Form **990**

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.

2018

DLN: 93493174010170 OMB No. 1545-0047

Treasu	•	the	► Go to <u>www.irs.gov/F</u> o	o <u>rm990</u> for instructions and the	latest in	nformat	ion.		Inspection	
			l alendar year, or tax year beginning	10-01-2018 , and ending 09-3	30-2019					
B Che	eck if ap	pplicable: change	C Name of organization COOPERATIVE HOUSING FOUNDATION				D Employ 52-084		fication number	
□ In	itial ret	turn	Doing business as GLOBAL COMMUNITIES							
☐ Final return/terminated ☐ Amended return ☐ Application pending		return	Number and street (or P.O. box if mail is r 8601 GEORGIA AVENUE NO 800	not delivered to street address) Room/si	uite		E Telephone number (301) 587-4700			
		F	City or town, state or province, country, a SILVER SPRING, MD 20910	nd ZIP or foreign postal code					.26,986,020	
			F Name and address of principal office	er:	H(a)	Is this :	group re		.20,500,020	
			DAVID WEISS 8601 GEORGIA AVENUE NO 800 SILVER SPRING, MD 20910	G.		subordi			□Yes ☑No	
I Ta	x-exen	npt status:	✓ 501(c)(3)	no.) 4947(a)(1) or 527	┤ ` ´	included	1?		Yes No	
J W	ebsit	e: ► WW	W.GLOBALCOMMUNITIES.ORG/	10.)	1		xemption	•	•	
K For	m of or	ganization:	✓ Corporation ☐ Trust ☐ Association	n ☐ Other ▶	L Year o	of formati	on: 1 952	M State	of legal domicile: NJ	
Р	art I	Sumi	marv							
		_	cribe the organization's mission or mos	st significant activities:						
e)	<u> </u>	SEE PART	III, LINE 1.							
anc	-									
E	-									
Governance			s box $\blacktriangleright \square$ if the organization disconti				f its net		1	
			of voting members of the governing boo					3	12	
Activities &	1		of independent voting members of the o					4	11	
Ě			nber of individuals employed in calenda					5	190	
Ę	1		nber of volunteers (estimate if necessar	• •			•	6	2	
⋖	7a	Total unre	elated business revenue from Part VIII,	column (C), line 12				7a		
	b	Net unrel	ated business taxable income from For	m 990-T, line 34				7b		
						Prior	Year		Current Year	
<u>Q:</u>	1		ions and grants (Part VIII, line 1h) .				89,845,	,251	94,527,02	
Ravenue	9	Program :	service revenue (Part VIII, line 2g) .				31,207	,855	28,381,85	
Α̈́	10	Investme	nt income (Part VIII, column (A), lines :	3, 4, and 7d)			-614,	,801	3,847,46	
	1		enue (Part VIII, column (A), lines 5, 6d					,696	71,55	
	12	Total reve	enue—add lines 8 through 11 (must eq	ual Part VIII, column (A), line 12)			120,507	,001	126,827,90	
	13	Grants ar	id similar amounts paid (Part IX, colum	n (A), lines 1-3)			39,027	,672	33,813,71	
	14	Benefits p	paid to or for members (Part IX, column	(A), line 4)				0	•	
&	15	Salaries,	other compensation, employee benefits	(Part IX, column (A), lines 5-10)			52,810,	,606	48,594,12	
3US	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)				0	•	
Expenses	b	Total fundr	aising expenses (Part IX, column (D), line 25	s) ►879,575						
ш	17	Other exp	penses (Part IX, column (A), lines 11a-	l1d, 11f-24e)			31,412,	,556	30,169,20	
	18	Total exp	enses. Add lines 13–17 (must equal Pa	rt IX, column (A), line 25)			123,250,	,834	112,577,03	
	19	Revenue	less expenses. Subtract line 18 from lir	ne 12			-2,743,	,833	14,250,86	
Net Assets or Fund Balances					Begi	inning of	Current '	Year	End of Year	
ssel 3aa	20	Total asse	ets (Part X, line 16)				270,297,	,336	301,010,310	
Ş₩.	21	Total liab	ilities (Part X, line 26)				131,478,	,234	147,435,30	
žĒ	22	Net asset	s or fund balances. Subtract line 21 fro	m line 20			138,819,	,102	153,575,01	
P	art II	Signa	ature Block					Į		
			erjury, I declare that I have examined in f, it is true, correct, and complete. Dec							
	nowle		i, it is true, correct, and complete. Dec	laration of preparer (other than only	icei) is be	ased on	an miori	iation of	Willelf preparer has	
		T.k								
		Signatu	re of officer			2020- Date	06-22			
Sigr Here		, "								
пен	_		WEISS PRESIDENT & CEO r print name and title							
		17	<u> </u>	parer's signature	Date			PTIN		
Pai	A	'		pa. 5. 5 Signature	- 400			P0028831	4	
	u pare	Sr Fi	rm's name ► GELMAN ROSENBERG & FREI	EDMAN			mployed EIN ► 52	2-1392008		
	-	;ı 								
บรัต	On	'Y F	rm's address ► 4550 MONTGOMERY AVE SUI	TE 800N		Phone	no. (301)	951-9090	l	
			BETHESDA, MD 208142930							
May :	the IR	S discuss	this return with the preparer shown ab	ove? (see instructions)				. 🗹	Yes 🗌 No	

Form	990 (2018)					Page 2					
Pa	statement of	of Program Servi	ce Accomplis	hments							
	Check if Sched	ule O contains a resp	onse or note to	any line in this Part III .		🗹					
1	Briefly describe the or	ganization's mission:									
LIVE DEVE EVER COLL INST	LIHOODS OF VULNERAE ELOPMENT OF THEIR OV LYONE'S NEEDS, UNDER ECTIVE ACTION. ONCE ITUTIONS, THE PRIVAT	BLE PEOPLE ACROSS VN LIVES AND LIVELI RSTAND THEIR RIGHT EMPOWERED, COMM E SECTOR AND CIVIL	THE GLOBE.OUR HOODS. EMPOW 'S AND THE NAT UNITIES ARE BE SOCIETY IN WA	CENTRAL GOAL IS TO VERED COMMUNITIES A URAL AND MARKET FOR ETTER ABLE TO BUILD C	NITY-LED CHANGE THAT IMPROV BUILD THE CAPACITY OF COMMU RE ABLE TO DRIVE CHANGE WHI CCES THAT AFFECT THEM, AND A CONSTRUCTIVE RELATIONSHIPS ABLE. IN TURN, LOCAL GOVERNI S.	JNITIES TO DIRECT THE EN THEY RECOGNIZE RE ABLE TO TAKE WITH GOVERNMENT					
2	Did the organization u	ındertake any signific	ant program ser	vices during the year w	hich were not listed on						
	the prior Form 990 or 990-EZ?										
	If "Yes," describe thes	se new services on Sc	hedule O.								
3	Did the organization o	ease conducting, or n	nake significant	changes in how it condu	ıcts, any program						
	services?	services?									
	If "Yes," describe thes	se changes on Schedu	le O.								
4		l 501(c)(4) organizati	ons are required	I to report the amount o	largest program services, as mea of grants and allocations to others						
4a	(Code: See Additional Data) (Expenses \$	92,460,368	including grants of \$	33,813,718) (Revenue \$	20,832,049)					
4b	(Code: See Additional Data) (Expenses \$	1,204,271	including grants of \$) (Revenue \$	7,549,806)					
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)					
4d	Other program service	,									
	(Expenses \$		luding grants of	<u> </u>) (Revenue \$)					
<u>4e</u>	Total program servi	ice expenses >	93,664,6	39		Form 990 (2018)					

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Nο 3 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? 4 Yes 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? 5 Nο 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? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Νo 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? Nο R 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 Yes q Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 No If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Yes 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 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 Nο 11d in Part X, line 16? If "Yes," complete Schedule D, Part IX 🥞 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a No b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? Yes 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 14b Yes valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Yes 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV 🖠 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Yes 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Nο Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a Nο b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Yes 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, Nο column (A), line 2? If "Yes," complete Schedule I, Parts I and III

		l	Yes	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
5a	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? If "Yes," complete Schedule L, Part I	25a		No
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? If "Yes," complete Schedule L, Part I	25b		No
6	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? If "Yes," complete Schedule L, Part II	26		No
7	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? If "Yes," complete Schedule L, Part III	27		No
3	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		N ₁
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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		N-
•	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		N
)	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		N
L	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
1	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
5a	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)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
5	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		N-
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N-
8	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	
Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			✓
			Yes	N

1b

b Enter the number of Forms W-2G included in line 1a.*Enter -0-* if not applicable .

1c

Yes

	this return	2a	190			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?				Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see	e mst	ructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the	year?		3a		No
b	If "Yes," has it filed a Form 990-T for this year?If "No" to line 3b, provide an explanation in Schedule O					
4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				Yes	
b	BR , CO , EG , GH , HA , HO , IZ , JO ,					
	If "Yes," enter the name of the foreign country: ▶NU , OC , RW , RI , CE , SY , TZ , TU ,	UP, Y	М			
5a	இச்சு ithseroogisomizationiliang anety divernands in the Bib இEN hebben that AsaRetiportab falloy eligne Blank grid			5a		No
b	$\label{eq:decomposition} \mbox{Did any taxable party notify the organization that it was or is a party to a prohibited tax}$	shelte	r transaction?	5b		No

b	If "Yes," has it filed a Form 990-T for this year?If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	$ BR\;, CO\;, EG\;, GH\;, HA\;, HO\;, IZ\;, JO\;, KE\;, LI\;, MI\;, MG\;, If\;"Yes,"\;enter\;the\;name\;of\;the\;foreign\;country:\;\blacktriangleright NU\;, OC\;, RW\;, RI\;, CE\;, SY\;, TZ\;, TU\;, UP\;, YM\;$			
5a	இச்சு ithserocojamization filanganety utionem perodisilbidue filiba SE Na hebbern trads a Retiporta of a Fryreiligne Blanding ridde Fibraan y issulf Accounts (FBAR).	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Ouganizations that may receive deductible contributions under costion 170(s)			

b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		

	not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during		

b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a		
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1	
4.4	Section FO1(a)(12) approximations Futors	7 I	

	the year?	3 ,	1 1	
	the year:		8	
9a	Did the sponsoring organization make any taxable distributions under section 4966? $$.		9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or relate	d person?	9b	
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1	
11	Section 501(c)(12) organizations. Enter:		1	
а	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 9	990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	
а	Is the organization licensed to issue qualified health plans in more than one state?	ah a duda O		

D	Gross receipts, included on Form 990, Fart VIII, line 12, for public use of club facilities	TOD				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 9	90 in l	ieu of Form 1041?	12a	ľ	
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax ye	ar? .		14a		No
•						

12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a	a Did the organization receive any payments for indoor tanning services during the tax year?			14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N			15	No
16	Is the organization an educational institution subject to the section 4968 excise tax on ne If "Yes," complete Form 4720, Schedule O			16	No

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to	lines
Se	ction A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 12		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		No
_Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
		\longrightarrow	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	$\sqcup \sqcup$		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	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?	16a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b	Yes	
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed AL , AK , AR , AZ , CA , CO , FL , GA , IL , MA , MI , ND , MN , MS , NH , NJ , NM , NY PA , RI , SC , TN , UT , VA , WA , WV , WI	Λ, NC,		
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☑ Own website ☐ Another's website ☑ 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: MARIO JABBOUR 8601 GEORGIA AVENUE SUITE 800 SILVER SPRING, MD 20910 (301) 587-4700			

Form 990 (2	2018)										Page 7
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	e in t	his	Part VI	١.			\square
Section	A. Officers, Directors, Tru	stees, Key E	mploy	rees	, an	d F	lighe	st C	Compensated En	nployees	
1a Complete year.	e this table for all persons require	ed to be listed.	Report	comp	ensa	tion	for th	е са	lendar year ending	with or within the o	rganization's tax
 List all 	of the organization's current off ation. Enter -0- in columns (D), (als o	or organizations), re	gardless of amount	
• List all o	of the organization's current key	employees, if	any. Se	e inst	ructi	ons	for de	finit	ion of "key employe	e."	
who receive	organization's five current high d reportable compensation (Box and any related organizations.)
	of the organization's former office e compensation from the organiz							ed e	employees who rece	ived more than \$10	0,000
	of the organization's former dire n, more than \$10,000 of reportab										e
	in the following order: individua d employees; and former such p		ectors;	instit	utior	nal t	rustee	s; of	ficers; key employe	es; highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.	
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, un off tor/t	t che inles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	•	MISC)	related organizations
See Addition	al Data Table										
-											

	(A) Name and Title	(B) Average hours per week (list any hours for related organizations	than o	one bo oth a direct	ox, u in off tor/ti	t che inles ficer rust	(D) Reportable compensation er and a stee) (D) Reportable compensation from the organization (W- 2/1099-MISC) (E) Reportable compensation from related organizations (W- 2/1099-MISC)					Estima amount o compens from t organizati relate	ited f other sation the on and
		below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				organiza	
See	Additional Data Table												
	Sub-Total						•				Ľ		
	otal from continuation sheets to Pa otal (add lines 1b and 1c)	•					▶		4,027,777	()		754,815
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos			bove	e) who	rece	eived more than \$3	100,000			
										ſ		Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>			ee, k	•			or hi	ghest compensated	l employee on	3	Yes	
4	For any individual listed on line 1a, is organization and related organization individual									n the	4	Yes	
5	Did any person listed on line 1a receive services rendered to the organization		-			-			-	lividual for	5	103	No
Se	ction B. Independent Contract	ors											
1	Complete this table for your five higher from the organization. Report comper										npen	sation	
	<u> </u>	(A) and business addre		'						(B) cription of services		(C) Compen	
GRF C	CPAS AND ADVISORS	ma basiness adare							AUDIT SER	•		-	285,308
BETH	MONTGOMERY AVE STE 800 NORTH ESDA, MD 20814 DIRECT								IT SOLUTIO	DNS			258,953
РО ВО	DINECT DX 75723 AGO, IL 606755723								III SOLOTIC	JIV.			230,933
LAYER	8 CONSULTING INC								IT CONSUL	TING			233,700
	OX 1154 MINSTER, MD 21158												
	NATIONAL ADVISORY PRODUCT								3RD PARTY	FIELD MONITORING			121,950
	GOVERNORS VIEW LANE ANDRIA, VA 22310												

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 \blacktriangleright 4

126,827,901

28,381,855

3,919,021

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all co	-	inizations must comp	olete column (A).	
Check if Schedule O contains a response or note to any	line in this Part IX	<u> </u>		<u> ⊔</u>
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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,393,479	3,393,479		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,010	3,010		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	30,417,229	30,417,229		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,431,643	97,446	3,332,184	2,013
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	11,818		6,976	4,842
7 Other salaries and wages	31,555,796	24,216,473	7,046,186	293,137
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,483,487	1,384,246	92,271	6,970
9 Other employee benefits	11,042,972	8,670,011	2,298,485	74,476
10 Payroll taxes	1,068,404	820,808	240,531	7,065
11 Fees for services (non-employees):				
a Management				
b Legal	224,239	182,474	39,821	1,944
c Accounting	521,725	278,238	243,487	
d Lobbying	21,631			21,631
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	200,017		200,017	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,885,429	1,897,342	781,141	206,946
12 Advertising and promotion	328,900	321,423	7,477	
13 Office expenses	2,043,140	1,689,997	338,526	14,617
14 Information technology				

2,681,421

2,570,421

268,211

304,428 662,190

7,424,644

5,082,210

1,743,790

1,253,147

1,953,657

112,577,038

1,829,842

2,064,236

190,089

504,098

7,424,550

5,074,495

1,312,067

1,164,486

728,600

93,664,639

851,579

361,567

66,564

304,428

156,236

94

431,723

44,455

1,189,076

18,032,824

144,618

11,558

1,856

7,715

44,206

35,981 879,575

Form 990 (2018)

15 Royalties .

16 Occupancy

20 Interest . . .

23 Insurance .

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

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

Total functional expenses. Add lines 1 through 24e
 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.
 Check here ► ☐ if following SOP 98-2 (ASC 958-720).

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O.)

a CONSTRUCTION EXP./MAT'L

b PARTICIPANT TRAINING

c EQUIP. PURCHASE/RENTAL

d CONTRACT ADMIN SUPPORT

e All other expenses

17 Travel .

Р	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part IX	(A) Beginning of year		∟ (B) End of year
	1	Cash-non-interest-bearing			7,557	1	14,563
	2	Savings and temporary cash investments .		[36,638,231	2	49,435,112
	3	Pledges and grants receivable, net			15,817,649	3	22,157,480
	4	Accounts receivable, net		[2,383,368	4	3,817,167
,	6	Loans and other receivables from current and for trustees, key employees, and highest compensate Part II of Schedule L. Loans and other receivables from other disqualities section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L.	fied en fied pe n 4958 ations o (see in	rsons (as defined under (c)(3)(B), and fsection 501(c)(9) structions) Complete		5	
ets	7	Notes and loans receivable, net	•		119,394,934	7	121,488,617
ssets	8	Inventories for sale or use				8	
Ø	9	Prepaid expenses and deferred charges			1,138,701	9	2,428,172
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	8,783,312			
	Ь	Less: accumulated depreciation	10b	4,237,744	4,628,630	10c	4,545,568

42,722,026

36.843.036

666.067

163.371

9.893.766

270.297.336

14,352,325

6.605.614

5.809.362

99,069,608

5,641,325

131.478.234

115.837.908

22,981,194

138,819,102

270,297,336

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31 32

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Page 11

43,207,443

39.025.834

13.781.241

301.010.316

13.850.923

2.076.966

4.799.222

115.598.736

11.109.457

147.435.304

126.181.880

27,393,132

153,575,012

301,010,316

Form **990** (2018)

963.254

145.865

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Liabilities 22

Fund Balance

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Assets 31

Net

Investments—publicly traded securities .

Intangible assets

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Other assets. See Part IV, line 11 . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons. Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24).

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here > \quad \text{and complete lines 30 through 34.}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

Investments—other securities. See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

Investments-program-related. See Part IV, line 11

Form 990 (2018)

3a

3b

Yes

Yes (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 52-0846183 Name: COOPERATIVE HOUSING FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

TURN ASSIST THEIR CITIZENS OR MEMBERS IN IMPROVING THEIR COMMUNITIES.

TECHNICAL ASSISTANCE: GLOBAL COMMUNITIES PROVIDES ASSISTANCE TO INDIVIDUALS AND INTERNATIONAL GOVERNMENTAL AND PRIVATE ORGANIZATIONS THAT IN

Form 990, Part III, Line 4b: CAPITAL ASSISTANCE: THROUGH ITS SUBSIDIARIES, GLOBAL COMMUNITIES MAKES MICRO CREDIT AND SMALL ENTERPRISE LOANS AT PREVAILING MARKET INTEREST

RATES TO LOW-INCOME INDIVIDUALS IN DEVELOPING COUNTRIES.

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

WILLIAM C LANE

WENDY J CHAMBERLIN

W STACY RHODES

KATHLEEN M LUZIK

LEOCADIA I ZAK

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TRUSTEE

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TRUSTEE

								organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DAVID WEISS PRESIDENT AND CEO	40.00	Х		x				433,546	0	42,466
CAROLINE BLAKELY CHAIR	1.00	х		х				0	0	0
RICHARD F CELESTE VICE CHAIR	1.00	х		х				0	0	0

		X	l	ΙX		1 0	n n	
CHAIR		^		^`				
RICHARD F CELESTE	1.00	X		x		0	C	
VICE CHAIR		χ.					3	
PETER L WOICKE	1.00	×		x		0	0	
TREASURER		,					9	
NANCY E DOMAN	1.00							

RICHARD F CELESTE	1.00	_	Х		0	0	
VICE CHAIR		^	^			ŭ	ı
PETER L WOICKE	1.00	¥	Х		0	0	
TREASURER			^			ŭ	
NANCY E ROMAN	1.00	X	х		0	0	
SECRETARY			^`		Ĭ	ĭ	ı

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	formulated	L	u un	CCCC		ascec,	′	(14/ 2/1000	(14, 2/4,000	overniention and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
RUDY CLINE-THOMAS TRUSTEE (BEG. 11/18)	1.00	Х						0	0	0	
HILLARY THOMAS-LAKE TRUSTEE (BEG. 03/19)	1.00	х						0	0	0	
MICHEL HOLSTEN EVP & COO (THROUGH 12/18)	40.00			х				318,469	0	58,599	
LONNA MILBURN SR. VP, PARTNERSHIPS (BEG. 09/18)	40.00			х				89,570	0	3,836	

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218,808

201,807

176,432

180,026

168,876

173,299

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50,895

48,486

34,379

44,613

41,986

32,003

40.00

40.00

40.00

32.00

40.00

40.00

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EVP & COO (THROUGH 12/18)
LONNA MILBURN
SR. VP, PARTNERSHIPS (BEG. 09/18)
ABHISHEK BHASIN

SR. VICE PRESIDENT & CFO

VICE PRESIDENT, DEVELOPMENT FINANCE

...... VP, HUMANITARIAN ASSISTANCE

GENERAL COUNSEL & CHIEF ETHICS

CONTROLLER & CHIEF ACCOUNTING

CHIEF HUMAN RESOURCE OFFICER

......

ELISSA LABORDE

PIA WANEK

ERIC O'NEILL

MARIO JABBOUR

JANIE PAYNE

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

COUNTRY DIRECTOR II (THROUGH 11/18)

MICHAEL TELFORD

CHIEF OF PARTY

JONATHAN ALLEN

BARRY REED

CHIEF OF PARTY

CHIEF OF PARTY

FORMER OFFICER

MAJDI FAWZI ABU ARJA

GUILLERMO BIRMINGHAM

........ CHIEF OF PARTY

	for related							(W- 2/1099-	(W- 2/1099-	organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
BILLY BLAKE CHIEF INFORMATION OFFICER	40.00				х			170,146	0	38,528
GLENN MOLLER SR. DIRECTOR PROGRAM	40.00				х			156,136	0	37,063
RANDALL LYNESS SENIOR DIRECTOR	40.00				х			161,347	0	37,721
JEFFREY SLOAT	40.00									

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209,875

195,921

185,225

177,506

232,478

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30,764

39,067

33,017

36,421

34,972

21,994

46,374

				Χ	252,087	
JOHN L FORMAN	40.00					
DIRECTOR, GLOBAL SECURITY			^		101,500	
JEFFREY SLOAT	40.00		Х		164.905	
SENIOR DIRECTOR			Х		161,347	
RANDALL LYNESS	40.00				464 247	
SR. DIRECTOR PROGRAM						

40.00

40.00

40.00

40.00

40.00

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.......

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

and Independent Contractors (A)

ANN BAILEY

FORMER OFFICER

Name and Title

week (list any hours for related organizations below dotted line)
40.00

(B)

Average

hours per

Position (do not check more than one box, unless person is both an officer and a director/trustee) employee

(C)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Institutiona

Reportable compensation from the organization (W-2/1099-MISC) 161,318

(D)

(E)

Reportable

compensation

from related

organizations

(W- 2/1099-

MISC)

Estimated

amount of other

compensation

from the

organization and

related organizations

41,631

efile	GR/	APHIC prin	nt - DO NOT PROCES	S As Filed Data -			DLN: 9	3493174010170
	IED n 990	ULE A		Charity Statu				OMB No. 1545-0047
90E		o or	Complete if the	organization is a sect 4947(a)(1) nonexe ► Attach to Form	empt charitable	trust.	r a section	2018
		the Treasury	▶ Go t	to <u>www.irs.gov/Form</u>	<u>990</u> for the late	st information		Open to Public Inspection
ame	of th	ne organiza E HOUSING FO					Employer identific	ation number
		Dancar (iau Dublia Chavitu Cto	Atua (All avanniantian		to this part \ (52-0846183	
	t I ganiza		for Public Charity Sta private foundation becau				see instructions.	
		A church, c	onvention of churches, or	association of churches	described in sec	tion 170(b)(1)	(A)(i).	
2	\Box	A school de	scribed in section 170(b)(1)(A)(ii). (Attach Scl	nedule E (Form 9	90 or 990-EZ).)		
}	$\overline{\Box}$	A hospital o	or a cooperative hospital s	ervice organization desc	ribed in section	170(b)(1)(A)(iii).	
ŀ		A medical r	esearch organization oper and state:	ated in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
;		-	tion operated for the ben (iv). (Complete Part II.)	efit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
•		A federal, s	tate, or local government	or governmental unit de	escribed in sectio	on 170(b)(1)(<i>A</i>	l)(v).	
,	✓	section 17	ition that normally receive 0(b)(1)(A)(vi). (Comple	ete Part II.)		_	ınit or from the gener	al public described in
1			ty trust described in secti					
			ural research organization ant college of agriculture.					ege or university or
		from activit investment	ition that normally receive ies related to its exempt f income and unrelated bus iee section 509(a)(2).	unctions—subject to cer siness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
		•	tion organized and opera		r public safety. S	ee section 509	(a)(4).	
		more public	ition organized and opera ly supported organization through 12d that describ	s described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
		Type I. A so	supporting organization op n(s) the power to regularl Part IV, Sections A and	erated, supervised, or c y appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
		Type II. A manageme	supporting organization s nt of the supporting organ plete Part IV, Sections	upervised or controlled i ization vested in the sar				
			unctionally integrated.					ted with, its
		Type III n functionally	organization(s) (see instru on-functionally integra integrated. The organizat). You must complete F	ted. A supporting organ tion generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported organ	
		Check this	oox if the organization rec or Type III non-functiona	eived a written determir	nation from the I		pe I, Type II, Type II	I functionally
	Enter		of supported organization	, , , ,	-		<u> </u>	
			ing information about the	supported organization(
	(i) N	lame of supp organizatior		(iii) Type of organization (described on lines 1- 10 above (see instructions))	organization (described on lines 1-10 above (see		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
tal								
		vork Reduc	tion Act Notice, see the	Instructions for	Cat. No. 11285	5F :	∟ Schedule A (Form 9	90 or 990-EZ) 2018

Page 2

	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1		129,466,969	115,572,185	107,930,876	89,845,251	94,527,025	537,342,306
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3							
4	Total. Add lines 1 through 3	129,466,969	115,572,185	107,930,876	89,845,251	94,527,025	537,342,306
5	The portion of total contributions by						

III. If the organization fails to qualify under the tests listed below, please complete Part III.)

3	The value of services or facilities furnished by a governmental unit to the organization without charge	-		_		_	
4	Total. Add lines 1 through 3	129,466,969	115,572,185	107,930,876	89,845,251	94,527,025	537,342,306
5 6	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) Public support. Subtract line 5 from line 4.						3,051,464 534,290,842
_	Section B. Total Support						
_	Calendar year (or fiscal year beginning in)	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f)Total
7	Amounts from line 4	129,466,969	115,572,185	107,930,876	89,845,251	94,527,025	537,342,306
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,485,972	1,467,055	681,088	1,763,748	3,836,168	9,234,031

	amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4.						534,290,842
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e)2018	(f)Total
7	Amounts from line 4	129,466,969	115,572,185	107,930,876	89,845,251	94,527,025	537,342,306
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,485,972	1,467,055	681,088	1,763,748	3,836,168	9,234,031
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10		542,882	137,974	205,932	68,696	-15,958	939,526
11	Total support. Add lines 7 through 10						547,515,863
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	159,105,564
13	First five years. If the Form 990 is f	or the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sec	tion 501(c)(3) orga	anization,
	check this box and stop here					▶□]
S	ection C. Computation of Publi						

	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d)2017	(e) 2018	(f)Total	
7	Amounts from line 4	129,466,969	115,572,185	107,930,876	89,845,251	94,527,025	537,342,306	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,485,972	1,467,055	681,088	1,763,748	3,836,168	9,234,031	
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
0.	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	542,882	137,974	205,932	68,696	-15,958	939,526	
1	Total support. Add lines 7						547,515,863	
2	through 10 Gross receipts from related activities,	etc. (see instructi	ons)			12	159,105,564	
_	First five years. If the Form 990 is f	-	•					
_	check this box and stop here	-			•	· · · · · · <u>-</u>		
S	ection C. Computation of Publi	ic Support Perc	entage					
	Public support percentage for 2018 (I			column (f))		14	97.580 %	
5	Public support percentage for 2017 So	chedule A, Part II,	line 14			15	98.690 %	
6a	33 1/3% support test-2018. If the	e organization did	not check the box	on line 13, and lin	e 14 is 33 1/3% or	more, check this	box	
b	and stop here. The organization qua 33 1/3% support test—2017. If the						,,▶☑ ck this	
.7a	box and stop here. The organization qualifies as a publicly supported organization							
b	organization	st—2017. If the o	rganization did no facts-and-circums	t check a box on li tances" test, check	k this box and sto	or 17a, and line o here.	▶□	
	supported organization						▶ 🗆	

15 16 17 Schedule A (Form 990 or 990-EZ) 2018

Р	art IIII Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		1 490 2
	(Complete only if you checked the box on line 10 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.)						
Se	ection A. Public Support						_
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	(or fiscal year beginning in) ► 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						
4	under section 513 Tax revenues levied for the						
4	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						
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
_	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
_	13 for the year. Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
J	from line 6.)						
Se	ection B. Total Support				•		•
	Calendar year	(2) 2014	(h) 2015	(a) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2016	(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. Add lines 10a and 10b.						
С 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	_			,		
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			1 (6)			
15	Public support percentage for 2018 (lin		•	, , ,		15	
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr						·
17	Investment income percentage for 201	. 8 (line 10c, colur	nn (f) divided by	line 13, column (f))	17	
18	Investment income percentage from 20					18	
19a	331/3% support tests—2018. If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lir	ne 17 is not
	more than 33 1/3%, check this box and s	stop here. The or	rganization qualifi	es as a publicly su	ipported organizati	ion	. ▶□
	33 1/3% support tests—2017. If the						
	not more than 33 1/3%, check this box	and stop here.	The organization o	qualifies as a publ	icly supported orga	anization	. ▶□
20	Private foundation. If the organization						►□

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1

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. Did the organization have any supported organization that does not have an IRS determination of status under section 509

1 (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).

2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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. 3b

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. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

3с checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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 4b supervised by or in connection with its supported organizations.

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. 4c 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 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the 5b

organization's organizing document? 5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6 7

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

7 complete Part I of Schedule L (Form 990 or 990-EZ). 8

8 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.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

9b

Did a disqualified person (as defined in line 9a) 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. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

answer line 10b below. 10a 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). 10b

Schedule A (Form 990 or 990-EZ) 2018

	leddie A (Point 990 01 990-EZ) 2016		- F	age 3
₽}	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	<u> </u>		<u> </u>
а	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?			
	governing body of a supported organization:	11a		
b	A family member of a person described in (a) above?	11b		
	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.	11 c		
S	Section B. Type I Supporting Organizations			
			Yes	No
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.	1		
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	2		
	organization.	-		ĺ
S	Section C. Type II Supporting Organizations			
			Yes	No
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).	1		
_	Section D. All Type III Supporting Organizations		<u> </u>	
	,,, = === ==,,, ======================		Yes	No
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
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).			
		2		
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.	3		
_	Section E. Type III Functionally-Integrated Supporting Organizations		<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct)	ions):		
_	a The organization satisfied the Activities Test. Complete line 2 below.	00		
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	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.	2a		
	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.	2b		<u> </u>
3	Parent of Supported Organizations. Answer (a) and (b) below.	<u> </u>		<u> </u>
	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? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		_

Sched	dule A (Form 990 or 990-EZ) 2018			Page 6
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	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	1 b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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	Chack have if the surrent year is the organization's first as a non-functionally in	toarst.	ad Type III supporting or	raprization (coo

Schedule A (Form 990 or 990-EZ) (2018)

b Applied to 2018 distributable amount
c Remainder. Subtract lines 4a and 4b from 4.
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines

See instructions.

d Excess from 2017.e Excess from 2018.

3j and 4c.

8 Breakdown of line 7:

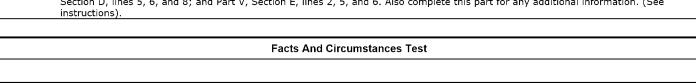
Additional Data

Software ID:

Software Version: EIN: 52-0846183

Name: COOPERATIVE HOUSING FOUNDATION

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).



SCHEDULE C (Form 990 or 990-

EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493174010170

Open to Public Inspection

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** COOPERATIVE HOUSING FOUNDATION 52-0846183 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No Was a correction made? 4a ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year? ☐ Yes 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.									
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0					
1									
2									
3									
4									
5									
6									
For Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat.	No. 50084S Schedule C (Form 990 or 990-EZ) 2018					

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Page 2

A	Check If the filing organization belongs to a expenses, and share of excess lobby		st in Part IV each a	affiliated group m	ember's name, a	address, EIN,
В	Check ▶ ☐ if the filing organization checked box	· ,	provisions apply.			
	Limits on Lobbyir (The term "expenditures" mean	ng Expenditures	,		a) Filing anization's totals	(b) Affiliated group totals
 1a	Total lobbying expenditures to influence public opi	inion (grass roots lobbying	ı)			
b	Total lobbying expenditures to influence a legislati	ive body (direct lobbying)				
c	Total lobbying expenditures (add lines 1a and 1b)					
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1c a					
f	Lobbying nontaxable amount. Enter the amount fro	om the following table in	both			
	If the amount on line 1e, column (a) or (b) is	s: The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on line	e 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	excess over \$500,00	0.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	excess over \$1,000,	000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the 6	excess over \$1,500,0	00.		
	Over \$17,000,000					
g	Grassroots nontaxable amount (enter 25% of line	1f)				
h	Subtract line 1g from line 1a. If zero or less, enter	r -0				
i	Subtract line 1f from line 1c. If zero or less, enter	-0				
j	If there is an amount other than zero on either line section 4911 tax for this year?					☐ Yes ☐ No
	(Some organizations that made	Averaging Period Un a section 501(h) ele e the separate instru	ction do not ha	ave to comple		five
	Lobbying Ex	penditures During 4	-Year Averagiı	ng Period	T	1
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					

Sche	hedule C (Form 990 or 990-EZ) 2018				F	Page 3
Pa	Part II-B Complete if the organization is exempt under section 501(c)(3 Form 5768 (election under section 501(h)).	3) and has NOT file	ed			
For e	r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description o	f the lobbying	<u>(a</u>)	(b)
	tivity.		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or including any attempt to influence public opinion on a legislative matter or referendum, the					
а	a Volunteers?			No		
b	b Paid staff or management (include compensation in expenses reported on lines 1c through	h 1i)?		No	1	
С	c Media advertisements?			No	1	
d	d Mailings to members, legislators, or the public?			No		
е	e Publications, or published or broadcast statements?			No		
f	f Grants to other organizations for lobbying purposes?			No		
g				No		
h				No		
i			Yes			21,631
j	j Total. Add lines 1c through 1i					21,631
2a	-			No		
b					1	
С						
d						
	art III-A Complete if the organization is exempt under section 501(c)(4		5) . 0	r sectio	n	
	501(c)(6).			. 500010		
1	Were substantially all (90% or more) dues received nondeductible by members?				Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior	r year?			3	
Pa	art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)((5), o	r sectio	n 501(c)(6)
	and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR (b) Part				, ,
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amous expenses for which the section 527(f) tax was paid).	nts of political				
а	a Current year		2a			
b	b Carryover from last year		2b			
C			2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section 162	2(e) dues .	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portio the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?	and political	4			
5			5			
	Part IV Supplemental Information					
Pro	Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A instructions), and Part II-B, line 1. Also, complete this part for any additional information.	(affiliated group list); F	Part II-	A, lines 1	and 2 (s	ee
1115		- L '				
	Return Reference Explan					
PAR	OUR CONGRESSIONAL OUTREACH IS FOR PURPOSES O LEGISLATORS, NOT FOR THE PURPOSES OF INFLUENCI MEMBER OF THE U.S. OVERSEAS COOPERATIVE DEVELO WERE BILLED AS LOBBYING EXPENSES AND ARE INCLU	NG LEGISLATION. GLO OPMENT COUNCIL. 20%	BAL CO	TINUMMC HE MEME	TES IS A BERSHIP I	DUES

ABOVE.

COMMUNITIES IS ALSO A MEMBER OF THE U.S. GLOBAL LEADERSHIP CAMPAIGN. 50% OF THE MEMBERSHIP DUES WERE BILLED AS LOBBYING EXPENSES AND ARE INCLUDED IN THE NUMBER LISTED

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

Supplemental Financial Statements

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

OMB No. 1545-0047

DLN: 93493174010170

Open to Public

Internal Revenue Service

(Form 990)

2

5

Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** COOPERATIVE HOUSING FOUNDATION 52-0846183 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? □ _{Yes} Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Par	3111	Organizations Ma	intaining Col	lections of Ar	t, Histori	cal T	reasur	es, or Oth	ner Similar As	i sets (conti	inued)	
3		g the organization's acqu s (check all that apply):	uisition, accession	n, and other reco	rds, check a	any of	the follo	owing that a	re a significant u	se of its coll	ection	
а		Public exhibition			d		Loan o	r exchange	programs			
b		Scholarly research			e		Other .					
c		Preservation for future	generations									
4	Provide Part >	de a description of the o		lections and expl	ain how the	y furtl	ner the o	organization	's exempt purpo	se in		
5	Durin	ng the year, did the orga ss to be sold to raise fun								☐ Yes	□ N	lo
Pai	rt IV	Escrow and Custo Complete if the org X, line 21.			Form 990	, Part	IV, line	e 9, or rep	orted an amou	nt on Forn	າ 990,	Part
1a		e organization an agent, ded on Form 990, Part X								☐ Yes	✓ N	lo
b	If "Y∈	es," explain the arrange	ment in Part XIII	and complete th	e following	table:			Aı	mount		_
c		nning balance		•	_			1c				_
d	Addit	ions during the year . .						. 1d				_
e	Distri	ibutions during the year						_ 1e				_
f	Endin	ng balance						. 1f				_
2a	Did th	he organization include	an amount on Fo	rm 990. Part X.	ine 21. for	escrov	or cust	odial accou	nt liability?	✓ Yes		— In
		es," explain the arranger										
	rt V	Endowment Fund										
				(a)Current year		rior yea		:)Two years b			our yea	rs back
1 a	Beginn	ning of year balance .										
b	Contrib	butions										
c	Net inv	vestment earnings, gain	s, and losses									
d	Grants	or scholarships										
		expenditures for facilitie ograms	es									
f	Admini	istrative expenses .										
g	End of	year balance										
2 a		de the estimated percer d designated or quasi-er			nce (line 1g	g, colu	mn (a))	held as:				
b		anent endowment >										
-	Temp	 porarily restricted endow	/ment ▶									
•		percentages on lines 2a,	***************************************	Id equal 100%.								
3a		here endowment funds	not in the posses	sion of the orgar	nization that	t are h	eld and	administere	d for the			
	_	nization by:								2-(:)	Yes	No
	• •	nrelated organizations				•				3a(i) 3a(ii)		
b		elated organizations . es" on 3a(ii), are the rela			ed on Sche	dule R	· ·			3b	+	
4		ribe in Part XIII the inte	-	•								<u> </u>
Pai	rt VI	, ,										
	Doscri	Complete if the orginal complete if the orginal complete if the orginal complete.	janization ansv (a) Cost or oth		Form 990 Cost or other				ted depreciation	•	0. ook valu	10
	Descri	iption of property	(investme		Cost of other	Dasis (ocher)	(c) Accumula	ited depreciation	(u) <i>b</i>	ook valu	
1a	Land											
b	Buildin	ngs [
c	Leaseh	nold improvements				4,5	2,871		1,976,638		-	2,526,233
d	Equipm	ment [1,1	3,602		395,338			758,264
е	Other	[3,1	26,839		1,865,768			1,261,071

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

Part VII Investments—Other Securities. Complete if	the organization a	inswered "Yes" on	Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b Boo valu	ok Cos	(c) Method of valuation: t or end-of-year market value
(1) Financial derivatives	: : : =		
(3)Other(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments—Program Related.	•		
Complete if the organization answered 'Yes' or		/, line 11c. See Fo	
(a) Description of investment	(b) Book value	Cos	(c) Method of valuation: t or end-of-year market value
(1)INVESTMENT IN AL TAMWEEL ALSAREE (2)	137,	700	F
INVESTMENT IN BOAFO (LOCAL MICROFINANCE INSTITUTION IN GHANA)	904,	833	F
(3)INVESTMENT IN ATAS DE	18,248,	831	F
(4)INVESTMENT IN EGYPT LOAN GUARANTEE FUND (5)INVESTMENT IN EXPRESS MICROFINANCE-COLOMBIA	·	899 046	F F
(6)INVESTMENT IN VITAS PALESTINE (7)INVESTMENT IN EGYPT UND VITAS PALESTINE	18,696, 941,		F F
(8)	341,	+30	<u>'</u>
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) ▶	39,025,		
Part IX Other Assets. Complete if the organization answer (a) Descript), Part IV, line 11d. S	See Form 990, Part X, line 15. (b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			
Part X Other Liabilities. Complete if the organization		Form 990, Part 1	
See Form 990, Part X, line 25. 1. (a) Description of liability	(1	b) Book value	
(1) Federal income taxes			
INTERCOMPANY PAYABLES		7,479,235	
DEFERRED RENT INTRACOMPANY PAYABLES		2,232,584 112,725	
VITAS GROUP OTHER LIABILITIES		1,284,913	
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	•	11,109,457	
2. Liability for uncertain tax positions. In Part XIII, provide the text organization's liability for uncertain tax positions under FIN 48 (ASC		-	

Schedule D (Form 990) 2018

Part XI

h

3

4

b

C

Part XII

5

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Page 4

1,475,600

70,349

169,417

112.577.038

Schedule D (Form 990) 2018

112,407,621

124,638,643

c	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			

Add lines 2a through 2d

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Prior year adjustments

Other (Describe in Part XIII.) . .

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Add lines **4a** and **4b**

Other (Describe in Part XIII.)

Supplemental Information

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Total expenses and losses per audited financial statements

Donated services and use of facilities .

Net unrealized gains (losses) on investments . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional 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

2b 2c

2d 4a

4b

2a

2b

2c

2d

4a

4b

Explanation

2a

855,753 169,417 2,019,841

549.498

70.349

3 4c 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

2e

1

2e

3

4c

5

70,349

169.417

2,189,258
126,827,901
n.
112,477,970

Page 5		chedule D (Form 990) 2018	
	ormation (continued)	Part XIII Supplemental Info	
	Explanation	Return Reference	

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 52-0846183

Name: COOPERATIVE HOUSING FOUNDATION

Supplemental Information

- apprendict and matter					
Return Reference	Explanation				
PART IV, LINE 2B:	ON AUGUST 4, 2016, PURSUANT TO THE SERVICE AGREEMENT WITH THE OVERSEAS PRIVATE INVESTMENT CORPORATION (OPIC) DATED AS OF SEPTEMBER 22, 2011, THE REMAINING AGGREGATE AMOUNT OF EXPEN SES PAYABLE BY OPIC OF \$6,671,387 WAS DEPOSITED IN AN ESCROW ACCOUNT. U.S. BANK NATIONAL A SSOCIATION (ESCROW AGENT) HAS AGREED TO ACCEPT, HOLD AND DISBURSE THE FUNDS DEPOSITED IN A CCORDANCE WITH THE TERMS OF THE ESCROW AGREEMENT. THE ESCROW ACCOUNT HAS A BALANCE OF \$4,7				

Supplemental Information				
Return Reference	Explanation			
PART X, LINE 2:	FOR THE YEAR ENDED SEPTEMBER 30, 2019, GLOBAL COMMUNITIES AND RELATED ENTITIES HAVE DOCUME NTED THEIR CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAVE DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS			

upplemental Information							
Return Reference	Explanation						
PART XI, LINE 2D - OTHER ADJUSTMENTS:	WRITE UP OF LLC ELIMINATED DURING CONSOLIDATION 855,753.						

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	REVENUE FROM THE DISREGARDED ENTITY 1,932,328. FOREIGN CURRENCY GAIN INCLUDED IN OTHER INC OME ON THE 87,513. FINANCIAL STATEMENTS AND REPORTED AS CHANGE IN NET ASSETS ON FORM 990

S

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493174010170 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. **Open to Public** ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization COOPERATIVE HOUSING FOUNDATION 52-0846183 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the region (by type) (e.g., program service, describe for and investments employees, agents, specific type of region and independent fundraising, program in region service(s) in region contractors in services, investments, grants to recipients located in the region region) See Add'l Data 24 1,210 43,212,372 3a Sub-total . 51,194,231 b Total from continuation sheets to Part I . c Totals (add lines 3a and 3b) 24 1,210 94,406,603 Cat. No. 50082W For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2018

Page 2

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (q) Amount (h) Description (i) Method of valuation organization section cash grant cash of non-cash of non-cash grant and EIN (if (book, FMV, disbursement assistance assistance applicable) appraisal, other) See Add'l Data

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-121

68 Schedule F (Form 990) 2018

Technical Assistance South America 1 1,500 BANK Technical Assistance South Ame	chedule F (Form 990) 2018							Page 3
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 (book, FMV, appraisal, other TECHNICAL ASSISTANCE CENTRAL AMERICA AND THE CARIBBEAN TECHNICAL ASSISTANCE MIDDLE EAST AND NORTH AFRICA					ed States. Complete i	f the organization ar	swered "Yes" to Form 9	990, Part IV, line 1 6.
TECHNICAL ASSISTANCE CENTRAL AMERICA AND THE CARIBBEAN 27 1,247,621 BANK TECHNICAL ASSISTANCE MIDDLE EAST AND NORTH AFRICA 1 109,391 BANK			(c) Number of	(d) Amount of	(e) Manner of cash disbursement	non-cash	of non-cash	(book, FMV,
NORTH AFRICA	TECHNICAL ASSISTANCE		27	1,247,621	BANK			app. a.o.a., oe.,
TECHNICAL ASSISTANCE SOUTH AMERICA 1 1,500 BANK	TECHNICAL ASSISTANCE	MIDDLE EAST AND NORTH AFRICA	1	109,391	BANK			
	TECHNICAL ASSISTANCE	SOUTH AMERICA	1	1,500	BANK			

e ration (see Yes	□No
be pt of (see Yes	✓ No
n Foreign ✔ Yes	□No
by a	✓ No
Yes	✓ No
	Пио
- 1	Yes ed electing by a rm 8621). Yes

Schedule F (Fo	rm 990) 2018 Page 5
F a r	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; mounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Return	le F, Supplemental Information Explanation
Reference	

Additional Data

SUB-SAHARAN AFRICA

Software ID: Software Version:

i Sioii.

EIN: 52-0846183

Name: COOPERATIVE HOUSING FOUNDATION

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

(a) Region	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)	describe specific type of service(s) in region	(t) Iotal expenditures for region
MIDDLE EAST AND NORTH AFRICA	6	678		TECHNICAL ASSISTANCE/CAPITAL ASSISTANCE	13,440,699

187 PROGRAM SERVICES

TECHNICAL

ASSISTANCE/CAPITAL ASSISTANCE

12,237,028

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region services, grants to service(s) in region region recipients located in the region) CENTRAL AMERICA AND THE 111 PROGRAM SERVICES 4,647,254 TECHNICAL ASSISTANCE/CAPITAL CARIBBEAN ASSISTANCE EAST ASIA AND THE PACIFIC 11 PROGRAM SERVICES TECHNICAL 251,700 ASSISTANCE/CAPITAL ASSISTANCE

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	
EUROPE (INCLUDING ICELAND & GREENLAND)	2	102		TECHNICAL ASSISTANCE/CAPITAL ASSISTANCE	1,397,394	
RUSSIA AND NEIGHBORING STATES	1	63		TECHNICAL ASSISTANCE/CAPITAL ASSISTANCE	9,101,750	

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region services, grants to service(s) in region region recipients located in the region) 22 PROGRAM SERVICES 1.923.400 SOUTH AMERICA ITECHNICAL ASSISTANCE/CAPITAL ASSISTANCE SOUTH ASIA 36 PROGRAM SERVICES TECHNICAL 213,147 ASSISTANCE/CAPITAL ASSISTANCE

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) CENTRAL AMERICA AND THE 0 IGRANTS TO RECIPIENTS 9,275,550 CARIBBEAN LOCATED IN THE REGION EAST ASIA AND THE PACIFIC 0 IGRANTS TO RECIPIENTS 9.962 **ILOCATED IN THE REGION**

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) EUROPE (INCLUDING ICELAND 0 IGRANTS TO RECIPIENTS 4,864,238 & GREENLAND) LOCATED IN THE REGION MIDDLE EAST AND NORTH 0 IGRANTS TO RECIPIENTS 7,923,158 AFRICA **ILOCATED IN THE REGION**

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) SOUTH AMERICA 0 IGRANTS TO RECIPIENTS 190,727 LOCATED IN THE REGION SOUTH ASIA 0 IGRANTS TO RECIPIENTS 709,498 LOCATED IN THE REGION

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) SUB-SAHARAN AFRICA 0 IGRANTS TO RECIPIENTS 7,396,255 LOCATED IN THE REGION NORTH AMERICA 0 IGRANTS TO RECIPIENTS 47,840 LOCATED IN THE REGION

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) MIDDLE EAST AND NORTH 0 INVESTMENTS IN REGION 19,796,124 **AFRICA** SUB-SAHARAN AFRICA 0 INVESTMENTS IN REGION 904,833

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program service(s) in region services, grants to reaion recipients located in the reaion) 0 INVESTMENTS IN REGION 76,046 SOUTH AMERICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (a) Amount of (f) Manner of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL TECHNICAL 2.360.563 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN MIDDLE EAST ITECHNICAL 1,386,599 BANK

IAND NORTH

IAFRICA

IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL TECHNICAL 830,544 BANK AMERICA AND ASSISTANCE THE CARIBBEAN MIDDLE EAST TECHNICAL 514,305 BANK IAND NORTH ASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **ICENTRAL** TECHNICAL 238,256 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 225.603 BANK ITECHNICAL IAFRICA ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 203,612 BANK IAND NORTH **ASSISTANCE** AFRICA MIDDLE EAST TECHNICAL 171.249 BANK IAND NORTH **IASSISTANCE** AFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 163,177 BANK IAND NORTH **ASSISTANCE** IAFRICA ICENTRAL. TECHNICAL 151.689 BANK IAMERICA AND ASSISTANCE

THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL TECHNICAL 142,959 BANK AMERICA AND ASSISTANCE THE CARIBBEAN MIDDLE EAST TECHNICAL 133.151 BANK IAND NORTH ASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 131,574 BANK IAND NORTH **ASSISTANCE** AFRICA MIDDLE EAST TECHNICAL 130.870 BANK IAND NORTH **IASSISTANCE** AFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 128,707 BANK IAND NORTH IASSISTANCE AFRICA 127.663 BANK IEUROPE TECHNICAL ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 114,703 BANK IAND NORTH **ASSISTANCE** AFRICA MIDDLE EAST TECHNICAL 112.204 BANK IAND NORTH **IASSISTANCE** AFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 98,834 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 97.265 BANK IAND NORTH ASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST ITECHNICAL 92,781 BANK IAND NORTH IASSISTANCE IAFRICA SUB-SAHARAN TECHNICAL 88.931 BANK IAFRICA **IASSISTANCE**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST ITECHNICAL 87,524 BANK IAND NORTH IASSISTANCE IAFRICA SUB-SAHARAN TECHNICAL 84.105 BANK IAFRICA **IASSISTANCE**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) ISOUTH TECHNICAL 76,556 BANK IAMERICA IASSISTANCE MIDDLE EAST TECHNICAL 75,230 BANK IAND NORTH IASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL TECHNICAL 73.712 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN 62.943 BANK ISOUTH TECHNICAL IAMERICA **IASSISTANCE**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 62,061 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 61.730 BANK IAND NORTH ASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) IMIDDLE EAST ITECHNICAL 53,980 BANK IAND NORTH **ASSISTANCE** IAFRICA CENTRAL TECHNICAL 52.187 BANK IAMERICA AND **IASSISTANCE**

THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** ITECHNICAL 51,970 BANK lassistance. IEUROPE ITECHNICAL 50,880 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST ITECHNICAL 50,739 BANK IAND NORTH IASSISTANCE IAFRICA SUB-SAHARAN TECHNICAL 46.049 BANK IAFRICA **IASSISTANCE**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 45,765 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 44.638 BANK IAND NORTH ASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 41,264 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 39.639 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 39,600 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 38.611 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST ITECHNICAL 37,505 BANK IAND NORTH IASSISTANCE IAFRICA SUB-SAHARAN TECHNICAL 33.669 BANK IAFRICA **IASSISTANCE**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISOUTH ASIA ITECHNICAL 33,162 BANK lassistance. IEUROPE ITECHNICAL 32,717 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 30,459 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 25.474 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 23,040 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 21.724 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL TECHNICAL 19.000 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 16.606 BANK ITECHNICAL IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 15,805 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 15.491 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) IMIDDLE EAST ITECHNICAL 12,885 BANK IAND NORTH **ASSISTANCE** IAFRICA CENTRAL TECHNICAL 11.978 BANK IAMERICA AND **IASSISTANCE**

THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL TECHNICAL 11.596 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 11.017 BANK ITECHNICAL IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL. ITECHNICAL 9,800 BANK AMERICA AND ASSISTANCE THE CARIBBEAN MIDDLE EAST ITECHNICAL 8.833 BANK IAND NORTH **IASSISTANCE** IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 7,689 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 6.840 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL. ITECHNICAL 6.796 BANK AMERICA AND ASSISTANCE THE CARIBBEAN CENTRAL TECHNICAL 6.748 BANK IAMERICA AND **IASSISTANCE**

THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 6,422 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 6.320 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 6,230 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 5.310 BANK IAND NORTH ASSISTANCE **IAFRICA**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** TECHNICAL 29,424 BANK IASSISTANCE ISUB-SAHARAN ITECHNICAL 1.144.637 BANK IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 1,143,110 BANK IAND NORTH IASSISTANCE AFRICA 963.048 BANK IEUROPE TECHNICAL ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **ICENTRAL** TECHNICAL 773,510 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 767.546 BANK ITECHNICAL IAFRICA ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** TECHNICAL 764,163 BANK ASSISTANCE ISUB-SAHARAN TECHNICAL 752,556 BANK IAFRICA ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **ICENTRAL** TECHNICAL 726,195 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 721.133 BANK ITECHNICAL IAFRICA ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 650,435 BANK IAFRICA IASSISTANCE MIDDLE EAST TECHNICAL 647,556 BANK IAND NORTH IASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 615,075 BANK IAFRICA ASSISTANCE **IEUROPE** TECHNICAL 521,470 BANK ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL TECHNICAL 498,458 BANK AMERICA AND ASSISTANCE THE CARIBBEAN ICENTRAL. TECHNICAL 459.880 BANK IAMERICA AND ASSISTANCE THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **ICENTRAL** TECHNICAL 431,799 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 358.643 BANK ITECHNICAL IAFRICA ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 328,789 BANK IAFRICA ASSISTANCE **IEUROPE** TECHNICAL 326,940 BANK ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 290,668 BANK IAFRICA ASSISTANCE **IEUROPE** TECHNICAL 280,494 BANK ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 279,696 BANK IAND NORTH **ASSISTANCE** AFRICA MIDDLE EAST TECHNICAL 264,509 BANK IAND NORTH **IASSISTANCE** AFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** TECHNICAL 259,060 BANK ASSISTANCE ICENTRAL. TECHNICAL 246.741 BANK IAMERICA AND ASSISTANCE ITHE CARIBBEAN I

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** TECHNICAL 231,944 BANK ASSISTANCE ICENTRAL. TECHNICAL 196.702 BANK IAMERICA AND ASSISTANCE ITHE CARIBBEAN I

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 190,257 BANK IAND NORTH **ASSISTANCE** AFRICA MIDDLE EAST TECHNICAL 188.158 BANK IAND NORTH **IASSISTANCE** AFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IMIDDLE EAST** TECHNICAL 172,113 BANK IAND NORTH IASSISTANCE AFRICA 168.256 BANK IEUROPE TECHNICAL ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) EUROPE TECHNICAL 166,356 BANK ASSISTANCE ISOUTH ASIA TECHNICAL 162,846 BANK lassistance.

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 153,949 BANK IAFRICA ASSISTANCE ISOUTH ASIA TECHNICAL 144,426 BANK ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 142,923 BANK IAFRICA ASSISTANCE **IEUROPE** TECHNICAL 141,016 BANK ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) EUROPE TECHNICAL 138,679 BANK ASSISTANCE **IEUROPE** TECHNICAL 138,637 BANK lassistance.

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 131,409 BANK IAND NORTH IASSISTANCE AFRICA ISUB-SAHARAN 114.275 BANK ITECHNICAL IAFRICA ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 109,618 BANK IAND NORTH **ASSISTANCE** AFRICA MIDDLE EAST TECHNICAL 107.725 BANK IAND NORTH **IASSISTANCE** AFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** TECHNICAL 102,025 BANK ASSISTANCE ISUB-SAHARAN TECHNICAL 88,185 BANK IAFRICA ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) FUROPE TECHNICAL 85.202 BANK **IASSISTANCE ICENTRAL** ITECHNICAL 83.601 BANK ASSISTANCE IAMERICA AND THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** ITECHNICAL 80,934 BANK lassistance. IEUROPE ITECHNICAL 78,890 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL. ITECHNICAL 76.748 BANK IAMERICA AND ASSISTANCE THE CARIBBEAN CENTRAL TECHNICAL 73.276 BANK IAMERICA AND **IASSISTANCE**

THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 68,849 BANK IAND NORTH IASSISTANCE IAFRICA SOUTH ASIA 65.844 BANK TECHNICAL ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 64,313 BANK IAFRICA IASSISTANCE SUB-SAHARAN ITECHNICAL 54,000 BANK IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL TECHNICAL 51.727 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN 51.406 BANK IEUROPE TECHNICAL **IASSISTANCE**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 51,215 BANK IAFRICA IASSISTANCE ISOUTH ASIA ITECHNICAL 50.533 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 50,411 BANK IAFRICA IASSISTANCE Isouth TECHNICAL 49.728 BANK IAMERICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) INORTH TECHNICAL 47.840 BANK IAMERICA **IASSISTANCE ICENTRAL** ITECHNICAL 47.464 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 47.163 BANK IAFRICA **IASSISTANCE** CENTRAL TECHNICAL 46.719 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 46.313 BANK IAFRICA **IASSISTANCE** CENTRAL TECHNICAL 44.303 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 42.688 BANK IAFRICA **IASSISTANCE** CENTRAL TECHNICAL 41.478 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL TECHNICAL 41.143 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 39.938 BANK ITECHNICAL IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN TECHNICAL 38.813 BANK IAFRICA **IASSISTANCE** CENTRAL TECHNICAL 37.838 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 36,260 BANK IAFRICA IASSISTANCE ISOUTH ASIA ITECHNICAL 36,101 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 36,000 BANK IAFRICA IASSISTANCE SUB-SAHARAN ITECHNICAL 35.813 BANK IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL. ITECHNICAL 35,471 BANK AMERICA AND ASSISTANCE THE CARIBBEAN MIDDLE EAST ITECHNICAL 34.023 BANK IAND NORTH **IASSISTANCE** IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 33,938 BANK IAFRICA IASSISTANCE ISOUTH ASIA ITECHNICAL 33,851 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISOUTH ASIA TECHNICAL 30.164 BANK **IASSISTANCE ICENTRAL** ITECHNICAL 29.561 BANK ASSISTANCE IAMERICA AND THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) EUROPE TECHNICAL 28,627 BANK ASSISTANCE SUB-SAHARAN ITECHNICAL 28,313 BANK IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SOUTH ASIA TECHNICAL 28,266 BANK ASSISTANCE SUB-SAHARAN ITECHNICAL 27.938 BANK IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL TECHNICAL 26.912 BANK IAMERICA AND IASSISTANCE THE CARIBBEAN ISUB-SAHARAN 26.688 BANK ITECHNICAL IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL. ITECHNICAL 22,700 BANK AMERICA AND ASSISTANCE THE CARIBBEAN CENTRAL TECHNICAL 22.142 BANK IAMERICA AND **IASSISTANCE**

THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN **ITECHNICAL** 21,938 BANK IAFRICA IASSISTANCE MIDDLE EAST TECHNICAL 21.278 BANK IAND NORTH **IASSISTANCE** IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) IMIDDLE EAST ITECHNICAL 20,996 BANK IAND NORTH **ASSISTANCE** IAFRICA CENTRAL TECHNICAL 19.980 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** ITECHNICAL 19,962 BANK lassistance. ISOUTH ASIA ITECHNICAL 19,593 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL. ITECHNICAL 19,070 BANK IAMERICA AND ASSISTANCE THE CARIBBEAN CENTRAL TECHNICAL 18.829 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 18,375 BANK IAFRICA IASSISTANCE SUB-SAHARAN ITECHNICAL 18.375 BANK IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN TECHNICAL 18,375 BANK IAFRICA IASSISTANCE ISOUTH ASIA ITECHNICAL 16,396 BANK IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 16.316 BANK IAND NORTH IASSISTANCE IAFRICA SOUTH ASIA 16.010 BANK TECHNICAL ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TECHNICAL 15,353 BANK IAND NORTH ASSISTANCE IAFRICA MIDDLE EAST TECHNICAL 14.460 BANK IAND NORTH ASSISTANCE IAFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SOUTH ASIA TECHNICAL 14,147 BANK ASSISTANCE SOUTH ASIA TECHNICAL 13.318 BANK ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **I**EUROPE TECHNICAL 12.851 BANK **IASSISTANCE ICENTRAL** ITECHNICAL 12.690 BANK ASSISTANCE IAMERICA AND THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST ITECHNICAL 11,072 BANK IAND NORTH IASSISTANCE IAFRICA SUB-SAHARAN TECHNICAL 10.000 BANK IAFRICA **IASSISTANCE**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA AND TECHNICAL 9.962 BANK PACIFIC **IASSISTANCE** CENTRAL TECHNICAL 9.946 BANK IAMERICA AND **IASSISTANCE** THE CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISOUTH ASIA TECHNICAL 9,831 BANK ASSISTANCE SUB-SAHARAN ITECHNICAL 9.187 BANK IAFRICA IASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SOUTH ASIA TECHNICAL 7,902 BANK ASSISTANCE SOUTH ASIA TECHNICAL 7.371 BANK ASSISTANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description I l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) **ICENTRAL** TECHNICAL 5,826 BANK

IAMERICA AND IASSISTANCE THE CARIBBEAN

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Schedule I

(Form 990)

Department of the

Internal Revenue Service

Treasury

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

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

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2018
Open to Public

DLN: 93493174010170

Inspection

OOPERATIVE HOUSING FOUNDAT	TION					Limpioyer	dentification number
	11011					52-084618	33
Part I General Informa	tion on Grants	and Assistance					
Does the organization maint the selection criteria used to						e, and	☑ Yes ☐ N
Describe in Part IV the organ	•	_	-				
Part II Grants and Other Asthat received more th			nd Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part	IV, line 21, for any recipient
(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 noncash assista	
1) See Additional Data							
2)							
3)							
4)							
5)							
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9)							
10)							
11)							
12)							
2 Enter total number of sectio	. , . ,	-					15
3 Enter total number of other	organizations liste	d in the line 1 table .				•	10
or Paperwork Reduction Act Notice	, see the Instructio	ns for Form 990.		Cat. No. 50055	5P		Schedule I (Form 990) 2018

Page 2

Schedule I (Form 990) 2018

(1) (2)

(3) (4)

(5) (6)

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

OF FEDERALLY MANDATED A-133 AUDIT REPORTS, AND SPECIFIC AUDITS BY GLOBAL COMMUNITIES PERSONNEL AS APPROPRIATE.

FUNDS DISBURSED TO ORGANIZATIONS, REGARDLESS OF LOCATION, ARE MONITORED AND EVALUATED IN ACCORDANCE WITH OUR WRITTEN MONITORING AND EVALUATION POLICIES WHICH INCLUDE, REVIEW OF INVOICES, FINANCIAL REPORTS, RECORDS OF COMMUNICATIONS, SITE VISITS, PROGRAM REPORTS, COPIES

Explanation Return Reference

PART I, LINE 2:

Schedule I (Form 990) 2018

Additional Data

Forms 000 Sahadula I. Bowl	TI Cunata and	Name:	: : 52-0846183 : COOPERATIVE HOU				
Form 990,Schedule I, Part (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
BLACK HAWK COLLEGE 6600 34TH AVE MOLINE, IL 61265	36-2482309	501(C)(3)	14,892				TECHNICAL ASSISTANCE

6,032

TECHNICAL

ASSISTANCE

501(C)(3)

42-1060724

500 W RIVER DR DAVENPORT, IA 52801

INC

COMMUNITY HEALTH CARE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-2236285 OTHER 359.243 TECHNICAL CULTURAL PRACTICE LLC 4300 MONTGOMERY AVENUE LASSISTANCE SUITE 305

TECHNICAL

LASSISTANCE

17.852

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

BETHESDA, MD 20814

ECOVENTURES INT
2016 MOUNT VERNON AVENUE
SUITE 203

ALEXANDRIA, VA 22301

03-0415607

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 42-1404937 501(C)(3) 24.898 TECHNICAL HABITAT FOR HUMANITY 3625 MISSISSIPPI AVE LASSISTANCE TECHNICAL

LASSISTANCE

DAVENPORT, IA 52807

ICMA INTERNATIONAL 36-2167755 501(C)(3) 109,139

777 NORTH CAPITOL STREET NE SUITE
500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 20002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 46-0703206 OTHER 163.618 TECHNICAL INTERNATIONAL ADVISORY PRODUCTS AND SYSTEMS LASSISTANCE (I-APS) 5805 GOVERNORS VIEW LANE

TECHNICAL

ASSISTANCE

558,652

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OTHER

ALEXANDRIA, VA 22310

1616 N FORT MYER DR 1600

04-2679824

JOHN SNOW INC (JSI)

ARLINGTON, VA 22209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 90-0435352 OTHER 207.393 TECHNICAL KATZEN COMPANY 1700 K ST NW STE 440 LASSISTANCE

TECHNICAL

LASSISTANCE

68.739

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OTHER

1700 K ST NW STE 440 WASHINGTON, DC 20001 LINC LLC

WASHINGTON, DC 20002

810 7TH ST NF

46-2573007

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 81-5377245 501(C)(3) 6.000 MERCADO ON FIFTH ITECHNICAL 3707 AVENUE OF THE CITIES LASSISTANCE

MOLINE, IL 61265 MOLINE COMMUNITY 26-4075669 501(C)(3) 11.818 DEVELOPMENT CENTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TECHNICAL LASSISTANCE 1830 6 AVENUE MOLINE, IL 61265

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-1338892 501(C)(3) 682.213 TECHNICAL NATIONAL DEMOCRATIC INSTITUTE (NDI) LASSISTANCE

455 MASSACHUSETTS AVE NW 8TH FLOOR WASHINGTON, DC 20001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SPRINGFIELD, IL 62704

NORTHWATER LLC 27-2247146 OTHER 104,561 TECHNICAL 960 CLOCKTOWER DR SUITE F ASSISTANCE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government PARTNERS IN HEALTH 04-3567502 501(C)(3) 274.085 TECHNICAL

LASSISTANCE

888 COMMONWEALTH AVE 3RD FLOOR BOSTON, MA 02215		, , , ,	·		ASSISTANCE
PROJECT NOW INC	23-7303467	501(C)(3)	28,400		TECHNICAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

709- 711 4TH AVE

MOLINE, IL 61201

(f) Method of valuation (b) EIN (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) PROXIMITY INTERNATIONAL 47-1451606 OTHER 59.672 TECHNICAL

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

LLC

3317 2ND STREET EAST MOLINE, IL 61244

6851 WEST CHARLESTON BLVD LAS VEGAS NEVADA USA LAS VEGAS, NV 89117			,		ASSISTANCE
QC CONSTRUCTION WORKS	81-1777643	OTHER	6,800		TECHNICAL

LASSISTANCE

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 27-3065786 501(C)(6) 8,000 TECHNICAL OUAD CITIES CHAMBER OF A COTOTA NOT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 20036

COMMERCE 1601 W RIVER DR MOLINE, IL 61265					ASSISTANCE
SEARCH FOR COMMON GROUND 1730 RHODE ISLAND AVE NW SUITE 1101	52-1257425	501(C)(3)	46,210		TECHNICAL ASSISTANCE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 04-3030192 OTHER 223.801 THE MANOFF GROUP INC ITECHNICAL LASSISTANCE

4301 CONNECTICUT AVE NW SUITE 454 WASHINGTON, DC 20008

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ROCK ISLAND, IL 61201

TRINITY HEALTH FOUNDATION 36-3321751 501(C)(3) 9.922 TECHNICAL 2701 17TH STREET LASSISTANCE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) UNIVERSITY OF ILLINOIS 03-7600511 501(C)(3) 11.980 TECHNICAL 1901 S FIRST ST STE A LASSISTANCE CHAPAIGN, IL 61820 UNIVERSITY OF IOWA 42-6004813 501(C)(3) 13.894 TECHNICAL LASSISTANCE 129 E WASHINGTON ST-824

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

JEFFERSON BLD

IOWA CITY, IA 52242

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 52-0880375 501(C)(3) 364.478 TECHNICAL URBAN INSTITUTE

LASSISTANCE

2100 M STREET NW

WASHINGTON, DC 20037

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19317	74010	170
Sch	edule J	Co	ompensat	ion Information	10	1B No.	1545-0	0047
(Forr	n 990)		Compensa ganization answ	Trustees, Key Employees, and Hig ated Employees vered "Yes" on Form 990, Part IV, n to Form 990.	, line 23.		18	
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	ov/Form990 for	instructions and the latest inform	mation.		to Pul ectio	
Nar	ne of the organiz				Employer identificat			
COC	PERATIVE HOUSING	G FOUNDATION			52-0846183			
Pa	rt I Questi	ons Regarding Compensa	ition		32 00 10103			
							Yes	No
1a				f the following to or for a person liste ly relevant information regarding the				
	First-class	s or charter travel	lacksquare	Housing allowance or residence for	personal use			
	_	companions	닏	Payments for business use of perso				
		nification and gross-up payment	ts 📙	Health or social club dues or initiation				
	☐ Discretion	nary spending account	Ц	Personal services (e.g., maid, chauf	feur, chef)			
b		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding paym nplete Part III to explain	nent or reimbursement	1 b	Yes	
2				or allowing expenses incurred by all	. 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/I	executive Directo	r, regarding the items checked in line	elar			
3	organization's C	EO/Executive Director. Check a	Il that apply. Do	ed to establish the compensation of th not check any boxes for methods CEO/Executive Director, but explain i				
	Compans	ation committee	П	Written employment contract				
		ent compensation consultant		Compensation survey or study				
		of other organizations	$\overline{\mathbf{Z}}$	Approval by the board or compensa	tion committee			
4	During the year related organiza		990, Part VII, Se	ection A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-con	itrol payment? .			4a	Yes	
b		• •		lified retirement plan?		4b	Yes	
c	Participate in, o	r receive payment from, an equ	ity-based compe	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	olicable amounts for each item in Part	t III.			
	Only 501 (a)(2) F01(-)(4)	\i_ii					
5), 501(c)(4), and 501(c)(29)		the organization pay or accrue any				
,		ontingent on the revenues of:		the organization pay or accrue any				
а	The organization	n?				5a		No
b						5b		No
	If "Yes," on line	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any				
а	The organization	n?				6a		No
b						6b		No
	•	6a or 6b, describe in Part III.						
7	For persons liste payments not d	ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Ye	on A, line 1a, did s," describe in Pa	the organization provide any nonfixe rt III	d 	7	Yes	
8	subject to the ir	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," do		8		No
9				presumption procedure described in		9		
For F	Paperwork Redu	iction Act Notice, see the Ins	structions for Fo	orm 990. Cat. No. 5	50053T Schedule J	(Forn	1 990)	2018

For each individual whose compensation must be reported on Schedule J, report instructions, on row (ii). Do not list any individuals that are not listed on Form 99 Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to	90,	Part VII.					/idual.
(A) Name and Title			cdown of W-2 and/c		(C) Retirement and other	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2018	Page 3								
Part III Supplemental Inform	rt 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								
PART I, LINE 1A	HOUSING ALLOWANCE AMOUNTS WERE INCLUDED IN THE EMPLOYEES W-2 AS TAXABLE WAGES INCLUDED ON FORM 990, PART VII, SECTION A. THE AMOUNTS								

HAVE BEEN BROKEN OUT IN SCHEDULE J, PART II, COLUMN (B)(III).

Return Reference	Explanation
	4A- GUILLERMO BIRMINGHAM AND ANN BAILEY RECEIVED SEVERANCE PAYMENTS OF \$120,267 AND \$65,375, RESPECTIVELY. 4B- DAVID WEISS RECEIVED A 457F PAYMENT OF \$16,500.

Return Reference	Explanation
PART I, LINE 7	THE FOLLOWING INDIVIDUALS RECEIVED BONUSES: LONNA MILBURN \$15,000 BARRY REED \$2,575

I (Form 990) 2018

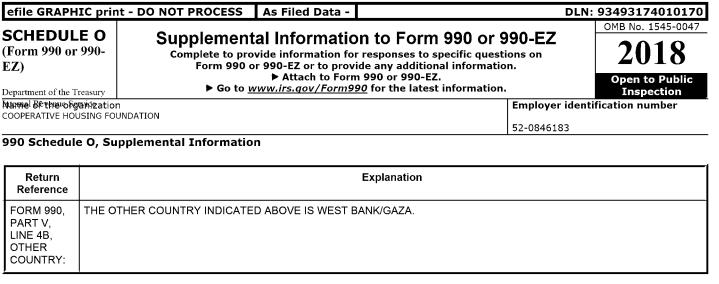
Software ID: Software Version:

EIN: 52-0846183

Name: COOPERATIVE HOUSING FOUNDATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

RESIDENT MOLEGO 10	Form 990, Schedule	₃ J,	Part II - Officers, Di	irectors, Trustees, K	ey Employees, and I	Highest Compensate	d Employees		
Description	(A) Name and Title			of W-2 and/or 1099-MIS	C compensation			(E) Total of columns	
MAND VARISS CONTROLLER CO			(i) Base Compensation	Bonus & incentive	Other reportable		benefits	(B)(i)-(D)	reported as deferred on
MOTE	DAVID WEISS	(i)	417,046	0	•	40.500	1.966	476.012	0
PUR A COD (PHEODOR) 27/187) (7) (8) (8) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	PRESIDENT AND CEO	(ii)	0	0	0		0	0	0
SS. NICE PRESIDENT & CTO (1) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	MICHEL HOLSTEN EVP & COO (THROUGH 12/18)	(i)	301,969 	0	16,500	40,500	18,099	377,068	0
SS NUCLEORISCIPATION (1) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ABHISHEK BHASIN	(1)	218 808	0	0	72,022	17.073	260 703	0
VICE PRESENT 10	SR. VICE PRESIDENT & CFO	(ii)				33,U22 	17,873	269,703 	
NEC PRESENT PRIMACE (f) 10 10 10 10 10 10 10 10 10 1	ELISSA LABORDE	(i)	201,807	0	0	30.571	17.915	250.293	0
W. HAMMACTARIAN W. H. HAMM		(ii)	0			30,3,1			
VR - HUMBANT-PARIAN VR - HUMBANT-PARIAN	PIA WANEK	(i)	176,432	0	0	16 716	17 663	210 811	0
SEMERAL COUNSEL & CUITE FINISC C	VP, HUMANITARIAN ASSISTANCE	(ii)	0	0	0			210,011	
CHITE PRINCES (1) 10 166,876 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ERIC O'NEILL	(i)	180,026	0	0	26,730	17,883	224,639	0
CONTROLLER A CHIEF ACCOUNTING (i) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CHIEF ETHICS	(ii)	0	0	0	0	0	0	0
ACCOUNTEND \$1.00 \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	MARIO JABBOUR	(i)	168,876	0	0	21,247	20,739	210,862	0
CHIEF INFARM RESOURCE (II) 0 0 0 0 0 0 0 0 0 0 0 0 0	ACCOUNTING	(ii)	0	0	0	0	0	0	0
OFFICER (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	JANIE PAYNE	(i)	173,299	0	0	16,759	15,244	205,302	0
CHIEF INFORMATION OFFICER (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	OFFICER	(ii)	0	0	0	0	0	0	0
OFFICER (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	BILLY BLAKE CHIEF INFORMATION	(i)	170,146	0	0	20,907	17,621	208,674	0
SR. DIRECTOR PROGRAM (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	OFFICER (i	(ii)	0	0	0	0	0	0	0
SENIOR DIRECTOR (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	GLENN MOLLER SR. DIRECTOR PROGRAM	(i)	156,136	0	0	19,499	17,564	193,199	0
SENIOR DIRECTOR (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(ii)	0	0	0	0	0	0	0
DIRECTOR, GLOBAL SECURITY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	RANDALL LYNESS SENIOR DIRECTOR	(i)	161,347	0	0	20,146	17,575	199,068	0
DIRECTOR, GLOBAL SECURITY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(ii)	0	0	0	0	0	0	0
O	DIRECTOR, GLOBAL	(i)	164,905	0	0	15,571	15,193	195,669	0
COUNTY DIRECTOR II (THROUGH 11/18) (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(ii)	0	0	0	0	0	0	0
MICHAEL TELFORD (I) 209,875 0 0 0 15,695 17,322 242,892 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	COUNTRY DIRECTOR II	(i)	237,709	0	14,378	20,430	18,637	291,154 	0
CHIEF OF PARTY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		<u>`</u>	0	0	0	0	0	0	0
ONATHAN ALLEN CHIEF OF PARTY		(i)	209,875	0	0	15,695	17,322	242,892 	0
CHIEF OF PARTY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		` ′	0	0	0	0	0	0	0
CHIEF OF PARTY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(i)	195,921	0	0	17,930	18,491	232,342	0
CHIEF OF PARTY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(ii)	0	0	0	0	0	0	0
CHIEF OF PARTY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	BARRY REED CHIEF OF PARTY	(i)	182,650	2,575	0	17,600	17,372	220,197 	0
CHIEF OF PARTY (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(ii)	0	0	0	0	0	0	0
FORMER OFFICER (i) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(i)	177,506	0	0	3,900	18,094	199,500	0
FORMER OFFICER (i) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CHILLEDMO DISMINICHAS	(ii)	0	0	0	0	0	0	0
		(i)	103,853	0	128,625	39,853 	6,521	278,852 	0
	ANNI DATI EV	(ii)	0	0	0	0	0	0	0
		(i)	90,268	0	71,050	35,645 	5,986	202,949 	0
		(ii)	0	0	0	0	0	0	0



Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION B, LINE 11B

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	GLOBAL COMMUNITIES HAS CONFLICT OF INTEREST POLICIES FOR BOTH THE BOARD AND EMPLOYEES, BOT
PART VI,	H OF WHICH REQUIRE COMPLETION OF AN ANNUAL DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS,
SECTION B,	POSITIONS, OR CIRCUMSTANCES THAT COULD CONTRIBUTE TO A CONFLICT OF INTEREST ARISING. DEPEN
LINE 12C	DING ON THE NATURE OF THE VIOLATION, THE OFFENDING INDIVIDUAL CAN BE SUBJECT TO DISCIPLINA
	RY ACTION LIP TO AND INCLUDING TERMINATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD ENGAGES THE SERVICES OF AN INDEPENDENT CONSULTING COMPANY TO COMPUTE THE CEO'S ALARY AND BENEFITS COMPARED TO THE COMPENSATION PAID TO CEOS OF SIMILAR AGENCIES OF SIMILA R SIZE WORKING IN THIS GEOGRAPHIC REGION. THE CONSULTANT ISSUES A SANCTION LETTER ADVISING THE BOARD OF A CEILING TO THE TOTAL COMPENSATION PACKAGE WHICH RECOMMENDATION THE BOARD A LWAYS FOLLOWS. GLOBAL COMMUNITIES USES AN INDEPENDENT SALARY SURVEY TO ESTABLISH THE SALARY RANGE FOR ALL EMPLOYEES INCLUDING SENIOR STAFF OTHER THAN THE CEO. ON THE BASIS OF THE CONSULTANT'S REPORT, GLOBAL COMMUNITIES REVIEWS ITS CURRENT COMPENSATION AND ROLE LEVELS AN JUSTING AS APPROPIATE AND PUBLISHES THE GLOBAL COMMUNITIES COMPENSATION GUIDE. THE LAST REVIEW TOOK PLACE IN SEPTEMBER 2018.

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND THE FINANC PART VI, IAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

SECTION C, LINE 19

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	FOREIGN CURRENCY VALUATION LOSS -87,513. CONVERTIBLE DEBT OPTION RESERVE IN VITAS JORDON 43,062.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2018

DLN: 93493174010170 OMB No. 1545-0047

> Open to Public Inspection

Employer identification number Name of the organization COOPERATIVE HOUSING FOUNDATION 52-0846183 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (e) (f) Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state End-of-year assets Direct controlling Primary activity Total income or foreign country) entity (1) CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC HOLDING COMPANY MD 34,747,617 158,604,828 GLOBAL COMMUNITIES 8601 GEORGIA AVE SUITE 300 SILVER SPRING, MD 20910 20-5526009 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. (d) (c) (e) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1) ENTIQUAL FOR TRADING CAPITAL ASSISTANCE JO N/A N/A GLOBAL COMMUNITIES Yes SWIFIEH FARAH COMPLEX 3RD FLOOR AMMAN 1189 66-666666 (2) GLOBAL COMMUNITIES BRASIL TECHNICAL ASSISTANCE BR N/A N/A GLOBAL COMMUNITIES Yes RUA URUGUAI NO 1120 SEGUNDO ANDAR C HORIZONTINA RIO GRANDE DO SUL 66-666666 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2018

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 ha
	one or more related organizations treated as a partnership during the tax year.

one or more related organizations treated as a part	nership during	trie tax	k 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	allocations?		Disproprtionate Code V-UBI		al or ging ner?	(k) Percentage ownership
(1) AL TAMWEEL AL SAREE LLC (ATAS-DE) 8601 GEORGIA AVE SUITE 300 SILVER SPRING, MD 20910 45-4597580	CAPITAL ASSISTANCE		GLOBAL COMMUNITIES	INVESTMENT RELATED	22,675,395	92,903,261	Yes	No No		Yes	No No	100.000 %
(2) BELL FINANCE LLC 1209 ORANGE STREET WILMINGTON, DE 19801 20-3149349	CAPITAL ASSISTANCE	DE	GLOBAL COMMUNITIES	INVESTMENT RELATED				No			No	100.000 %
Part IV Identification of Related Organizations Taxable because it had one or more related organizations tr						nswered "Ye	s" on F	orm 9	990, Part I\	/, line	e 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	(d) Direct controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section (13) col enti	512(b) ntrolled ity?		
		country)		or trust)				Yes	No		
(1)VITAS SAL ABU-EZZIDEEN BLDG 5TH FLOOR EL HU BEIRUT LE 66-6666666	CAPITAL ASSISTANCE	LE	CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC	С	7,132,542	33,912,288	51.000 %	Yes			
(2)EXPRESS FINANCE STR LIVIU REBREANU NR 13 TIMISOARA 300479 RO 66-666666	CAPITAL ASSISTANCE	RO	CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC	С	3,378,225	17,416,563	100.000 %	Yes			
(3)ATASM AL SALAM BUILDING 3RD FLOOR BEIRUT LE 66-6666666	CAPITAL ASSISTANCE	LE	GLOBAL COMMUNITIES	С	1,183,305	1,810,323	99.230 %	Yes			
(4)PARTNERS FOR FINANCE DBA VITAS JORDAN WAKALAT STR FARAH COMPLEX AMMAN JO 66-6666666	CAPITAL ASSISTANCE	ЈО	CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC	С	15,046,368	72,025,885	100.000 %	Yes			
(5)MCSE NILE CITY TOWERS 22ND FL NORTH TOW CAIRO EG 66-666666	CAPITAL ASSISTANCE	EG	GLOBAL COMMUNITIES	С	388,577	79,698	99.920 %	Yes			
(6)EXPRESS MICROFINANZAS SAS CALLE 36 SUR NO 77 - 46 BOGOTA CO 66-6666666	CAPITAL ASSISTANCE	со	GLOBAL COMMUNITIES	С	3,930	5,860	100.000 %	Yes			
(7)VITAS PALESTINE ABU IYAD STREET NEAR RED CROSS AL BIREH PALESTINE OC 66-6666666	CAPITAL ASSISTANCE	ос	GLOBAL COMMUNITIES	С	10,530,354	59,550,583	100.000 %	Yes	018		
Schedule R (Form 990) 2018											

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.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e	Yes	
f Dividends from related organization(s)	1 f	Yes	
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No

Page **3**

Schedule R (Form 990) 2018

	Desformance of anytime as manch making a firm during a distribution by valated agreement (a)	1m		No					
m	m Performance of services or membership or fundraising solicitations by related organization(s)								
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)	10		No					
	Poimburgement paid to related organization(s) for expenses	1p	Yes	<u> </u>					
	Reimbursement paid to related organization(s) for expenses	<u> </u>		<u> </u>					
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	<u> </u>					
r	Other transfer of cash or property to related organization(s)	1r		No					
s	Other transfer of cash or property from related organization(s)	1s	Yes						
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.								
See A	dditional Data Table								

 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.

		<u>_</u>											
(a) Name, address, and EIN of entity	(b) Primary activity		sections 512-		section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	?	(k) Percentage ownership
			514)	Yes	No		<u> </u>	Yes	No		Yes	No	ı
					\					Schedul	e R (Form	1 990	0) 2018

chedule R (For	m 990) 2018	Page	e 5								
Part VII	Supplemental Info	on									
	Provide additional infor	mation for responses to questions on Schedule R (see instructions).									
Return Reference		Explanation									

Additional Data

ABU-EZZIDEEN BLDG 5TH FLOOR EL HU

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66-666666

(1) VITAS SAL

(1) EXPRESS FINANCE

TIMISOARA 300479

STR LIVIU REBREANU NR 13

AL SALAM BUILDING 3RD FLOOR

PARTNERS FOR FINANCE DBA VITAS

NILE CITY TOWERS 22ND FL NORTH TOW

(5) EXPRESS MICROFINANZAS SAS

ABU IYAD STREET NEAR RED CROSS

CALLE 36 SUR NO 77 - 46

(6) VITAS PALESTINE

AL BIREH PALESTINE

WAKALAT STR FARAH COMPLEX

BEIRUT

LE 66-666666

RO

(3)

(2) ATASM

BEIRUT LE 66-666666

JORDAN

AMMAN JO

(4) MCSE

CAIRO EG 66-666666

BOGOTA CO

OC 66-666666 Software ID:

CAPITAL ASSISTANCE

Software Version:

LE

RO

LE

JO

EG

CO

OC

FTN: 52-0846183

		E211. 52 00 10	103									
	ı	Name: COOPER	RATIVE HOUSING FO	DUNDATION								
Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust												
(a)	(b)	(c)	(d)	(e)	(f)		(g)		(h)	(i	i)	

Name: COOPERATIVE HOUSING FOUNDATION								
Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust								
(a) Name, address, and EIN of	(b) Primary activity	(c) Legal	(d) Direct controlling	(e) Type of entity	(f) Share of total	(g) Share of end-of-year	(h) Percentage	(i) Section 512
related organization		domicile (state or foreign	entity	(C corp, S corp, or trust)	income	assets	ownership	(b)(13) controlled

CHF DEVELOPMNENT IC

CHF DEVELOPMNENT C

CHF DEVELOPMNENT C

INTERNATIONAL LLC

INTERNATIONAL LLC

INTERNATIONAL LLC

FINANCE

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COMMUNITIES

COMMUNITIES

COMMUNITIES

COMMUNITIES

7,132,542

3,378,225

1,183,305

15,046,368

388,577

3,930

10,530,354

33,912,288

17,416,563

1,810,323

72,025,885

79,698

5,860

59,550,583

No

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

51.000 %

100.000 %

99.230 %

100.000 %

99.920 %

100.000 %

100.000 %

(a) (b) (c) Name of related organization Amount Involved (d) Transaction type(a-s) Method of determining amount involved (1) CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC 1,300,000 FMV В FMV (1) AMEEN SAL D 3,000,000 (2) CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC Е 1,300,000 FMV FMV (3) CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC F 625,000 VITAS PALESTINE FMV (4) F 160,051 FMV (5) VITAS JORDAN Ρ 21,843 (6) **ATAS** 4,228,188 FMV Q (7) CHF DEVELOPMNENT FINANCE INTERNATIONAL LLC Q 154,146 FMV (8) VITAS PALESTINE Q 426,167 FMV (9) VITAS JORDAN Q 217,857 FMV (10) AMEEN SAL Q 217,959 FMV

Q

S

FMV

FMV

113,562

286,496

Form 990, Schedule R, Part V - Transactions With Related Organizations

VITAS-INSTITUTIE FINANCIARA NEBANCARA SA

EXPRESS MICROFINANZAS SAS

(11)

(12)