	Yes	No
2a		
2b		
3a		
3b		

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	
2 Recoveries of prior-year distributions	2	
3 Other gross income (see instructions)	3	
4 Add lines 1 through 3	4	
5 Depreciation and depletion	5	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7 Other expenses (see instructions)	7	
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount

	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2 Acquisition indebtedness applicable to non-exempt use assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by .035	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. _____			
b From 2010. _____			
c From 2011. _____			
d From 2012. _____			
e From 2013. _____			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$ _____			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. _____			
b From 2011. _____			
c From 2012. _____			
d From 2013. _____			
e From 2014. _____			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. 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 - 8873 0, COLUMN B - 13728 0, COLUMN C - , COLUMN D - , COLUMN E - , COLUMN F - 22601 0,

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization RELIEF INTERNATIONAL

Employer identification number 95-4300662

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and questions about donor informed consent.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form for Part II Conservation Easements including checkboxes for preservation purposes, a table for held at the end of the year (2a-2d), and various questions about monitoring and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets including questions about reporting revenue and assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c 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 balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		319,932	276,901	43,031
e Other				
Total. Add lines 1a through 1e <i>(Column (d) must equal Form 990, Part X, column (B), line 10(c).)</i>				43,031

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 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	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
Payroll taxes	303,591
DUE TO RELIEF INTERNATIONAL-UK	968,905
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,272,496

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	22,787,681
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	0	
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	22,787,681
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	0	
c	Add lines 4a and 4b		4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	22,787,681

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	26,239,896
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	0	
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	26,239,896
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	0	
c	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	26,239,896

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	Relief International is a nonprofit corporation exempt from federal income taxes under Internal Revenue Code section 501(c)(3) and from state income taxes Therefore, these financial statements contain no provision for such taxes Informational returns are filed annually with federal and state taxing authorities Accounting principles generally accepted in the United States of America prescribe recognition thresholds and measurement attributes for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return Tax benefits will be recognized only if a tax position is more-likely-than-not sustained in a tax examination, with a tax examination being presumed to occur The amount recognized will be the largest amount of tax benefit that is greater than 50% likely being realized on examination For tax positions not meeting the more-likely-than-not test, no tax benefit will be recorded Management has concluded that they are unaware of any tax benefits or liabilities to be recognized at December 31, 2014 and 2013 Relief International would recognize interest and penalties related to unrecognized tax benefits in interest and income tax expense, respectively Relief International has no amounts accrued for interest or penalties for the years ended December 31, 2014 and 2013 Relief International does not expect the total amount of unrecognized tax benefits to significantly change in the next 12 months

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2014

**Open to Public
Inspection**

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

▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
RELIEF INTERNATIONAL

Employer identification number

95-4300662

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	92	1,050			22,876,470
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	92	1,050			22,876,470

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) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 12

3 Enter total number of other organizations or entities 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) DONATED FOOD AND RELIEF COMMODITIES	Sub-Saharan Africa	360,934			1,250,377	Food & Medical supplies	FMV
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes 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; do not file with Form 990)* Yes No

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	<p>1 NO SUB-GRANTS WILL BE DISBURSED UNLESS IT IS A PART OF THE AGREEMENT BETWEEN RELIEF INTERNATIONAL AND A DONOR 2 THE SUB-GRANT WILL BE AWARDED BASED ON RELIEF INTERNATIONAL'S PROCUREMENT POLICIES MANUAL TO THE MOST SUCCESSFUL BIDDER WHO HAS THE MOST ADVANTAGEOUS OFFER TO RI, PRICE AND OTHER FACTORS WILL BE CONSIDERED IN RESPONSE TO A COMPETITIVE SOLICITATION 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 INTERVENTIONS, THE RULES AND REGULATIONS OF RELIEF INTERNATIONAL AND THE DONOR WILL REMAIN THE SAME</p> <p>5 TO ASSIST WITH LOCAL RELIEF AND DEVELOPMENT ACTIVITIES RELIEF INTERNATIONAL GIVES PREFERENCE 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 MEETING 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 AND 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 COSTS CHARGED TO THE SUB-GRANT AWARD ARE BASED ON THE SUPPORTING DOCUMENTATION 10 RELIEF INTERNATIONAL IS RESPONSIBLE FOR PROPERTY AND EQUIPMENT ACQUIRED BY THEIR SUB GRANTEES 11 RELIEF INTERNATIONAL IS RESPONSIBLE FOR OBSERVING THEIR SUB GRANTEE'S COMPETITIVE BIDDING REQUIREMENTS, IF APPLICABLE, TAGGING AND INVENTORYING SUCH PROPERTY AND EQUIPMENT OF THE SUB-GRANTEES AND ACCOUNTING FOR THE DISPOSITION OF SUCH PROPERTY AND EQUIPMENT 12 SUB-GRANTEE SENDS TO RELIEF INTERNATIONAL A ONE COPY OF THE MONTHLY EXPENSE STATEMENT AND AN INVOICE BY THE 10TH WORKING DAY OF THE FOLLOWING MONTH B ONE COPY OF A MONTHLY PROGRESS REPORT C WITHIN ONE MONTH AFTER THE COMPLETION DATE OF THE SUB-GRANT, THE SUB-GRANTEE SUBMITS 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 PERIOD 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 ABILITY 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 ASSISTANCE NEEDED TO RESOLVE THE SITUATION B IF ANY PERFORMANCE REVIEW CONDUCTED BY THE SUB-GRANTEE DISCLOSES THE NEED FOR CHANGES, THE SUB-GRANTEE SUBMITS A REQUEST FOR BUDGET REVISION (REALIGNMENT) TO RELIEF INTERNATIONAL NO LATER THAN 3(THREE) MONTHS BEFORE THE PROJECT END</p>

990 Schedule F, Supplemental Information

Return Reference	Explanation
<p>Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF GRANT FUNDS</p>	<p>1 NO SUB-GRANTS WILL BE DISBURSED UNLESS IT IS A PART OF THE AGREEMENT BETWEEN RELIEF INTERNATIONAL AND A DONOR 2 THE SUB-GRANT WILL BE AWARDED BASED ON RELIEF INTERNATIONAL'S PROCUREMENT POLICIES MANUAL TO THE MOST SUCCESSFUL BIDDER WHO HAS THE MOST ADVANTAGEOUS OFFER TO RI, PRICE AND OTHER FACTORS WILL BE CONSIDERED IN RESPONSE TO A COMPETITIVE SOLICITATION 3 SUB-GRANTEES OVERHEADS (ICR) RATE, IF ANY EXCEEDS THE RATE PROVIDED BY THE PRIME DONOR AGREEMENT 4 ALTHOUGH VARIOUS PROJECTS DIFFER IN TERMS OF FORMATTING AND INTERVENTIONS, THE RULES AND REGULATIONS OF RELIEF INTERNATIONAL AND THE DONOR WILL REMAIN THE SAME</p> <p>5 TO ASSIST WITH LOCAL RELIEF AND DEVELOPMENT ACTIVITIES RELIEF INTERNATIONAL GIVES PREFERENCE 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 MEETING 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 AND 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 COSTS CHARGED TO THE SUB-GRANT AWARD ARE BASED ON THE SUPPORTING DOCUMENTATION 10 RELIEF INTERNATIONAL IS RESPONSIBLE FOR PROPERTY AND EQUIPMENT ACQUIRED BY THEIR SUB GRANTEES 11 RELIEF INTERNATIONAL IS RESPONSIBLE FOR OBSERVING THEIR SUB GRANTEE'S COMPETITIVE BIDDING REQUIREMENTS, IF APPLICABLE, TAGGING AND INVENTORYING SUCH PROPERTY AND EQUIPMENT OF THE SUB GRANTEES AND ACCOUNTING FOR THE DISPOSITION OF SUCH PROPERTY AND EQUIPMENT 12 SUB-GRANTEE SENDS TO RELIEF INTERNATIONAL A ONE COPY OF THE MONTHLY EXPENSE STATEMENT AND AN INVOICE BY THE 10TH WORKING DAY OF THE FOLLOWING MONTH B ONE COPY OF A MONTHLY PROGRESS REPORT C WITHIN ONE MONTH AFTER THE COMPLETION DATE OF THE SUB-GRANT, THE SUB-GRANTEE SUBMITS 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 PERIOD 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 ABILITY 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 RISK'S ASSISTANCE NEEDED TO RESOLVE THE SITUATION B IF ANY PERFORMANCE REVIEW CONDUCTED BY THE SUB-GRANTEE DISCLOSES THE NEED FOR CHANGES, THE SUB-GRANTEE SUBMITS A REQUEST FOR BUDGET REVISION (REALIGNMENT) TO RELIEF INTERNATIONAL NO LATER THAN 3(THREE) MONTHS BEFORE THE PROJECT END</p>

Additional Data**Software ID:** 14000329**Software Version:** 2014v1.0**EIN:** 95-4300662**Name:** RELIEF INTERNATIONAL**Form 990 Schedule F Part I - Activities Outside The United States**

(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
East Asia and the Pacific	7	200	Program Services,Fundraising	NATURAL RESOURCES/BIODIVERSITY CONSERVATION, WASH, PROTECTION, HEALTH, LIVELIHOODS, EDUCATION, EMERGENCY RESPONSE	673,018
Europe (Including Iceland and Greenland)	2	7	Program Services,Fundraising	ADMINISTRATIVE SERVICES	2,089,667
Middle East and North Africa	21	358	Program Services,Fundraising	WATER AND SANITATION, NUTRITION, FOOD SECURITY AND LIVELIHOODS, WOMEN'S EMPOWERMENT, YOUTH EMPOWERMENT, MICROFINANCE, LIVESTOCK SERVICES, EMERGENCY RESPONSE	8,105,953

Form 990 Schedule F Part I - Activities Outside The United States

(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
South Asia	35	92	Program Services, Fundraising	SHELTER AND INFRASTRUCTURE, HUMAN RIGHTS AND PROTECTION, HEALTH, LIVESTOCK SERVICES, LIVELIHOODS AND ECONOMIC DEVELOPMENT, FOOD SECURITY	2,318,713
Sub-Saharan Africa	26	390	Program Services, Fundraising	HEALTH, WATER AND SANITATION, FOOD SECURITY AND NUTRITION, LIVELIHOODS, LIVESTOCK SERVICES, SHELTER, REFUGEE/RETURNEE SERVICES	8,087,536
Russia and the Newly Independent States	1	3	Program Services	MICROFINANCE	351,206

Form 990 Schedule F Part I - Activities Outside The United States

(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	0	Grantmaking		1,250,377

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Construction Of Hygine Facilities and Clinics in Niger	31,344	Wire & checks			
		Sub-Saharan Africa	provide life-saving health and nutrition services to vulnerable populations in Southern Somalia that immediately reduce morbidity and mortality while building household resilience in the long run	128,293	Wire			
		Sub-Saharan Africa	provide life-saving health and nutrition services to vulnerable populations in Southern Somalia that immediately reduce morbidity and mortality while building household resilience in the long run	145,147	Wire			
		Middle East and North Africa	Implementation of human rights courses, crisis hotline, round table discussion, and leadership programs	168,305	Wire			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Emergency health activities in Syria	37,888	Wire			
		Middle East and North Africa	Emergency wash and protection activities in Syria	321,318	Wire			
		Middle East and North Africa	Providing Robust Communication Programs to Informal settlements(IS)Via Mobile roadshows and conduct training and capacity building to enable humanitarian workers to strengthen two way communications with Refugees	27,502	Wire			
		Middle East and North Africa	Managing the project training component and umbrella of NAYR and YWB for the Youth Empowerment program in Egypt	24,064	Wire			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Implementation of training and employment services for widows in Kirkuk	25,499	Wire			
		Middle East and North Africa	Implementation of training and employment services for widows in Basra	36,857	Wire			
		Middle East and North Africa	Implementation of training and employment services for widows in Baghdad	44,925	Wire			
		Middle East and North Africa	Implementation of training and employment services for widows in Kirkuk	38,731	Wire			

**Schedule I
(Form 990)**

OMB No 1545-0047

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

2014

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

▶ Attach to Form 990.

**Open to Public
Inspection**

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
RELIEF INTERNATIONAL

Employer identification number
95-4300662

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ADVENTIST DEVELOPMENT AND RELIEF AGENCY 12501 OLD COLUMBIA PIKE Silver Spring, MD 20904	52-1314847	501(C)(3)	115,767				ASSIST IN THE IMPLEMENTATION OF WATER & SANITATION ACTIVITIES
(2) WINROCK INTERNATIONAL 2101 RIVERFRONT DRIVE Little Rock, AR 72202	71-0603560	501(C)(3)	106,397				ASSIST IN THE IMPLEMENTATION OF WATER & SANITATION ACTIVITIES
(3) KIVA 875 Howard St San Francisco, CA 94103	71-0992446	501(C)(3)	326,761				Developing an SME lending platform Posting WLIFT program loans to their internet lending platform

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **3**

3 Enter total number of other organizations listed in the line 1 table **0**

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

Part III can be duplicated if additional space is needed.

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
Schedule I, Part I, Line 2 Description Of Procedure For Monitoring Use Of Grant Funds	<p>1 NO SUB-GRANTS WILL BE DISBURSED UNLESS IT IS A PART OF THE AGREEMENT BETWEEN RELIEF INTERNATIONAL AND A DONOR 2 THE SUB-GRANT WILL BE AWARDED BASED ON RELIEF INTERNATIONAL'S PROCUREMENT POLICIES MANUAL TO THE MOST SUCCESSFUL BIDDER WHO HAS THE MOST ADVANTAGEOUS OFFER TO RI, PRICE AND OTHER FACTORS WILL BE CONSIDERED IN RESPONSE TO A COMPETITIVE SOLICITATION 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 INTERVENTIONS, 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 PREFERENCE 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 MEETING 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 AND 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 COSTS CHARGED TO THE SUB-GRANT AWARD ARE BASED ON THE SUPPORTING DOCUMENTATION 10 RELIEF INTERNATIONAL IS RESPONSIBLE FOR PROPERTY AND EQUIPMENT ACQUIRED BY THEIR SUB GRANTEES 11 RELIEF INTERNATIONAL IS RESPONSIBLE FOR OBSERVING THEIR SUB GRANTEE'S COMPETITIVE BIDDING REQUIREMENTS, IF APPLICABLE, TAGGING AND INVENTORYING SUCH PROPERTY AND EQUIPMENT OF THEIR GRANTEES AND ACCOUNTING FOR THE DISPOSITION OF SUCH PROPERTY AND EQUIPMENT 12 SUB-GRANTEE SENDS TO RELIEF INTERNATIONAL A ONE COPY OF THE MONTHLY EXPENSE STATEMENT AND AN INVOICE BY THE 10TH WORKING DAY OF THE FOLLOWING MONTH B ONE COPY OF A MONTHLY PROGRESS REPORT C WITHIN ONE MONTH AFTER THE COMPLETION DATE OF THE SUB-GRANT, THE SUB-GRANTEE SUBMITS 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 PERIOD 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 ABILITY 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 ASSISTANCE NEEDED TO RESOLVE THE SITUATION B IF ANY PERFORMANCE REVIEW CONDUCTED BY THE SUB-GRANTEE DISCLOSES THE NEED FOR CHANGES, THE SUB-GRANTEE SUBMITS A REQUEST FOR BUDGET REVISION (REALIGNMENT) TO RELIEF INTERNATIONAL NO LATER THAN 3(THREE) MONTHS BEFORE THE PROJECT END</p>
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	<p>1 NO SUB-GRANTS WILL BE DISBURSED UNLESS IT IS A PART OF THE AGREEMENT BETWEEN RELIEF INTERNATIONAL AND A DONOR 2 THE SUB-GRANT WILL BE AWARDED BASED ON RELIEF INTERNATIONAL'S PROCUREMENT POLICIES MANUAL TO THE MOST SUCCESSFUL BIDDER WHO HAS THE MOST ADVANTAGEOUS OFFER TO RI, PRICE AND OTHER FACTORS WILL BE CONSIDERED IN RESPONSE TO A COMPETITIVE SOLICITATION 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 INTERVENTIONS, 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 PREFERENCE 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 MEETING 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 AND 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 COSTS CHARGED TO THE SUB-GRANT AWARD ARE BASED ON THE SUPPORTING DOCUMENTATION 10 RELIEF INTERNATIONAL IS RESPONSIBLE FOR PROPERTY AND EQUIPMENT ACQUIRED BY THEIR SUB GRANTEES 11 RELIEF INTERNATIONAL IS RESPONSIBLE FOR OBSERVING THEIR SUB GRANTEE'S COMPETITIVE BIDDING REQUIREMENTS, IF APPLICABLE, TAGGING AND INVENTORYING SUCH PROPERTY AND EQUIPMENT OF THEIR GRANTEES AND ACCOUNTING FOR THE DISPOSITION OF SUCH PROPERTY AND EQUIPMENT 12 SUB-GRANTEE SENDS TO RELIEF INTERNATIONAL A ONE COPY OF THE MONTHLY EXPENSE STATEMENT AND AN INVOICE BY THE 10TH WORKING DAY OF THE FOLLOWING MONTH B ONE COPY OF A MONTHLY PROGRESS REPORT C WITHIN ONE MONTH AFTER THE COMPLETION DATE OF THE SUB-GRANT, THE SUB-GRANTEE SUBMITS 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 PERIOD 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 ABILITY 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 ASSISTANCE NEEDED TO RESOLVE THE SITUATION B IF ANY PERFORMANCE REVIEW CONDUCTED BY THE SUB-GRANTEE DISCLOSES THE NEED FOR CHANGES, THE SUB-GRANTEE SUBMITS A REQUEST FOR BUDGET REVISION (REALIGNMENT) TO RELIEF INTERNATIONAL NO LATER THAN 3(THREE) MONTHS BEFORE THE PROJECT END</p>

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2014

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
RELIEF INTERNATIONAL

Employer identification number

95-4300662

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|---|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- a** The organization?
- b** Any related organization?
- If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?
- If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 NANCY WILSON PRESIDENT & CEO	(i)	185,271	0	0	4,166	2,234	191,671	0
	(ii)	0	0	0	0	0	0	0
2 Les Rubin Chief Financial Officer	(i)	137,734	0	0	23,000	1,125	161,859	0
	(ii)	0	0	0	0	0	0	0
3 ANN KOONTZ SVP-Economic Opportunity & Sector Integration	(i)	128,367	0	0	22,999	478	151,844	0
	(ii)	0	0	0	0	0	0	0
4 ADAM KOONS SVP OF INTERNATIONAL PROGRAMS	(i)	145,177	0	0	10,597	5,741	161,515	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2014

Open to Public Inspection

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

Attach to Form 990 or Form 990-EZ.

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization RELIEF INTERNATIONAL

Employer identification number

95-4300662

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 4 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No). Row 1: (1) FARSHAD RASTAGAR, Former Officer, SEE PART V, Yes.

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$ 0
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ 0

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization? (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No).

Total \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance.

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

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	<p>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. AS OF DECEMBER 31, 2014, THE FORMER PRESIDENT/CEO HAS FAILED TO RESPOND IN WRITING AND HAS FAILED TO REPAY ANY AMOUNT. THROUGH OUR ATTORNEYS, WE CONTACTED THE CALIFORNIA ATTORNEY GENERAL AND INTERNAL REVENUE SERVICE INFORMING THEM OF THIS MATTER. NO ACTION HAS RESULTED.</p>

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2014

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Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization RELIEF INTERNATIONAL

Employer identification number 95-4300662

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of contributions or items contributed, (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining noncash contribution amounts. Rows include Art, Books, Cars, Boats, Intellectual property, Securities, Real estate, Collectibles, Food inventory, Drugs, etc.

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0

Table with 3 columns: Question, Yes, No. Rows include 30a (During the year, did the organization receive by contribution any property...), 31 (Does the organization have a gift acceptance policy...), 32a (Does the organization hire or use third parties...), 33 (If the organization did not report an amount in column (c) for a type of property...)

Part III 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
Schedule M, Part I Explanations of reporting method for number of contributions	Food inventory Number of contributions Drugs and medical supplies Number of contributions
Schedule M, Part I, Line 19 Number of contributions or items contributed	Number of contributions
Schedule M, Part I, Line 20 Number of contributions or items contributed	Number of contributions

Schedule M (Form 990) (2014)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.**

▶ Attach to Form 990 or 990-EZ.

**▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.**

OMB No 1545-0047

2014

**Open to Public
Inspection**

Name of the organization
RELIEF INTERNATIONAL

Employer identification number

95-4300662

Return Reference	Explanation
Form 990, Part III, Line 1 MISSION STATEMENT CONTINUED	- EMPOWER COMMUNITIES BY BUILDING CAPACITY AND BY MAXIMIZING LOCAL RESOURCES IN BOTH PROGRAM DESIGN AND IMPLEMENTATION - PROMOTE SELF-RELIANCE, PEACEFUL COEXISTENCE, AND REINTEGRATION OF MARGINALIZED COMMUNITIES - PROTECT LIVES FROM PHYSICAL INJURY OR DEATH AND/OR PSYCHOLOGICAL TRAUMA WHERE PRESENT - UPHOLD THE HIGHEST PROFESSIONAL NORMS IN PROGRAM DELIVERY, INCLUDING ACCOUNTABILITY TO BENEFICIARIES AND DONORS ALIKE

Return Reference	Explanation
CoreFormPartIII_PartIII_Line4d Description of other program services	(Expenses \$ 544,497 including grants of \$ 195,808)(Revenue \$ 1,965) PROTECTION AND HUMAN RIGHTS MILLIONS OF INDIVIDUALS WORLDWIDE FACE DISCRIMINATION, PERSECUTION, AND EVEN VIOLENCE RELIEF INTERNATIONAL IS ON THE FOREFRONT OF IMPLEMENTING PROGRAMS TO PROTECT AND SUPPORT THESE INDIVIDUALS AND ENCOURAGE PEACE THROUGH NONVIOLENT CONFLICT RESOLUTION THE RESULT IS PROGRAMMING THAT PROVIDES LEGAL-ASSISTANCE, FIGHTS TRAFFICKING IN PERSONS, PROMOTES MEDIA AND JOURNALISM, AND ENCOURAGES DEMOCRATIC GOVERNANCE THE RIGHTS OF WOMEN AND GIRLS IS A CRITICAL ISSUE IN THIS SECTOR, AND IS INCORPORATED IN MANY OF RELIEF INTERNATIONAL'S PROGRAMS RELIEF INTERNATIONAL'S APPROACH TO CIVIL SOCIETY DEVELOPMENT EMPHASIZES CROSS-CULTURAL UNDERSTANDING AND EMPOWERMENT OF VULNERABLE AND UNDER-REPRESENTED MEMBERS OF SOCIETY

Return Reference	Explanation
CoreFormPartIII_PartIIILine4d Description of other program services	(Expenses \$ 12,981 including grants of \$ 0)(Revenue \$ 0) SHELTER AND INFRASTRUCTURE WHEN NATURAL DISASTERS DESTROY HOUSING OR CONFLICT FORCES FAMILIES TO FLEE THEIR HOMES, RELIEF INTERNATIONAL PROVIDES FOR TEMPORARY AND PERMANENT SHELTER RELIEF INTERNATIONAL ALSO CONTRIBUTES TO LOCAL INFRASTRUCTURE BY BUILDING SCHOOLS, IRRIGATION CANALS, AND COMMUNITY CENTERS IN IMPOVERISHED COMMUNITIES RELIEF INTERNATIONAL SUPPORTS TRAINING FOR LOCAL RESIDENTS SO THAT THEY CAN PARTICIPATE IN THE CONSTRUCTION PROCESS, CREATING LIVELIHOOD OPPORTUNITIES FOR COMMUNITY MEMBERS COMPLEMENTARY PROGRAMS HELP MAKE HOMES SAFER AND MORE COMFORTABLE BY PROMOTING PRODUCTS LIKE HIGH-EFFICIENCY COOK STOVES, WHICH DECREASE INDOOR AIR POLLUTION AND REDUCE THE NEED TO GATHER FUEL

Return Reference	Explanation
CoreFormPartIII_PartIIILine4d Description of other program services	(Expenses \$ 10,101 including grants of \$ 0)(Revenue \$ 0) EDUCATION AND EMPOWERMENT EDUCATION IS VITAL TO THE SOCIAL AND ECONOMIC INTEGRATION OF FUTURE GENERATIONS RELIEF INTERNATIONAL PLACES A SIGNIFICANT FOCUS ON THIS SECTOR TO ENSURE THAT CHILDREN AFFECTED BY CONFLICT CAN CONTINUE TO PURSUE THEIR EDUCATION PROGRAMS INCLUDE A WIDE RANGE OF ACTIVITIES TEACHER TRAINING PROGRAMS, BUILDING LIBRARIES AND INTERNET CENTERS, PROVIDING BOOKS AND CLASSROOM FURNITURE TO UNDER-RESOURCED SCHOOLS, AND PROMOTING EQUAL ACCESS TO EDUCATION THESE PROGRAMS ALSO EMPOWER YOUTH THROUGH SERVICE LEARNING AND LEADERSHIP TRAINING TO BECOME ACTIVE IN THEIR COMMUNITIES AND ACT AS AGENTS FOR CHANGE

Return Reference	Explanation
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

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS WITH THE ASSISTANCE OF THE ORGANIZATION'S CFO AND STAFF THE CFO AND PRESIDENT/CEO REVIEW THE RETURN BEFORE SUBMITTING VIA EMAIL TO THE FULL BOARD FOR THEIR REVIEW PRIOR TO ITS SUBMISSION TO THE IRS

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST STATEMENT 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 REFRAIN 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 WILL BE CONSIDERED A MAJOR MISCONDUCT AND THE EMPLOYEE WILL BE TERMINATED IMMEDIATELY FROM EMPLOYMENT WITH RELIEF INTERNATIONAL.

Return Reference**Explanation**

Form 990, Part VI, Line 15a Process to establish compensation of top management official

THE BOARD OF DIRECTORS APPROVED AND DECIDED UPON CEO AND CFO COMPENSATION BASED ON MARKET AND COMPARATIVE ANALYSIS IN 2014

Return Reference	Explanation
Form 990, Part VI, 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

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	RELIEF INTERNATIONAL PRESENTS ITS FINANCIAL STATEMENTS ON THE WEBSITE. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Other Program Revenue - Total Revenue 412865, Related or Exempt Function Revenue 412865, Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 ,

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2014

**Open to Public
Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
RELIEF INTERNATIONAL

Employer identification number

95-4300662

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(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	DC	RELIEF INTERNATIONAL	Related	0	0		No	0	Yes		100 %

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations 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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n		No
1o		No
1p		No
1q		No
1r		No
1s		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) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

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

Part VII Supplemental Information

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

Return Reference**Explanation**