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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

JSA 7E1010 1 000 TN5186 2532

▶ Do not enter social security numbers on this form as it may be made public

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

, 2017, and ending

Open to Public Inspection

, 20

FOI	r the 2017 calendar year, or tax year beginning , 2017, and e	
	C Name of organization	D Employer identification number
Chec	ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT	98-0211642
	Address change Doing business as	
	Name change Number and street (or P O box if mail is not delivered to street address) Room.	/suite E Telephone number
7	Initial return P.O. BOX 2192 <mark>3, SAFAT_13080</mark>	44 7799582778
	Final return/ City or town-state or province, country and ZIP or foreign postal code	
	Amended KUWATT CITY KUWATT	G Gross receipts \$ 380, 493, 86
	Application F Name and address of principal officer MR. ABDULATIF Y. AL-HAMA	H(a) Is this a group return for subordinates?
	SAME AS "C" ABOVE	Subordinates H(b) Are all subordinates included? Yes
Ta	ix-exempt status $501(c)(3)$ \times $501(c)(0.4)$ (insert no.) $4947(a)(1)$ or	527/ If 'No " attach a list (see instructions)
W	ebsite > WWW.ARABFUND.ORG	U H(c) Group exemption number ▶
Fo	orm of organization X Corporation Trust Association Other ▶ L	Year of formation 1968 M State of legal domicile K
⊃ar		
	Briefly describe the organization's mission or most significant activities TO CONTRI	BUTE TO THE FINANCING OF
	ECONOMIC & SOCIAL DEVELOPMENT IN THE ARAB STATES. TH	E ORGANIZATION
Governance	PROVIDES TECHNICAL ASSISTANCE GRANTS & SUPPORTS A FE	
5	2 Check this box If the organization discontinued its operations or disposed of m	nore than 25% of its net assets
၌	3 Number of voting members of the governing body (Part VI, line 1a)	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	
8 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	
<u> </u>	6 Total number of volunteers (estimate if necessary)	
2	7a Total unrelated business revenue from Part-VIII_column (C), line 12	
1		
+	I LEVED 1	Prior Year Current Year
	8 Contributions and grants (Part VIII, line (In)	0.
1	9 Program service revenue (Part VIII, line 2g)	163,879,522. 236,108,717
1	Investment income (Part VIII, column (A) lines 3, 4, and 7d).	37,898,877. 138,801,907
	1 Other revenue (Part VIII, column (A), lines 5 6d-8c, 9c, 10c, and 11e)	2,179,696. 5,583,243
1	2 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).	203,958,095. 380,493,867
-	3 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	4 Benefits paid to or for members (Part IX, column (A), line 4)	
	5 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	02 000 100 02 041 565
ונב	6 a Professional fundraising fees (Part IX, column (A), line 11e)	
<u>ā</u> .	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0	
۱ [[]	7 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,199,214. 12,850,513
- 1	8 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	20 201 242 26 602 076
- 1 -	9 Revenue less expenses Subtract line 18 from line 12	100 000 000 000 000
S S		Beginning of Current Year End of Year
[2	20 Total assets (Part X, line 16)	11184583402. 11871793172
Fund Balanc		271,127,844. 252,323,500
틸 2		10913455558. 11619469672
art		
nder	r penalties of periory. I declare that I have examined this return including accompanying schedules and	d statements, and to the best of my knowledge and belief, if
ue c	correct and complete Declaration of preparer (other than officer) is based on all information of which preparer	parer has any knowledge
		Gataba 15 1
gn	Signature of officer	Date /
ere	FUAD ABBAS INVESTMENT	OFFICER
	Type or print name and title	
	Print/Type preparer's name Preparer's signature Da	I CHECK I I II I
ud		10/18/2018 self-employed P01343131
	PRICEWATERHOUSECOOPERS LLP	Firm's EIN ▶ 13-4008324
•		
epa se O	Firm's address ▶300 MADISON AVENUE NEW YORK, NY 10017	Phone no 646-471-3000

m 990 (2017	·)			Page 2
art III	Statement of Program Service Accomplis	shments	<u>-</u>	
	Check if Schedule O contains a response	or note to any line in this Pa	rt III	X
	scribe the organization's mission			
ATTA	CHMENT 1		 	
		· 		
	organization undertake any significant prog			
	n 990 or 990-EZ?			Yes X No
	escribe these new services on Schedule O			
	organization cease conducting, or mak	-		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
				Yes X No
	the organization's program service acco	amplishments for each of	its three largest program	services as measured h
	Section 501(c)(3) and 501(c)(4) organi			
	expenses, and revenue, if any, for each pro		F 3	
(Code) (Expenses \$ 27,673,960 II	ncluding grants of \$	o) (Revenue \$	241,660,590)
THE AR	AB FUND'S PRIMARY ACTIVITY IS			·
OF FIN	ANCING ECONOMIC AND SOCIAL DE	VELOPMENT IN MEMBE	R STATES. THE	
CATEGO	RIES OF INFRASTRUCTURE AND PR	ODUCTIVE PURPOSES	FOR WHICH	
LOANS	ARE EXTENDED ARE AS FOLLOWS:	TRANSPORT, TELECOM	MUNICATIONS,	
ENERGY	AND ELECTRICITY, WATER AND S	EWAGE, INDUSTRY AND	D MINING,	
AGRICU	LTURE AND RURAL DEVELOPMENT.			
(Code _) (Expenses \$ 4,941,779 II			0)
	AB FUND PROVIDES TECHNICAL AS			
	AND INTERNATIONAL ORGANIZATI	<u> </u>		
	STATES TO ENHANCE DEVELOPMEN			
	INSTITUTIONAL SUPPORT. TECHNI			
	AB FUND ARE PRIMARILY AWARDED			
	PREPARATION, INSTITUTIONAL			
	S AND RESEARCH, SEMINARS AND	CONFERENCES, EMERGI	ENCY	
PROGRAI	15.			
				-
(Code) (Expenses \$ 329, 452 II	ocluding grants of \$	n) (Revenue \$	0)
	AB FUND FELLOWSHIPS PROGRAM W			
	RPOSE OF THE PROGRAM IS TO PR			
HAVE E	CELLENT ACADEMIC TRACK RECOR	D WITH OPPORTUNITI	ES TO CONDUCT	
	CH AND/OR LECTURE IN THE BEST			
	4 IS ALSO EXPECTED TO BUILD B			
	SITIES, WHICH WILL LEAD TO MU			
	,			
				
-	ogram services (Describe in Schedule O)			
(Expense) (Revenu	ie \$)	
Total pro	gram service expenses ► 32,945	,191.		
				Form 990 (2017
020 1 000	86 2532			PAGE

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," Χ X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?...... 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Χ 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? If "Yes," complete Schedule C, Part II...................... 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? If "Yes," complete Schedule C, Χ Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 Χ Did the organization receive or hold a conservation easement, including easements to preserve open space, Χ 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? If "Yes," Χ 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 Х Did the organization, directly or through a related organization, hold assets in temporarily restricted Χ endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Χ 11a b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more Χ c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more Χ d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Χ the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes" complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. 14a Did the organization maintain an office, employees, or agents outside of the United States?......... 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Х Part IX, 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 18 18 Χ Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Χ 19

Part IV Checklist of Required Schedules (continued) No Χ 20a 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?..... Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Χ 21 domestic 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 22 Χ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b Χ 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... Did the organization maintain an escrow account other than a refunding escrow at any time during the year Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25 a Χ transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Χ Did the organization report any amount on Part X. line 5, 6, or 22 for receivables from or payables to any 26 current or former officers, directors, trustees, key employees, highest compensated employees, or Χ 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Χ Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) Χ A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) Χ 28c was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. . . . 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Χ 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 Χ 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Χ 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 Х Χ Did the organization have a controlled entity within the meaning of section 512(b)(13)?....... If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a 35b controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 19? Note All Form 990 filers are required to complete Schedule O

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. X
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		1	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return.	2b	ŀ	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20		
2.	Note If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	, ,		
	account)?	4a	Х	
b	If "Yes," enter the name of the foreign country ▶ ATTACHMENT 2		·	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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	_		v
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	-	Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6b		
-	gifts were not tax deductible?	90		
	Organizations that may receive deductible contributions under section 170(c) Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		,	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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?. \cdot	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		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30		
10	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1	
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?	13a		
	Note See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
		14a		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14b		

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sect	ion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or	1a 8			
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	41. 0			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re				X
	any other officer, director, trustee, or key employee?		2	_	^
3	Did the organization delegate control over management duties customarily performed by or ur		ا ۾ ا		X
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's		5	X	Λ
6	Did the organization have members or stockholders?		6	^_	
7a	Did the organization have members, stockholders, or other persons who had the power to el		_	v	
	one or more members of the governing body?		7a	_X	
b	Are any governance decisions of the organization reserved to (or subject to approval		<u></u>	v	
	stockholders, or persons other than the governing body?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions under the year by the following	ertaken during			
а	The governing body?		8a	Χ	
	Each committee with authority to act on behalf of the governing body?		8b	Χ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	be reached at	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Inte-		Code)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of				
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt pi		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi		11a		Χ
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	3			
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		Χ
	Were officers, directors, or trustees, and key employees required to disclose annually interests				
	rise to conflicts?		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the p	olicy? If "Yes,"			
	describe in Schedule O how this was done		12c	_	
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review ar				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	X	
	Other officers or key employees of the organization		15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				j
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arrangement			
	with a taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	safeguard the	16b		
Secti	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (Section	501(c)(3)s	only)
	available for public inspection Indicate how you made these available Check all that apply Own website Another's website X Upon request Other (explain in Sch			,,-,-	7 7
19	Describe in Schedule O whether (and if so, how) the organization made its governing documen	s, conflict of int	erest	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 to NICK TURNER 37 MILLER PLACE OXI3 6FX	ooks and record	s ▶ 77995	582778	3

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any	box.	unle	Pos heck ss pe	erson	e than o is both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	1 4 5	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)SAEID RASHED AL YATEEM	1.00				•					
DIRECTOR	0.	Х						30,000.	0.	0.
(2)ALI BIN MOHAMAD REDA BIN JAFFA	1.00						_			
DIRECTOR	0.	Х						30,000.	0.	0.
(3)FOUZI LAKJAA	1.00		<u> </u>							
DIRECTOR	0.	Х	1					30,000.	0.	0.
(4)SHEHAB AL DEEN ABDOULLA	1.00									
DIRECTOR	0.	Х						30,000.	0.	0.
(5)ABDOULRAHMAN RAWYA	1.00									
DIRECTOR THRU 12/24/2017	0.	Х						15,000.	0.	0.
(6)JAMAL KHAZNAJI	1.00									
DIRECTOR SINCE 11/21/2017	0.	Х						5,000.	0.	0 .
(7)ABD-ELWAHAB BADR	1.00									
DIRECTOR	0.	Х						30,000.	0.	0.
(8) IBRAHIM MOHAMMED AL MEFLEH	1.00									
DIRECTOR THRU 4/30/2017	0.	Х						10,000.	0.	0
(9) FAHAD BIN IBRAHIM AL SHETHRI	1.00									
DIRECTOR SINCE 5/1/2017	0.	Х						20,000.	0.	0.
(10)AL TAHER HASSAN SARKAZ	1.00									
DIRECTOR	0.	Х					l	30,000.	0.	0 .
(11)ABDULATIF Y. AL-HAMAD	40.00								-	
CHAIRMAN/DIRECTOR GENERAL	0.			Х			i	581,098.	0.	206,583.
(12)ABDLRAHMAN AL-HUMEMEDI	35.00									<u> </u>
DIRECTOR OF ADMINISTRATION	0.			Х				305,136.	0.	27,148.
(13)AHMED OSMAN ALI	35.00									
DIRECTOR OF TECHNICAL DEPT	0.			Х				255,810.	0.	6,371.
(14)MOHAMMAD A. AL-QATAMI	35.00									
DIRECTOR OF H.Q. BUILDING	0.			Х				243,225.	0.	1,058

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(A) Name and title	(B) Average hours per week (list any hours for related organizations	erage Position urs per (do not check more than box unless person officer and a direct					an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reporta compensati relate organiza (W-2/1099	on from d tions	(F) Estimated amount of other compensation from the organization and related
	below dotted line)	Individual trustee or director	Institutional trustee		ployee	Highest compensated employee					organizations
15) ABDUL HAMID M. AL-ZIGALAIE ECONOMIC ADVISOR	35.00			Х				216,444.		0.	21,353.
16) KHALIFA A.DAU FINANCIAL ADVISOR	35.00			Х				235,270.		0.	21,870.
17) SAID M. AL SHINNAWI DIRECTOR FINANCE DEPARTMENT	35.00			Х				256,720.		0.	15,484.
18) MOHAMED CHEBIL BEDOUI CHIEF DISBS LOANS & GRANTS	35.00			х				210,766.		0.	7,394.
19) FAUD FADHL ABBAS INVESTMENT OFFICER	35.00			Х				206,164.		0.	21,985.
20) MOHAMED M. AZZUZ DIRECTOR OF AUDITING	35.00			Х				278,707.		0.	34,302.
21) MAHMOUD EL-EMAM IT CHIEF	35.00					Х		212,558.		0.	-74
22) HASB EL RASOUL OBEIDA LEGAL ADVISOR	35.00					Х		212,060.		0.	14,030
23) SOAD AL-ATIGI LEGAL ADVISOR/SECRETARY	35.00					Х		211,418.		0.	1,449
24) MAHMOUD IBRAHIM ABO ELYOUN ECONOMIC ADVISOR	35.00 0. 35.00					Х		207,883.		0.	4,574
25) OSAMA WANNAS ENGINEER CONSULTANT	0.					Χ		207,402.		0.	3,952
1b Sub-total	_						* * *	1,615,269. 2,455,392. 4,070,661.		0.	241,160. 146,319. 387,479.
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				re	ceived more than	\$100,000	of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched	lule J for suc	ch ınd	ividu	ıal		· · ·					Yes No
 4 For any individual listed on line 1a, is the organization and related organizations grandividual 5 Did any person listed on line 1a receive or 	eater than	\$15 • • •	0,00	00? · ·) <i>If</i>	"Yes 	i," (complete Schedu	le J for .	such 	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y Section B. Independent Contractors											5 X
Complete this table for your five highest componentation from the organization Report of year.	npensated i compensati	ndepe on for	ende the	nt o	conf	racto lar ye	rs t ar e	hat received more ending with or with	than \$100 nin the orga	0,000 of anization	's tax
(A) Name and business add	dress	-			•			(B) Description of se	ervices	C	(C) ompensation
ATTACHMENT 3											
2 Total number of independent contractors (i		_						· -			

Part VIII Statement of Revenue

		Check if Schedule O contains a respon	nse or note to an	y line in this Part VI	ll <u></u>	. <u></u>	
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) . 1e All other contributions, gifts grants, and similar amounts not included above . 1f Noncash contributions included in lines 1a-1f \$					
	h	Total Add lines 1a-1f	<u> </u>	0			+
ž			Business Code				
Program Service Revenue	2a b c d	INCOME FROM PROGRAM LOANS	900099	236,108,717	236,108,717		
Ē	e						
gra	f	All other program service revenue					
5	g	Total Add lines 2a-2f		236,108,717			1
	3	Investment income (including divider and other similar amounts)	nds, interest,	33,022,870			33,022,870
	5	Royalties		0			
Other Revenue	6a b c d 7a	Gross rents	(ii) Personal	0			
	b c d 8a	assets other than inventory Less cost or other basis and sales expenses Gain or (loss)		105,779,037			105,779,037
	С	of contributions reported on line 1c) See Part IV, line 18	•	0			!
	ь	Less direct expenses b		j			
	С	Net income or (loss) from gaming activities	. <u></u> ▶	0			
	10a	Gross sales of inventory, less returns and allowances a					
	b c	Less cost of goods sold b Net income or (loss) from sales of inventory.		0			
		Miscellaneous Revenue	Business Code				
	11a	ARAB TRADING FINANCE PROGRAM	900099	5,551,873	5,551,873		
	ь	OTHER INCOME	900099	31,370			31,370
	C	All all and a second	-				
	d	All other revenue		5,583,243	-	-	
	e	Total Add lines 11a-11d			241 660 500		138,833,277
	12	Total revenue See instructions	🗩	380,493,867	241,660,590		112,600,002

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Part IX Statement of Functional Expenses

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

	Check ii Schedule O contains a resp	onse of note to any line			
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	i			
	and domestic governments. See Part IV. line 21	0.			
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		ì		
	individuals See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	3,382,889.	3,382,889.	_	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	_			
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	19,502,212.	17,161,947.	2,340,265.	
8	Pension plan accruals and contributions (include		0.44 500	44.556	
	section 401(k) and 403(b) employer contributions)	956,464.	841,688.	114,776.	
9	Other employee benefits	0.			
10	Payroll taxes	0.			
	Fees for services (non-employees)				
а	Management	0.			
	Legal	0.	00 102	0.044	
	Accounting	99,437.	89,493.	9,944.	
d	Lobbying	0.			
	Professional fundraising services See Part IV, line 17.	7,971,494.	7,174,345.	797,149.	
f	Investment management fees	7,971,494.	- 1,114,343.	191,149.	
g	Other (If line 11g amount exceeds 10% of line 25, column	0.			
	(A) amount list line 11g expenses on Schedule O)	0.			
	Advertising and promotion	2,654,956.	2,389,460.	265,496.	
	Office expenses	56,348.	50,713.	5,635.	
	Information technology	0.	30,713.		· · · · · · · · · · · · · · · · · · ·
15	Royalties	258,534.	232,681.	25,853.	
16	Occupancy	1,428,571.	1,285,714.	142,857.	
17	Travel			212,0011	-
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
10	Conferences, conventions, and meetings	132,582.	119,324.	13,258.	
20		0.	,	,	
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
	Insurance	36,460.	32,814.	3,646.	
24					
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column		ł		
	(A) amount list line 24e expenses on Schedule O)		1		
а	OFFSITE STORAGE	46,404.	41,763.	4,641.	
b	WRITE-OFF FIXED ASSETS	135,896.	115,512.	20,384.	
c	•				
d	•				
e	All other expenses	29,831.	26,848.	2,983.	
	Total functional expenses Add lines 1 through 24e	36,692,078.	32,945,191.	3,746,887.	
	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 Inf following SOP 98-2 (ASC 958-720)	0.			

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_	1 990 (Page II
Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this P	'art X	<u></u>	<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	68,338,517.		72,403,049.
	2	Savings and temporary cash investments	149,189,720.	2_	18,034,471.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net	0.	4	0.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	31,101.		53,246.
ssets	7	Notes and loans receivable, net	0.	7	0.
SS	8	Inventories for sale or use	0.	8	0.
•	9	Prepaid expenses and deferred charges		9	0.
	10 a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation 10b	0.	10c	0.
	11	Investments - publicly traded securities	1,209,706,990.	11	1,822,949,950.
	12	Investments - other securities See Part IV, line 11	224,383,696.	12	231,484,919.
	13	Investments - program-related See Part IV, line 11	9,448,063,513.	13	9,637,610,209.
	14	Intangible assets	0.	14	0.
	15	Other assets See Part IV, line 11	84,869,865.		89,257,328.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11184583402.	16	11871793172.
	17	Accounts payable and accrued expenses	0.	17	0.
	18	Grants payable	0.	18	0.
	19	Deferred revenue	0.	19	0.
	20	Tax-exempt bond liabilities		20	0.
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0.	21	0.
S	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
ap		disqualified persons Complete Part II of Schedule L	0.	22	0.
ت	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	271,127,844.	25	252,323,500.
	26	Total liabilities Add lines 17 through 25	271,127,844.	26	252,323,500.
es		Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
3a(28	Temporarily restricted net assets		28	
Ď	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here X and complete lines 30 through 34			
	30	Capital stock or trust principal, or current funds	0.	30	0.
Se	31	Paid-in or capital surplus, or land, building, or equipment fund	8,973,052,873.	31	9,349,489,559.
Ą	32	Retained earnings, endowment, accumulated income, or other funds	1,940,402,685.	32	2,269,980,113.
Net Assets	33	Total net assets or fund balances	10913455558.	33	11619469672.
_	34	Total liabilities and net assets/fund balances		34	11871793172.
	<u> </u>		l	<u> </u>	Form 990 (2017)

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				<u></u>	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		80,4	<u> </u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		36,6		
3	Revenue less expenses Subtract line 2 from line 1	3		43,8		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		13,4		
5	Net unrealized gains (losses) on investments	5	1	22,8	33,9	941.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7			_	0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	2	39,3	78,3	884.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	11,6	19,4	69,6	72.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>		
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplaıı	n in			
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled	or			
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis			1		
b	Were the organization's financial statements audited by an independent accountant?			2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi			!		
	separate basis, consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	overs	ight			
	of the audit, review, or compilation of its financial statements and selection of an independent acc		_	2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O	•			i	
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t fort	h in			
	the Single Audit Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au			3b		

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

	98-0211642
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	r 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	ın 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 for	unds can be used
only for charitable purposes and not for the benefit of the donor or donor advisor, or for a	any other purpose
conferring impermissible private benefit?	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)	of a 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	
easement on the last day of the tax year	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
historic structure listed in the National Register	2d
Number of conservation easements modified, transferred, released, extinguished, or termin	nated 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, inspect	
violations, and enforcement of the conservation easements it holds?	
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing con	servation easements during the year
>	
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	onservation easements during the year
▶ \$	
Does each conservation easement reported on line 2(d) above satisfy the requirements of sections and account to the section of	1 1 1 1
and section 170(h)(4)(B)(II)?	Yes □ No
In Part XIII, describe how the organization reports conservation easements in its revenue and	
balance sheet, and include, if applicable, the text of the footnote to the organization's finance	lai statements that describes the
organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other	r Similar Assats
Complete if the organization answered "Yes" on Form 990, Part IV, line 8	i Sililiai Assets.
a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its works of art, historical treasures, or other similar assets held for public exhibition, edu	revenue statement and balance snee lication, or research in furtherance of
public service, provide, in Part XIII, the text of the footnote to its financial statements that des	scribes these items
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	evenue statement and balance shee
works of art, historical treasures, or other similar assets held for public exhibition, edu	ication, or research in furtherance o
public service, provide the following amounts relating to these items	•
(i) Revenue included on Form 990, Part VIII, line 1	
(ii) Assets included in Form 990, Part X	
If the organization received or held works of art, historical treasures, or other similar	_
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a Revenue included on Form 990, Part VIII, line 1	

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

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IENT	98-0211642

	rt Organizations Maintaining	Collections of	Art Historical T	reasures, or O	ther Similar Asse	ts (contin	nued)
3	Using the organization's acquisition						
3	collection items (check all that apply		ther records, encor	carry or the rono	wing that are a oigh	miodili doc	, 01 110
а	Public exhibition	1	d Dan o	or exchange progra	ams		
b	Scholarly research		e Other		31110		
C	Preservation for future genera	ations			······································		
4	Provide a description of the organi		and explain how t	they further the o	rganization's exemp	t nurnose	ın Part
7	XIII	zation's concentions	and explain now	iney further the c	rgamzanon o oxomp	r parpooo	
5	During the year, did the organization	solicit or receive d	onations of art, histo	orical treasures, or	other similar		
5	assets to be sold to raise funds rather					Yes	No
Par	rt IV Escrow and Custodial Arra		anca as part or the	31ga1112a113113 3311			
, ai	Complete if the organization		" on Form 990. P	art IV. line 9. or r	eported an amoun	t on Form	l
	990, Part X, line 21			,	-,		
1a	Is the organization an agent, trustee	custodian or othe	er intermediary for c	ontributions or oth	er assets not		
-	included on Form 990, Part X?				_	X Yes	No
b	If "Yes," explain the arrangement in						
_			3		Amount		
С	Beginning balance			1c		963,600	,379.
d	Additions during the year					100,470	,763.
е	Distributions during the year					101,869	,511.
f	Ending balance					962,201	,631.
2a	Did the organization include an amo				I account liability?	Yes	X No
b	If "Yes," explain the arrangement in				_		\neg
Par	t V Endowment Funds.		· · · · · ·				
	Complete if the organization	on answered "Yes	" on Form 990, Pa	art IV, line 10			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four yea	
1a	Beginning of year balance	11,833,413.	13,386,492.	14,702,572	. 13,330,949.	23,66	7,587.
b	Contributions	18,707,324.	9,687,104.	20,982,573	40,753,310.	16,05	2,183.
c	Net investment earnings, gains,						
•	and losses			1	491,307.	1	2,316.
d	Grants or scholarships	10,915,230.	11,240,183.	22,298,654	. 38,890,380.	26,31	6,505.
e	Other expenditures for facilities						
Ť	and programs						
f	Administrative expenses						
g	End of year balance	19,625,507.	11,833,413.	13,386,492	. 14,702,572.	13,33	0,949.
2	Provide the estimated percentage of	f the current year e	end balance (line 1g.	column (a)) held a	s		
a	Board designated or quasi-endowme	ent ▶ 100.0000	%	(-,,			
b	Permanent endowment						
С	Temporarily restricted endowment	_ %					
	The percentages on lines 2a, 2b, ar	d 2c should equal 1	00%				
3 a	Are there endowment funds not in the	ne possession of th	e organization that	are held and adm	inistered for the		
	organization by					Ye	
	(i) unrelated organizations					3a(ı)	X
	(ii) related organizations					3a(iı)	X
b	If "Yes" on line 3a(ii), are the related	d organizations listed	d as required on Sch	edule R?		3b	
4	Describe in Part XIII the intended us		tion's endowment fu	nds			
Par	Land, Buildings, and Equip Complete if the organizati	ment.	o" on Form 000 E	Part IV Juno 11a	See Form 000 Pai	rt Y line 1	٥
	Description of property	(a) Cost or				d) Book value	
		(invest		ther) der	preciation		
1 a	Land	· · · · · · · · · · · · · · · · · · ·					
þ	Buildings						
С	Leasehold improvements						
d	Equipment						
<u>e</u>	Other						
<u>Tota</u>	il. Add lines 1a through 1e (Column (d) must equal Form	n 990, Part X, columi	n (B), line 10c)	<u></u> ▶		

Part VII	Investments - Other Securities. Complete if the organization answered	"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) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	al derivatives		
(2) Closely	-held equity interests		
(3) Other_			
(A)			
(B)			
(C)			
(D)			
(E) (F)			
(G)			
(H)			
	n (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII	Investments - Program Related.		
		l "Yes" on Form 990	, Part IV, line 11c See Form 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) ARAB	TRADE FINANCE PROGRAM	256,688,764.	COST
	S RECEIVABLE - PROGRAM	9,380,921,445.	COST
(3)			
(4)		-	
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Column	n (b) must equal Form 990, Part X, col (B) line 13)	9,637,610,209.	
Part IX	Other Assets.		
			, Part IV, line 11d See Form 990, Part X, line 15
	(a) De	scription	(b) Book value
(1)			
(2)			
(3)		 	
(4)			
(5)			
(6)			
(7) (8)			
(9)			
	umn (b) must equal Form 990, Part X, col (B) li	ne 15)	· · · · · · · · · · · · · · · · · · ·
Part X	Other Liabilities.		
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11e or 11f See Form 990, Part X,
	line 25		
1	(a) Description of liability	(b) Book valu	e
(1) Feder	al income taxes		
(2) APPR	OVED TECHNICAL ASSISTANCE	92,048,3	
	ISION FOR EMPLOYEE PENSION	47,845,5	
	UED EXPENSES	11,286,0	
_ ' '	ISION FOR BLDG MAINTENANCE	5,505,4	
_ ' ' .	NTS DUE TO PALESTINE	88,080,8	
	ISION FOR STAFF'S CHILDREN	994,3	
	OWING COUNTRIES	3,251,5	
	R INSTITUTIONS	3,311,2	
Total (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25)	▶ 252,323,5	000.]

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

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Schedul	e D (Form 990) 2017		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return).	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		<u> </u>
1	Total revenue, gains, and other support per audited financial statements	1	402,867,085.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	•	
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	30,344,713.
3	Subtract line 2e from line 1	3	372,522,372.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 7,971,495.		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	7,971,495.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	380,493,867.
Part		rn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	28,720,583.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	28,720,583.
	Amounts included on Form 990, Part IX, line 25, but not on line 1		
4	Investment expenses not included on Form 990, Part VIII, line 7b 4a 7,971,495.		
a	Other (Describe in Part XIII)		
b	Add lines 4a and 4b	4c	7,971,495.
С 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	36,692,078.
	XIII Supplemental Information.		
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Pa	irt V, I	ine 4, Part X, line
2, Par	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
SEE	PAGE 5		
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		_	
			<u> </u>

Supplemental Information (continued) Part XIII

SCHEDULE D, PART IV, LINE 1B

TRUST FUND ARRANGEMENT

ASSETS MANAGED FOR THIRD PARTIES OR HELD IN TRUST OR IN A FIDUCIARY CAPACITY ARE NOT TREATED AS ASSETS OF THE FUND AND ACCORDINGLY ARE NOT INCLUDED IN THE FINANCIAL STATEMENTS. ASSETS MANAGED FOR THIRD PARTIES ARE COMMINGLED WITH THE ASSETS OF THE FUND AND ARE ALLOCATED RETURNS BASED ON THOSE EARNED BY THE FUND ON ITS INVESTMENTS.

SCHEDULE D, PART V, LINE 4

THE ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT MAKES TECHNICAL ASSISTANCE GRANTS TO VARIOUS MEMBER STATES AND ORGANIZATIONS THROUGHOUT THE YEAR. A GENERAL RESERVE IS BUILT UP OVER TIME FOR SUCH PURPOSE AND IS REPRESENTED ON THE BALANCE SHEET AS EQUITY. ONCE THE GRANTS ARE APPROVED, A PROVISION FOR TECHNICAL ASSISTANCE IS BOOKED (AS A LIABILITY) AND DISTRIBUTIONS ARE MADE. THE AMOUNTS DISBURSED AS GRANTS ARE NOT INCLUDED AS AN EXPENSE ON THE STATEMENT OF INCOME AND EXPENSE BUT ARE REPORTED AS PROPOSED DISTRIBUTIONS OF NET INCOME BASED ON THE PROVISION. THE ACTUAL DISBURSEMENTS PAID ARE REFLECTED IN THE CASH FLOW STATEMENT AND THE PROVISION IS ADJUSTED ACCORDINGLY. FOR THIS REASON GRANTS PAID ARE NOT REFLECTED IN PART IX OF FORM 990. HOWEVER, THE GRANTS DISBURSED FOR THE YEAR ARE REFLECTED IN SCHEDULE F, PART II.

SCHEDULE D. PART XI, LINE 2D - OTHER RECONCILING ITEMS

CURRENCY DIFFERENCE

\$752,403

TRUST FUND SHARE OF INCOME

: (\$93,241,631)

TOTAL : (\$92,489,228)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

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

Employer identification number Name of the organization 98-0211642 ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the X Yes For grantmakers Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total offices in the employees, region (by type) (such as, a program service, expenditures for region agents, and fundraising, program services, describe specific type of and investments service(s) in the region investments grants to recipients in the region independent located in the region) contractors in the region 30,821,346 PROGRAM SERVICES EXTENDING LOAMS (1) MIDDLE EAST AND NORTH AFRICA PROGRAM SERVICES GRANTMANING 5,503,812 (2) MIDDLE EAST AND NORTH AFRICA (3) MIDDLE EAST AND NORTH AFRICA PROGRAM SERVICES FELLOWSHIP PROGRAMS 366,921 (4) MIDDLE EAST AND NORTH AFRICA 530,929,000 INVESTMENTS (5) EUROPE INVESTMENTS 834,199,000 INVESTMENTS 385, 986, 000 (6) CENTRAL AMERICA/CARIBBEAN INVESTMENTS 16,980,000 (7) SUB-SAHARAN AFRICA INVESTMENTS 90,583,000 (8) EAST ASIA AND THE PACIFIC INVESTMENTS 25,456,000 (9) NORTH AMERICA (10) RUSSIA/INDEPENDENT STATES INVESTMENTS 3,749,000 4,589,000 (11) SOUTH AMERICA INVESTMENTS INVESTMENTS 1,000 (12) SOUTH ASIA (13) MIDDLE EAST AND NORTH AFRICA GRANTMAKING EXTENDING LOANS 729,920,451 (14) SUB-SAHARAN AFRICA 163,476,964 GRANTMAKING EXTENDING LOANS GRANTS PAID 64,015,684 (15) MIDDLE EAST AND NORTH AFRICA GRANTMAKING

GRANTMAKING

GRANTMAKING

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GRANTS PAID

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

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Schedule F (Form 990) 2017

2,891,954,052

4,919,026

457,848 2,891,954,052

(16) SUB-SAHARAN AFRICA

(17) MIDDLE EAST AND NORTH AFRICA

1	(a) Na organs		(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book FMV appraisal, other
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2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exe	empt	•
	by the IRS or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	▶	
3	Enter total number of other organizations or entities	•	

Schedule F (Form 990) 2017

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Page 2 Schedule F (Form 990) 2017 Grants and Other Assistance to Organizations or Entities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed (b) IRS code section and EIN (if applicable) (f) Manner of cash disbursement (g) Amount of noncash assistance (c) Region (d) Purpose of grant (e) Amount of cash grant (h) Description (i) Method of 1 (a) Name of valuation (book FMV appraisal other) organization of noncash assistance Ž, (1) 960,759 WIRETRANSFER 11 / A N/A FIVE REGIONA 1 N/A (2) MIDDLE EAST & MORTH AFRI CENTERS 2,485,913 WIRETRANSFER N/A 1 INFO NETWOR 1.35 es e m \$1 11/A N/5 (3) PROGRAM WIRETRANSFER IDDLE EAST & NORTH AFRI 119,324 CANCER AWARE د : ي' س WIRETRANSFER 11/A N/A (4) IDDLE EAST & NORTH AFRI PROGRAM 82,864 39 . ² . · GULF 'II WAT (5) IDDLE EAST & NOPTH AFRI CONFERENCE 66,291 WIRETRANSFER n/A N/-7 EDUCATIONAL ÷., . المثلاث II/A (6) [•] IDDLE EAST & NORTH AFRI CONFERENCE 165,728 WIRETRAUSFER N/A SEVENTH ARAB 3 1 11/A II/A (7) MIDDLE EAST & NORTH AFRI FORUM 99,437 WIRETRANSFER ECONOMIC RES مرابعات معني ا tig . (8) FORUM 331,455 WIRETRANSFER N/A 11/A IIDDLE EAST & NOPTH AFPI - (***) ا المراجعة (PROGRAMS 6 WIRETRANSFER (9) ACTIVITIES MIDDLE EAST & NOPTH AFRI "Free man is 1 SPRING INITE 200 MIDDLE EAST & NORTH AFRI DEVELOPMENT 43,364 WIRETRANSFER N/A N/A (10) . J.K. SUPPORT ACTI رئم (11) HIDDLE EAST & NORTH AFRI COUNTRIES 828.638 WIRETRANSFER 1!/A N/A # S. S. EDUCATING SY re-٠. time to (12)102 751 WIRETRANSFER n/A N/A MIDDLE EAST & NOPTH AFRI BY WAR 100 HEALTH POLIC FORUM 66,291 p/A II/A (13) WIRETRAUSFER MIDDLE EAST & NORTH AFRI , j. s. SEMINAR WIRETRANSFLE 11/A n/A (14)---ARAB FORUM E 1 REGULATIONS 19,887 WIRETRANSFER N/A N/A (15)FAMILY BUDGE II/A (16) MIDDLE EAST & NORTH AFPI KUWAIT 66,291 WIRETRAISFER R/A Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

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Enter total number of other organizations or entities

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

Schedule F (Form 990) 2017 Part II Grants and Other Assistance to Organizations or Entities Outside the United States Complete if the organization answered "Yes" on Form 990,

1	(a) Nan organiz			(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book FMV appraisal other
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2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exe	empt	
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	▶	
3	Enter total number of other organizations or entities	•	

Schedule F (Form 990) 2017

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Page 2

Schedule F (Form 990) 2017 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,

Part II Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed (g) Amount of noncash assistance (b) IRS code section and EIN (if applicable) (c) Region (d) Purpose of grant (f) Manner of (h) Description of noncash assistance (i) Method of 1 (a) Name of (e) Amount of cash grant valuation (book FMV appraisal other) organization cash disbursement ٩. é A 4 . 12 . BALL. (1) MIDDLE EAST & NORTH AFRI EMERGENCY PR 48 661 WIRETRALISFER H/A u/A - J. W. SURGICAL COS - 12 E R/A (2) MIDDLE EAST & NORTH AFRI CHILDREN 21,856 WIRETRANSFER 11/A *; } \$ \$. · - -AHGALOUNA 42,744 WIRETRANSFER 1174 N/A (3) MIDDLE EAST & NORTH AFRI . WATER TREATM , 14.4 15. 1 II/A BEIRUT 24,100 WIRETRANSFER (4) MIDDLE EAST & NORTH AFRI 7,5 Ara & OPERATIONS I ķ CHI LDREN 639,735 WIRETRANSFER tI/A II/A (5) MIDDLE EAST & NORTH AFFI ۸, DEPOSIT 4 ż. . | والخراجية العا AL E (6)-SUB-SAHARAN AFRICA DEV FUND 126,951 WIRETRANSFER N/A N/A WASTE WATER 47.17 1 83 24 STUDY CENTER 45 353 n/A II/A (7) SUB-SAHARAN AFRICA WIRETRANSFER 3 NATL ACCOUNT م کی کہ N/A N/A . 4¹⁰ 91, SUB-SAHARAN AFRICA SUPPORT 72,340 WIRETRANSFER (8) ſ, _ .. SOLAR ENERGY 4.3 % 4. MIDDLE EAST & NORTH AFRI TECHNOLOGY WIRETRANSFER (9) , #Y SOMALI 987,471 WIRETPANSFER N/A 11/A (10) SUB-SAHARAN AFRICA ARAB FOOD SE 1 . 1 4 2 4 (11) UB-SAHARAN AFRICA SUDAN 101,720 WIRETRANSFER N/A II/A 46° , 'E 1 77 RECONSTRUCTI (12)SUB-SAHARAN AFRICA EAST SUDAN 1,012,105 WIRETRANSFER N/A N/A FIGHT AGAINS ista. N/A n/A 135,728 WIRETRANSFER (13) SUB-SAHARAN AFRICA N KORDOFAN HIGHWAY BOUS ž: n/A PPOJECT 189,062 WIRETRANSFER MIDDLE EAST & NORTH AFRI (14)ASSIST REFUG 113 .,2 _ • -1 MIDDLE EAST & NORTH AFRI LIBYA BORDER 461,926 WIRETRANSFER N/A II/A (15) REPARATION D MIDDLE EAST & NORTH AFPI BY WAP 994,365 WIRETRANSFER 11/A N/A

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

Schedule F (Form 990) 2017

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ched Part	_	Grants	and Other	Assista	nce to Organiza	ations or Entities Outsid	e the United S	States Complete	e if the organiz	zation answere	ed "Yes" on F	Page 2 orm 990,
e a l	_	Part IV.	line 15, fo	r any red	pient who rece	ived more than \$5,000 F	Part II can be d	luplicated if addi	tional space is	needed		
1		(a) Nai organia			(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book FMV appraisal othe
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9)′	``	25 m		£.\$		MIDDLE EAST/NORTH AFRICA	SECTOR DEVELOPMENT	7,935,035	WIRETRANSFER		N/A	N/A
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14)		10000000	·	300	The state of the s	MIDDLE EAST/NORTH AFRICA	RURAL ROADS	500,497	WIRETRANSFER		n/A	II/A
(§) (15)	-1	33.47		4 th	- '-	SUB-SAHARAN AFPICA	BRIDGE	1,113,689	WIRETRAISFER		11/A	N/A
16)	٠.		~ ~	inglight a with your t	in the second	SUB-SAHARAN AFRICA	UPPER ATBARA	19 943,653	WIRETRAJISFER		n/A	II/A

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

Schedule F (Form 990) 2017

7E1275 1 000 TN5186 2532

Part II Grants and Other Assistance to Organizations or Entities Outside the United States Complete if the organization answered "Yes" on Form 990,

Part IV the 15 for any compact who account may be a 25 000 Part III.

1	(a) Nam							tional space is			
	organiza			(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book FMV appraisal other)
;	مرب د خوال مرب د خوال	- 1	1	12 C Ng		ELECTP POWER			•		
(1)	37		. *		SUB-SAHAPAN AFFICA	STATION	26,824,660	WIFETRANSFER		R/A	N/A
p *.	The HE	, , ,		40.57		EAST SUDAN					
(2)	5		• - • 7,	19	SUB-SAHARAN AFRICA	ROADS	2,833,941	WIRETRANSFER		N/A	II/A
• /	***		17 × 2			WATER					
(3)	Catha		** 1 6	21.2	SUB-SAHARAN AFRICA	HARVESTING	5,349,685	WIRETRANSFER		N/A	I'/A
	, , ,		, , , , ,			UPPEP ATBAPA				ļ	
(4) - 🐁	,		- 1 - 44	3, 75	MIDDLE EAST/NORTH AFRICA	DAM	169,042	WIRETRANSFER		H/A	A\11
	ت وقع الأرب	-	46 3 Tree	**		LIVER DISEAS					
(5) 🚭	Think to	·		<u></u>	MIDDLE EAST/NOFTH AFRICA	CENTER	367 915	WIRETRANSFER		N/A	II/A
- 5	بعوا مجابر أ	٠,	4, 3,4			POWER GENER				ļ	
(6)			1 1 7		MIDDLE EAST/NORTH AFRICA	5"ATION	6,388,764	WIRETRAUSFER		11/A	II/A
_*	たけ 機	er.	33, 7	\$ * **		POWER GENER					
(7) 5	- (32)		- 1		MIDDLE EAST/NORTH AFRICA	STATION	430,892	WIRETRANSFER		N/A	n/A
	*** Ata					POWER GENER					
(8)	£ 4 1.2 1	<u>.</u>	175	35, 2	MIDDLE EAST/NORTH AFRICA	STATION	2,379 848	WIRETRANSFER		II/A	N/A
	4 . 6		ξ,			HUGHANDA					
(9)	\$ *40 jour ==	- '*	<u>.</u>	* * * * * * * * * * * * * * * * * * * *	MIDDLE EAST/NOPTH AFFICA	AIPPORT	48,972,489	WIPETRANSFER		11/A	N/A
	4 '4 SS	, ,	300	6,4,1		POWER GENER]
(10)			3 **	-	MIDDLE EAST/NOPTH AFRICA	STATION	15,664,567	WIPETRANSFER		N/A	N/A
1	$M_i = n_{j_i}^{F_{\nu}}$	G 41 ,-	10	* ", 1		SUPPORT PRIV					1
(11)	x-		- 1		MIDDLE EAST/NORTH AFRICA	SECTOP	26,486,576	WIRETRANSFER		N/A	N/A
75-	~~~	*:				POWER GENEP					
(12)	1100	,	A	F1" - 4	MIDDLE EAST/NORTH AFRICA	STATION	16,307,500	WIRETRAUSFER		J/A	N/A
	£1		٠.,٠	- 4.		DEVELOPMENT					Ī
(13) 🕏	Birthing.	4 1 3	- b		MIDDLE EAST/NORTH AFRICA	RURAL POADS	92,807	WIRETRANSFER		16/A	II/A
	2 kg/		15 m , m	, ž		SYRIAN ELECT					
(14)	"你没家"	. پخ	100		MIDDLE EAST/NORTH AFRICA	GPIDS	4,242,625	WIRETRANSFER		11/A	N/A
- ;	1 - 4 2 ¹ 3 -					LITANI WATER					
(15)	. ""		1 1/		MIDDLE EAST/NORTH AFRICA	S LEBANON	3,019,556	WIRETRANSFER		11/A	N/A
- ,	+ = (4, 4	84 m	\$ 1	***		ADMINISTRATI					
(16)		,	10.3		MIDDLE EAST/NORTH AFRICA	PEHABILITATI	6,085,515	WIPETRANSFER		II/A	N/A

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

Schedule F (Form 990) 2017

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ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

			AND SOC	TAL DEVELOPME	N I					90-0	211642
	le F (Form 990) 20		- 4	0	tions of Entition Collect	o the Hester	States Complete	o if the erges	ration answered	"Vos" on E	Page 2
Part					tions or Entities Outsid					res on F	om 990,
1		ame of	or any rec	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement		(h) Description of noncash assistance	(i) Method of valuation (book FMV appraisal, other)
(1)	the state of the s	-	1	الله المراسطة المراجعة المراسطة	MIDDLE EAST/NORTH AFPICA	DEVELOPMENT WATER SUPPLY	3,735,499	WIRETRANSFER		I/A	11/A
(2)		اد دد	2 5	, v.	MIDDLE EAST/NORTH AFRICA	INFRASTRUCTU REHABILITATI	1,405,370	WIRETRANSFER		I/n	11/A
(3)	4 4, 11 p	. ~	1	a 0, 7	MIDDLE EAST/NORTH AFFICA	SYP EL DANIA ROAD	112,694,730	WIRETRANSFER		1/6	11/A
** (4)		* .	الم المراجعة		MIDDLE EAST/NORTH AFRICA	HOUSING PROJECT	36,460	WIPETRAJISFER		I/A	N/A
(5)	ري هي ويو الري الري وي الري	1 2		i s	MIDDLE EAST/NORTH AFPICA	WASTEWATEP FACILITIES	14,607,226	WIRETRANSFER	,	1/A	n/A
(6)	Section .		A	· · · · · · · ·	MIDDLE EAST/NORTH AFPICA	WATER IRRIGATION	1,624,130	WIPETRANSFER		1/4	N/A
/-™. (7)	· Jak	ै। ई 	Aller M	٢ كور ع	MIDDLE EAST/NORTH AFPICA	WATER SUPPLY	3,089,161	WIRETRADSFER		1/A	H/A
(8)	. E . p. 42.	·- ·- ·	, , , , , , , , , , , , , , , , , , ,	*	MIDDLE EAST/NORTH AFRICA	WATER SUPPLY	012,065	WIRETRANSFER		1/A	N/A
(9)	the sales	, 3	4	24 4 . 2	MIDDLE EAST/NORTH AFPICA	DAR KHROFA DAM	12,190,918	WIRETRANSFER		I/A	II/A
(10)	36.0	ن ،	25,24	5 4 miles	MIDDLE EAST/NORTH AFRICA	TRAIN TANGIE CASABLANCA	9,187,935	WIPETRANSFER		1/A	N/A
(11)	4 3 () () () () () () () () () (ار بار ا المراجع المراجع		MIDDLE EAST/NORTH AFRICA	WATER SUPPLY	527 014	WIRETRANSFER		A/V	11/A
(12),	i sangar	· · · · · · · · · · · · · · · · · · ·		ri;*	MIDDLE EAST/NORTH AFRICA	WATER SUPPLY	38 521 710	WIRETRANSFER	!	1/A	11/A
(13)	256.5°		- 3	z ("	MIDDLE EAST/HORTH AFRICA	HADOR WEST	61,249 586	WIRETRANSFER		1/A	11/A
(14)			' }'		MIDDLE EAST/NORTH AFRICA	TRAIN TANGIE CASABLANCA	1,498,177	WIRETRANSFER		N/A	A/11
(15)	id and b		. n 3	1 Ann 1	MIDDLE EAST/NORTH AFRICA	ELECTRICAL NETWORK	15,744 117	WIPETRANSFER		1/A	N/A
(16)	S THE	- •	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		,sub-saharan africa	WATER SUPPLY	G04,872	WIRETRANSFER		I/A	II/A

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

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2017

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Schedule F (Form 990) 2017

Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed (g) Amount of noncash assistance (h) Description of noncash assistance (i) Method of valuation (book FMV appraisal other) (b) IRS code section and EIN (if applicable) (d) Purpose of grant (e) Amount of cash grant (f) Manner of 1 (a) Name of (c) Region organization cash disbursement 1 mg WATER VIRETRAUSFER n/a (1) UB-SAHARAN AFRICA SUPPLY 6.629 n/A * 7 . * WATER SUPPL! 566,788 WIRETRAUSFER n/A II/A (2) SUB-SAHARAN AFRICA 11.3 ATAR TIDJIKJ 4 1 (3) SUB-SAHARAN AFRICA POAD 3 036, 139 WIRETRANSFER N/A \$ 1.50° 35 WATER بد پورهې SUPPLY WIPETRANSFER n/A 11/A SUB-SAHAFAN AFRICA (4) J25. Section 2 AL-AMAL ROA! (5) SUB-SAHARAN AFRICA REHABILITATI 195,559 WIRETRANSFER 11/4 N/A WATER & ELEC , i . . . ي پير ايسان پير ايسان PROJECT WIRETRAUSFER II/A n/A (6) UB-SAHAPAN AFRICA 2,386,477 1.34 WATER r II/A n/A (7)3 SUPPLY 7.033.477 WIRETRANSFER SUB-SAHARAN AFRICA POWER GENER in Y N/A UPGRADE 4 378,522 WIPETRANSFER (8) SUB-SAHARAN AFRICA 1 UATER . 3 SUPPLY WIRETPANSFER N/A (9) SUB-SAHARAN AFRICA 8,564,799 WATER 114 11/4 (10) UB-SAHARAN AFRICA SUPPLY 43 089 WIRETRANSFER N/A age. POWER GENER şŧ WIRETRANSFER II/A N/A (11)SUB-SAHARAN AFRICA DEVELOPMENT 6.864.435 P 57 CONSTRUCTION 3.7 227 ٠. (12)SUB-SAHARAN AFRICA WIND FARM 2,582,035 WIRETRAUSFER N/A 11/A 143 8 2 NEMA MALI BO 4 ROAD 2,452,768 WIPETRAJISFER N/A n/A (13) SUB-SAHARAN AFRICA ٠. ٢ · 25 4 , K NOUARCHOTT AIRPORT 16,072,257 WIRETPANSFER 11/4 N/A UB-SAHARAN AFRICA (14)1 a 3 WATER SUB-SAHARAN AFRICA SUPPLY 43,022,870 WIRETRANSFER N/A II/A (15) . 4 SOLAR POWER \$ July 20 11/4 SUB-SAHARAN AFRICA PPOJECT 8,743,785 WIRETRANSFER 11/A

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

Schedule F (Form 990) 2017

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Schedule F (Form 990) 2017

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States Complete if the organization answered "Yes" on Form 990.

Part IV line 15 for any reciprost who received many than \$5,000 Part IV.

Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed										,	
1	(a) Name of organization			(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book FMV, appraisal, other)
ar, "			1	r , C, .		DEVELOPMENT					
(1)	126	ત	¥.		MIDDLE EAST/NORTH AFRICA	ELECTRICITY	7 056,679	WIRETRAJISFER	·	11/A	N/A
1.	- 12 s		3.54	· .		INFRASTRUCTU					
(2)			3) (1)		MIDDLE EAST/NORTH AFRICA	FACILITIES	15,887,305	WIRETRANSFER		N/A	A/H
1.	Margar es " .		يالأمو د	' '		HOUSING					1
(3)	1/4				MIDDLE EAST/NORTH AFRICA	PROGRAM	82,698,044	WIRETRANSFER		11/A	11/A
1	7. HE		٩			MAIN ROADS					
(4)	ે વસત		يرا ي⊷	*	MIDDLE EAST/NORTH AFRICA	DEVELOPMENT	13,238,316	WIRETRANSFER		II/A	N/A
	1275	,		10.0	4	ROAD				1.	1 .
(5)		<u></u>	- <u>10-</u>	, '0	MIDDLE EAST/NOPTH AFRICA	DEVELOPMENT	1,034,140	WIRETRANSFER		11/A	11/A
l	Legis	j		1. '	`-	DJIBOUTI UNI		1		1.	
(6) k			* * *	The second of	MIDDLE EAST/NORTH AFRICA	CONSTRUCTION	2,45°,397	WIRETRANSFER	_	N/A	N/A
1	, AT, -34,	·	- 4	*10'.	•]	PORT OF					
(7)		 -		<u>, , , , , , , , , , , , , , , , , , , </u>	MIDDLE EAST/HORTH AFFICA	HARDOLDAT	8,279,748	WIRETRAJISFER		N/A	N/A
4 4	类件制		e digital digi	,		WATER		1		1	
(8)	<u> </u>		<u></u> <u></u>	·	MIDDLE EAST/NOPTH AFRICA	SUPPLY	119,324	WIRETRANSFER		N/A	II/A
1	Say - F	Ļ	, i	P + + + + + + + + + + + + + + + + + + +		URGENT PROGR		i		1	
(9)	149	*			MIDDLE EAST/NORTH AFRICA	PALESTINE	47,040,106	WIRETRANSFER		N/A	11/A
	The state of the s	-	, Yes,	4 14 4	<u></u>						
(10)	7486		- €¢ -	<u> </u>	1						
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(15)	10 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0		1								
(16)	14		~ie								

			0 1 : 1 1 E (E :
3	Enter total number of other organizations or entities	•	138
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	▶	3
2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized a	s tax-exempt	

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7E1275 1 000 TN5186 2532

(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 noncash assistance	(g) Description of noncash assistance	(h) Method o valuation (book FMV appraisal othe
1) PHD SCHOLARSHIPS	MIDDLE EAST/POPTH AFRICA	17	457,848	WIRETRANSFER		N/A	II/A
2)							
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Schedule F (Form 990) 2017

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Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	No No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	X Yes	☐ No

Dord V Commi

Part V Supplemental Information

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

SCHEDULE F, PART I, LINE 2

INVESTIGATED BY TECHNICAL STAFF.

PROCEDURES FOR MONITORING GRANTS OUTSIDE THE UNITED STATES:

THE AIM OF GRANTS IS TO PROVIDE INSTITUTIONAL SUPPORT TO MEMBER STATES TO ENHANCE THE EFFICIENCY OF PROJECT PREPARATION INCLUDING IMPLEMENTATION

AND CONDUCTING TECHNICAL AND FEASIBILITY PROJECT STUDIES AND RESEARCH AND OTHER ACTIVITIES RELATED TO ECONOMIC AND SOCIAL DEVELOPMENT. OFTEN, BUT NOT ALWAYS, THIS WILL LEAD TO THE FINANCING OF A PROJECT. GRANTS MUST BE APPROVED BY THE BOARD OF DIRECTORS AND BECOME EFFECTIVE WHEN SIGNED BY THE FUND AND THE BENEFICIARY ORGANIZATION IN THE FORM OF A LETTER OF UNDERSTANDING STATING THE IMPLEMENTATION PROCEDURES OF THE ACTIVITY TO BE FINANCED AND THE DISBURSEMENT SCHEDULE. FUNDS ARE TYPICALLY DISBURSED IN STAGES BY THE FINANCE DEPARTMENT. IF ANY ISSUES ARISE THESE ARE

SECONDLY, THE EXECUTING AGENCY PROVIDES THE ARAB FUND WITH PERIODIC PROGRESS REPORTS THAT ADDRESS BOTH THE TECHNICAL AND FINANCIAL ASPECTS OF THE PROJECT. FIELD VISITS ARE ALSO MADE BY ARAB FUND STAFF TO THE BENEFICIARY WHENEVER THE NEED TO ADDRESS SPECIFIC ISSUES RELATED TO THE IMPLEMENTATION OF A PROJECT ARISES. AT THE COMPLETION OF THE PROJECT, THE EXECUTING AGENCY PROVIDES THE ARAB FUND WITH A FINAL REPORT THAT COVERS ALL ASPECTS OF THE PROJECT.

PROCEDURES FOR MONITORING EXTENDING LOANS OUTSIDE THE UNITED STATES:

THE PRINCIPAL PURPOSE OF THE ARAB FUND IS TO CONTRIBUTE TO THE FINANCING

OF ECONOMIC AND SOCIAL DEVELOPMENT PROJECTS IN THE ARAB COUNTRIES. TO

Part V

Supplemental Information

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

ATTAIN THIS PURPOSE, THE ARAB FUND PROVIDES FINANCING FOR ECONOMIC DEVELOPMENT PROJECTS BY EXTENDING LOANS, ON CONCESSIONARY TERMS, TO GOVERNMENTS AND PUBLIC CORPORATIONS AND ENTERPRISES OF MEMBER STATES, GIVING PREFERENCE TO PROJECTS WHICH ARE VITAL TO THE ARAB WORLD AND JOINT ARAB PROJECTS.

THE PROJECT CYCLE IN THE ARAB FUND BEGINS WITH PROJECT FAMILIARIZATION AND RECEIPT OF A FINANCING REQUEST FROM THE GOVERNOR REPRESENTING THE COUNTRY REQUESTING THE LOAN, ALONG WITH A TECHNO-ECONOMIC FEASIBILITY STUDY FOR THE PROPOSED PROJECT.

UNDER THE GUIDELINES OF THE ARAB FUND'S LENDING OPERATIONS, THE PROJECT UNDERGOES A DESK-REVIEW AND A FIELD-VISIT EVALUATION BY THE FUND'S TECHNICAL STAFF. IF THE PROJECT PROVES FEASIBLE, A LOAN AGREEMENT IS PREPARED, NEGOTIATIONS TAKE PLACE BETWEEN THE REPRESENTATIVES OF THE ARAB FUND AND THE REPRESENTATIVES OF THE COUNTRY CONCERNED, AND THE AGREEMENT IS INITIALIZED. THE LOAN COMMITTEE, COMPRISING OF REPRESENTATIVES FROM THE ARAB FUND AND AN EXPERT, CHOSEN BY THE GOVERNOR OF THE MEMBER STATE, PRESENTS THE DIRECTOR GENERAL WITH A REPORT ON THE TECHNICAL AND FINANCIAL FEASIBILITY, THE VIABILITY OF PROJECT AND THE PROPOSED FINANCING AND CONDITIONS.

THE DIRECTOR GENERAL THEN PRESENTS A REPORT ON THE FINAL AGREEMENT THAT INCLUDES THE EVALUATION REPORT, THE LOAN COMMITTEE REPORT AND THE LOAN

Part V

Supplemental Information

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

AGREEMENT TO THE BOARD OF DIRECTORS.

AFTER THE BOARD OF DIRECTORS ACCEPTS THE PROJECT, THE FINAL SIGNING OF THE LOAN AGREEMENT TAKES PLACE BY THE DELEGATED REPRESENTATIVE OF THE BORROWER AND THE DIRECTOR GENERAL/CHAIRMAN OF THE BOARD OF DIRECTORS. THE BORROWER TAKES THE NECESSARY MEASURES TO RATIFY THE LOAN AGREEMENT LEGALLY, AND MEET OTHER REQUIRED CONDITIONS TO MAKE THE LOAN AGREEMENT EFFECTIVE. ONCE THIS IS ACHIEVED THE ARAB FUND INFORMS THE BORROWER THAT THE AGREEMENT IS EFFECTIVE, AND THAT THE LOAN CAN BE DRAWN DOWN, IN ACCORDANCE WITH THE FUND'S GUIDELINES.

ARAB FUND'S TECHNICAL STAFF THEN SUPERVISES THE PROJECT IMPLEMENTATION, THROUGH WRITTEN REPORTS AND FIELD VISITS.

SCHEDULE F, PART I, LINE 3

COLUMN F - METHOD USED TO ACCOUNT FOR EXPENDITURES THE ACCOUNTING OF ALL EXPENDITURES IS CARRIED OUT ON A FULL ACCRUAL BASIS AND REPORTED IN ACCORDANCE WITH INTERNATIONAL FINANCIAL REPORTING AS CERTIFIED BY THE EXTERNAL AUDITORS.

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23
Attach to Form 990 ► Go to www irs.gov/Form990 for instructions and the latest information

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

Employer identification number 98-0211642

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form	13 × ~		. (9
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			- 2
	X First-class or charter travel X Housing allowance or residence for personal use			^ }
	X Travel for companions Payments for business use of personal residence	A.v.		, vi
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	4		
	Discretionary spending account X Personal services (such as, maid, chauffeur, chef)	i,		্ৰে
		ا غ]. ;
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment	<u> </u>		
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all	1		- 3
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a ²	2	Х	ĺ
2	Indicate which, if any, of the following the filing organization used to establish the compensation of the	1,70		7
3	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a	5,0		!
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III		,	-
	Compensation committee X Written employment contract	*	1	**
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	1 1	,	
		5.5		1
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			- :
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	201		ŧ.
	The feet to diff of lines and of line persons and provide the applicable amounts for each item. In fact the			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	. ;	,	-
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	~ ~ <u>~</u> ***		5 d
•	compensation contingent on the revenues of	, s		
а	The organization?	5a		Х
b	Any related organization?	5b		Х
-	If "Yes" on line 5a or 5b, describe in Part III	7		£ .
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	- 5		, ,
Ŭ	compensation contingent on the net earnings of	2 3		
а	The organization?	6a		Х
b	Any related organization?	6b		Х
D	If "Yes" on line 6a or 6b, describe in Part III	~	,	<u> </u>
_				.
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	-		
8	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
0	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	,,		2
9	Regulations section 53 4958-6(c)?	9		تحدا
	negulations section so 4000-0(c)			<u> </u>

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

Page 2

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

Schedule J (Form 990) 2017

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

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

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

		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i) (D)	in column (B) reported as deferred on pnor Form 990
ABDULATIF Y. AL-HAMAD	0	422,000	0.	159,098	85,227	121,356.	787,681	0
1CHAIRMAN/DIRECTOR GENERAL	(11)	0	0.	0	0	0	0	0
ABDLRAHMAN AL-HUMEMEDI	(1)	180,126	0.	125,010	0	27,148	332,284	0
2DIPECTOR OF ADMINISTRATION	(11)	0	0	0	0_	0	0	0
AHMED OSMAN ALI	(1)	150,998	0	104,812	0	6,371	262,181	0
3DIRECTOR OF TECHNICAL DEPT	(n)	0	0.	0	0	0	0	0
MOHAMMAD A. AL-QATAMI	(i)	136,387	0	106,838	0_	1,058	244,283	0
4DIPECTOR OF H Q BUILDING	(11)	0	0	0	0	0	0	0
ABDUL HAMID M AL-ZIGAL	(1)	134,100	0.	82,344	0	21,353	237,797	0
5ECONOMIC ADVISOR	(11)	0	0.	0	0	0	0	0
KHALIFA A.DAU	(0)	136,387	0.	98,883	0	21,870	257,140	0
6FINANCIAL ADVISOR	(H)	0	0	0	0	0	0	0
SAID M AL SHINNAWI	(0)	147,126	0.	109,594	0	15,484	272,204	0
7 DIRECTOR FINANCE DEPARTMENT	(n)	0	0.	0	0	0	0	0
MOHAMED CHEBIL BEDOUI	(0)	116,235	0.	94,531	0	7,394	218,160	0
8CHIEF DISBS LOAMS & GRANTS	(11)	0	0	0	0	0	0	0
FAUD FADHL ABBAS	(0)	112,655.	0	93,509	0	21,985	228,149	0
9 INVESTMENT OFFICEP	(n)	0	0.	0	0	0	0	0
MOHAMED M. AZZUZ	(1)	165,330	0.	113,377	0	34,302	313,009	0
10 DIPECTOR OF AUDITING	(11)	0	0	0 :	0	0	0	0
MAHMOUD EL-EMAM	(0)	125,761	0	86,797	0	-74	212,484	0
11 CHIEF	(11)	0	0	0	0	0	0	0
HASB EL RASOUL OBEIDA	(0)	117,759	0	94,301	0	14,030	226,090	0
12 LEGAL ADVISOR	(0)	0	0	0	0	0	0	0
SOAD AL-ATIGI	(1)	121,538	0	89,880	0_	1,449	212,867	0
13 LEGAL ADVISOR/SECRETARY	(n)	0	0.	0	0	0	0	0
MAHMOUD IBRAHIM ABO ELY	(1)	130,089	0.	77,794	0	4,574	212,457	0_
	(11)	0	0	0	0	0	0	0
OSAMA WANNAS	(1)	113,848	0.	93,554.	0	3,952	211,354	0
15 ENGINEER CONSULTANT	(n)	0	0.	0	0	0	0	0
	(1)	_						
16	(11)							

Schedule J (Form 990) 2017

JSA

7E1291 1 000 TN5186 2532

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

98-0211642

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Schedule J (Form 990) 2017

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 1A

QUESTIONS REGARDING COMPENSATION

FIRST CLASS TRAVEL SENIOR OFFICERS TRAVEL FIRST CLASS JUNIOR STAFF

TRAVEL STEARAGE WITH UPGRADES TO THE NEXT LEVEL UP IF TRAVELING WITH

SENIOR STAFF

TRAVEL FOR COMPANIONS ALL EXPATRIATE STAFF ARE REIMBURSED THE ANNUAL

COST OF ONE RETURN TRIP PER ANNUM TO THEIR NATIVE COUNTRY FOR THEM AND

THEIR SPOUSES AND CHILDREN UNDER 21 YEARS OLD.

HOUSING ALLOWANCE FACTORED INTO THE SALARY CALCULATION FOR ALL STAFF IS

AN AMOUNT, FIAED ACCORDING TO GRADE, TO CONTRIBUTE TOWARDS THE COST OF

HOUSING AND TRANSPORT IN KUWAIT

PERSONAL SERVICES THE DIRECTOR GENERAL HAS A DRIVER ASSIGNED TO HIM IN

KUWAIT

ALL COMPENSATION REPORTED ON THE FORM 990 IS DERIVED FROM NON-US

SOURCES

NONE OF THE DIRECTORS, OFFICERS OR HIGHEST PAID EMPLOYEES WORK IN OR

TRAVEL TO THE UNITED STATES FOR ARAB FUND PURPOSES

Schedule J (Form 990) 2017

JSA

7E1505 1 000 TN5186 2532

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

Inspection

Department of the Treasury Internal Revenue Service

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b ►Attach to Form 990 or Form 990-EZ

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

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

Name of the organization ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT Employer identification number 98-0211642

	Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b								
4	(a) Name of deposits of the control	(b) Relationship between disqualified person and	(a) Description of transaction	(d) Corrected					
1	(a) Name of disqualified person	organization	(c) Description of transaction	Yes No					
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									

Enter the amount of tax incurred by the organization managers or disqualified persons during the year

Loans to and/or From Interested Persons

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

(a) Name of interested person ATTACHMENT 1	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		from the principal amount	from the	(e) Original principal amount		(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No		
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)		-												
(8)														
(9)										-				
10)														

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
10)				

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

Schedule L (Form 990 or 990-EZ) 2017

JSA 7E1297 1 000

Schedule L (Form 990 or 990-EZ) 2017

Part IV	Business	Transactions	Involving	Interested	Persons.
---------	----------	---------------------	-----------	------------	----------

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

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

Part V **Supplemental Information**

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

Schedule L (Form 990 or 990-EZ) 2017

Page 2

Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Shanng organization revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					ļ
(6)					ļ
(7)					ļ
					<u> </u>
(9)					
(10)					

Part V Supplemental Information

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

ATTACHMENT 1

SCHEDULE L, PART II

NAME	MOHAMED M AZZUZ
RELATIONSHIP WITH ORGANIZATION	OFFICER
PURPOSE OF LOAN	SALARY ADVANCE
LOAN TO OR FROM THE ORG ?	TO FROM
ORIGINAL PRINCIPAL AMOUNT	6,504.
BALANCE DUE	6,504.
IN DEFAULT?	YES 'NO
APPROVED BY BOARD OR COMMITTEE	YES NO
WRITTEN AGPEEMENT?	λ YES NO
NAME	A R AL-HUMAIDI
RELATIONSHIP WITH ORGANIZATION	OFFICER
PURPOSE OF LOAN	SALARY ADVANCE
LOAN TO OR FROM THE ORG ?	TO X FFOM
ORIGINAL PRINCIPAL AMOUNT	6,961.
BALANCE DUE	6,961.
IN DEFAULT?	YES X NO
APPROVED BY BOARD OR COMMITTEE	YES NO
WRITTEN AGREEMENT?	λ YES NO
NAME	MOHAMAD AL-Q⁴TAMI
RELATIONSHIP WITH ORGANIZATION	OFFICER
PURPOSE OF LOAN	SALARY ADVANCE
LOAN TO OR FROM THE ORG ?	TO X FROM
ORIGINAL PRINCIPAL AMOUNT	16,706.
BALANCE DUE	16,706.
IN DEFAULT?	YES > NO
APPROVED BY BOARD OR COMMITTEE	YES NO
WRITTEN AGREEMENT?	X YES NO

Part IV **Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization		(d) Description of transaction	(e) Sharing of organization s revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					L
(6)					
(7)					
(8)					
(9)					
(10)					

Part V **Supplemental Information**

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

ATTACHMENT 1 (CONT'D)

SCHEDULE L, PART II

NAME	SAID AL-SHINAWI
RELATIONSHIP WITH ORGANIZATION	OFFICER
PURPOSE OF LOAN	SALARY ADVANCE
LOAN TO OR FROM THE ORG ?	TO "FROM
ORIGINAL PRINCIPAL AMOUNT	1,241.
BALANCE DUE	1,241.
IN DEFAULT?	YES Y NO
APPROVED BY BOARD OR COMMITTEE	λ YES NO
WRITTEN AGPEEMENT?	λ YES NO
NAME	FAUD FADHL ABBAS
RELATIONSHIP WITH ORGANIZATION	OFFICER
PURPOSE OF LOAN	SALARY ADVANCE
LOAN TO OR FROM THE ORG ?	TO λ FROM
ORIGINAL PRINCIPAL AMOUNT	4,930.
BALANCE DUE	4,930.
IN DEFAULT?	YES X NO
APPROVED BY BOARD OR COMMITTEE	λ YES NO
WRITTEN AGREEMENT?	YES NO
HAME	HASSAB EL RASOUL E HAMODA
RELATIONSHIP WITH ORGANIZATION	HIGHEST PAID EMPLOYEE
PURPOSE OF LOAN	SALARY ADVANCE
LOAN TO OP FROM THE ORG ?	TO X FROM
ORIGINAL PRINCIPAL AMOUNT	13,921.
BALANCE DUE	13,921.
IN DEFAULT?	YES X NO
APPROVED BY BOARD OR COMMITTEE	λ YES NO
WRITTEN AGREEMENT?	λ YES NO

Schedule L (Form 990 or 990-EZ) 2017

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Shanng organization revenues?	
				Yes	No
(1)					<u> </u>
(2)					<u> </u>
(3)					<u> </u>
(4)					
(5)					<u> </u>
(6)					<u> </u>
(7)					<u> </u>
(8)					<u> </u>
(9)		_			
(10)					

Part V Supplemental Information

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

ATTACHMENT 1 (CONT'D)

SCHEDULE L, PART II

MAHMOUD ELYOUN RELATIONSHIP WITH ORGANIZATION HIGHEST PAID EMPLOYEE PURPOSE OF LOAN SALARY ADVANCE LOAN TO OR FROM THE ORG ? 2,983. ORIGINAL PPINCIPAL AMOUNT 2,983. BALANCE DUE У 110 IN DEFAULT? ŕES APPROVED BY BOARD OR COMMITTEE NO A YES WRITTEN AGREEMENT? λ YES

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

gov/form990 Inspection
Employer identification number

98-0211642

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

FORM 990, PART V, LINE 2A

NUMBER OF EMPLOYEES REPORTED ON FORM W-3

PER THE AUDITED FINANCIAL STATEMENTS, THE ORGANIZATION PER KUWAIT LAWS RECOGNIZES 205 EMPLOYEES AS OF DECEMBER 31, 2017, OF WHICH NONE WERE REPORTED ON U.S. IRS FORM W-3 BY THE ORGANIZATION OR REPORTING AGENTS OF THE ORGANIZATION.

FORM 990, PART VI, LINE 6

MEMBERS OF THE GOVERNING BODY

THE MEMBERS OF THE ORGANIZATION INCLUDE 22 COUNTRIES THAT ARE MEMBERS OF THE LEAGUE OF ARAB STATES - ALGERIA, BAHRAIN, COMOROS, DJIBOUTI, EGYPT, IRAQ, JORDAN, KUWAIT, LEBANON, LIBYA, MAURITANIA, MOROCCO, OMAN, PALESTINE, QATAR, SAUDI ARABIA, SOMALIA*, SUDAN, SYRIA, TUNISIA, UNITED ARAB EMIRATES, YEMEN.

*MEMBERSHIP SUSPENDED PURSUANT TO THE BOARD OF GOVERNERS RESOLUTION IN 1993, EXTENDED ANNUALLY BY SUBSEQUENT RESOLUTIONS.

FORM 990, PART VI, LINE 7A

ELECTION OF THE GOVERNING BODY

THE ORGANIZATION IS GOVERNED AND MANAGED BY A BOARD OF GOVERNORS, THE DIRECTOR GENERAL AND CHAIRMAN OF THE BOARD OF DIRECTORS, AND THE STAFF AND COMMITTEES NECESSARY TO PERFORM THE DUTIES OF THE FUND AS SET OUT IN THE AGREEMENT ESTABLISHING THE ORGANIZATION.

Employer identification number 98-0211642

THE MEMBER COUNTRIES OF THE ORGANIZATION EACH NOMINATE A GOVERNOR AND AN ALTERNATE GOVERNOR TO THE BOARD OF GOVERNORS OF THE ORGANIZATION. THE BOARD OF GOVERNORS ACTS AS A GENERAL ASSEMBLY OVERSEEING POLICY AND THE ACHIEVEMENT OF THE PURPOSE OF THE ORGANIZATION AND MEETS AT LEAST ANNUALLY.

THE BOARD OF GOVERNORS APPOINTS AND DELEGATES CERTAIN POWERS TO THE BOARD OF DIRECTORS. EACH GOVERNOR NOMINATES A DIRECTOR AND HIS ALTERNATE FROM WHICH THE BOARD OF GOVERNORS VOTES THE BOARD OF DIRECTORS. EACH GOVERNOR DELEGATES THE NUMBER OF VOTES HE REPRESENTS ON THE BOARD OF GOVERNORS TO A BOARD DIRECTOR. THE ALTERNATE DIRECTORS ASSIST THE DIRECTORS IN THEIR WORK, ATTEND ALL BOARD MEETINGS AND VOTE IN THE ABSENCE OF THE DIRECTOR THEY REPRESENT.

THE BOARD OF DIRECTORS IS CHARGED BY THE BOARD OF GOVERNORS WITH SUPERVISING THE ACTIVITIES OF THE ORGANIZATION. THEY TYPICALLY MEET FOUR TIMES A YEAR. FOR THE PURPOSES OF THIS FORM 990 THE BOARD OF DIRECTORS IS CONSIDERED TO BE THE GOVERNING BODY OF THE ORGANIZATION.

THE BOARD OF GOVERNORS APPOINTS A DIRECTOR GENERAL TO THE ORGANIZATION WHO CANNOT BE A GOVERNOR OR A DIRECTOR. THE DIRECTOR GENERAL SHALL PRESIDE OVER MEETINGS OF THE BOARD OF DIRECTORS BUT SHALL HAVE NO VOTE EXCEPT IN THE CASE OF AN EQUAL DIVISION. THE DIRECTOR GENERAL IS THE HEAD OF STAFF OF THE ORGANIZATION AND CARRIES OUT ALL BUSINESS OF THE ORGANIZATION UNDER THE SUPERVISION OF THE BOARD OF DIRECTORS.

Name of the organization

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

Employer identification number 98-0211642

FORM 990, PART VI, 7B

DECISIONS OF THE GOVERNING BODY

THE BOARD OF DIRECTORS AND THE DIRECTOR GENERAL ARE DELEGATED THEIR POWERS BY THE BOARD OF GOVERNORS. ANYTHING OUTSIDE THEIR SCOPE OF AUTHORITY NEEDS TO BE REFERRED TO THE BOARD OF GOVERNORS FOR THEIR APPROVAL.

FORM 990, PART VI, LINE 11B

REVIEW PROCESS FOR FORM 990

THE PROCESS OF REVIEWING THE FORM 990 IS SUBMISSION OF QUESTIONS ARISING DURING COMPILATION AND ULTIMATELY THE COMPLETED RETURN FOR REVIEW BY THE INVESTMENT OFFICER, DIRECTOR OF FINANCE AND DIRECTOR GENERAL.

FORM 990, PART VI, LINE 12A

CONFLICT OF INTEREST POLICY

AS SET OUT IN THE ESTABLISHMENT AGREEMENT THE DIRECTOR GENERAL AND STAFF
OWE THEIR DUTY TO THE FUND. IN THE COURSE OF CONDUCT OF BUSINESS THEY
MUST NOT ALLOW THEMSELVES TO BE INFLUENCED BY ANY CONSIDERATIONS OTHER
THAN THE INTEREST OF THE FUND AND THEY SHALL REMAIN IMPARTIAL IN THE
DISCHARGE OF THEIR DUTIES.

FORM 990, PART VI, LINE 15A

COMPENSATION POLICY

THE BOARD OF GOVERNORS DETERMINES THE REMUNERATION TO BE PAID TO THE MEMBERS OF THE BOARD OF DIRECTORS AND THEIR ALTERNATES AS WELL AS THE SALARY AND TERMS OF THE CONTRACT OF SERVICE OF THE DIRECTOR GENERAL/
CHAIRMAN OF THE BOARD OF DIRECTORS. REMUNERATION FOR ALL EMPLOYEES WAS

Name of the organization

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

Employer identification number 98-0211642

LAST REVIEWED IN 2012.

FORM 990, PART VI, LINE 15B

COMPENSATION POLICY

THE DIRECTOR GENERAL SHALL BE THE HEAD OF STAFF AND SHALL BE RESPONSIBLE FOR CONDUCTING ALL BUSINESS UNDER THE SUPERVISION OF THE BOARD OF DIRECTORS. HE SHALL APPLY TECHNICAL AND ADMINISTRATIVE REGULATIONS AND HAVE THE RIGHT TO APPOINT AND DISMISS EXPERTS AND STAFF IN ACCORDANCE WITH THE REGULATIONS. REMUNERATION FOR ALL EMPLOYEES WAS LAST REVIEWED IN 2012.

FORM 990, PART VI, LINE 19

DOCUMENTS AVAILABLE FOR PUBLIC INSPECTION

INFORMATION ON THE FUND IS AVAILABLE ON THE WEB AT WWW.ARABFUND.ORG.

FORMS ARE AVAILABLE FOR PUBLIC INSPECTION AND UPON REQUEST - SEE PART VILINE 20 FOR DETAILS.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS BOY NET ASSET

CURRENCY TRANSLATION DIFFERENCE : \$135,649,515

ALLOCATED RESERVES : \$196,218,097

CURRENCY DIFFERENCE : \$ 752,403

TRUST FUND SHARE OF INCOME : (\$ 93,241,631)

TOTAL LINE 9 : \$239,378,384

Name of the organization

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

Employer identification number

98-0211642

ATTACHMENT 1

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

THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO CONTRIBUTE TO THE FINANCING OF ECONOMIC AND SOCIAL DEVELOPMENT IN THE ARAB STATES. THE ORGANIZATION SEEKS TO ASSIST MEMBER COUNTRIES IN ELIMINATING DEVELOPMENT CONSTRAINTS, INCREASING THE ABSORPTIVE CAPACITY AND ACHIEVING HIGHER RATES OF GROWTH, AND TO FOSTER ECONOMIC INTEGRATION AND COOPERATION AMONG MEMBER COUNTRIES.

ATTACHMENT 2

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

EGYPT

BAHRAIN

KUWAIT

UNITED KINGDOM

ATTACHMENT 3

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
MORGAN STANLEY INVESTMENT BANK 25 CABOT SQ, CANARY WHARF, FL 6 LONDON UNITED KINGDOM E14 4QA	PORTFOLIO MANAGEMENT	3,848,421.
AHLI UNITED BANK - AUB 35 PORTMAN SQUARE LONDON UNITED KINGDOM W1H 6LR	PORT MGMT & VAL SVCS	2,895,176.
GULF INTERNATIONAL BANK - GIB 1 KNIGHTSBRIDGE LONDON UNITED KINGDOM SW1X 7XS	PORTFOLIO MANAGEMENT	1,519,543.
KUWAIT SWEDISH COMPANY - KUWAIT	WAIT STAFF&CLEANING	672,986.

Name of the organization

ARAB FUND FOR ECONOMIC AND SOCIAL DEVELOPMENT

Employer identification number

98-0211642

ATTACHMENT 3 (CONT'D)

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

NAME AND ADDRESS

DESCRIPTION OF SERVICES

COMPENSATION

PO BOX 21225

SAFAT

KUWAIT 13073

BADER AL MULLA COMPANY - KUWAIT

BUILDING MAINTENANCE

346,661.

PO BOX 177

SAFAT

KUWAIT 13002