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Form 990 Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		2010
		Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011		
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization PLAN INTERNATIONAL INC	D Employer identification number 51-0169168
	Doing Business As	E Telephone number (401) 737-5770
	Number and street (or P O box if mail is not delivered to street address) PO BOX 7670 155 PLAN WAY	Room/suite
	G Gross receipts \$ 549,281,320	
	City or town, state or country, and ZIP + 4 WARWICK, RI 02887	
	F Name and address of principal officer NIGEL CHAPMAN DUKES COURT WOKING GU BH UK	H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		
J Website: ▶ www.plan-international.org		
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation 1937	M State of legal domicile NY

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities See Schedule O																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td>3 Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>11</td></tr><tr><td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>11</td></tr><tr><td>5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)</td><td>5</td><td>116</td></tr><tr><td>6 Total number of volunteers (estimate if necessary)</td><td>6</td><td>0</td></tr><tr><td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>0</td></tr><tr><td>7b Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td></td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	11	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	116	6 Total number of volunteers (estimate if necessary)	6	0	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	7b Net unrelated business taxable income from Form 990-T, line 34	7b							
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Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer	2012-01-05 Date		
	NIGEL C CHAPMAN CEO Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name ROBERT A PERILLO	Preparer's signature ROBERT A PERILLO	Date	Check if self-employed ☐ PTIN
	Firm's name ▶ DYL & PERILLO INC	Firm's EIN ▶		
	Firm's address ▶ 38 NORTH COURT STREET PROVIDENCE, RI 02903	Phone no ▶		

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization’s mission

See Schedule O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 90,545,799 including grants of \$) (Revenue \$)

HEALTHY START IN LIFE TRAINING HEALTH WORKERS, PREVENTATIVE HEALTH EDUCATION, CHILDHOOD ILLNESS PREVENTION, BUILDING AND EQUIPPING PRE-SCHOOL INFRASTRUCTURE AND CLINICS, PROGRAMMES AND ADVOCACY FOR UNIVERSAL BIRTH REGISTRATION DURING FISCAL YEAR 2010, PLAN TRAINED 175,886 PROFESSIONAL AND VOLUNTEER HEALTH WORKERS ON EARLY EDUCATION AND HEALTH CARE SKILLS, BENEFITTING 18,416 COMMUNITIES

4b

(Code) (Expenses \$ 54,287,255 including grants of \$) (Revenue \$)

PARTICIPATE AS CITIZENS EDUCATION THROUGH CHILD MEDIA, LIFE SKILLS TRAINING FOR ADOLESCENTS, BECAUSE I AM A GIRL CAMPAIGN, CHILD AND YOUTH GROUP ACTIVITIES, ACTIVITIES TO INCREASE PUBLIC KNOWLEDGE AND UNDERSTANDING OF POVERTY AND VULNERABILITY ISSUES WHICH PREVENT CHILDREN FROM REALISING THEIR FULL POTENTIAL

4c

(Code) (Expenses \$ 108,223,467 including grants of \$) (Revenue \$)

EDUCATION TEACHER TRAINING, BUILDING AND EQUIPPING CLASSROOMS, CHILD MEDIA, ADVOCACY FOR EDUCATIONAL POLICY IMPROVEMENTS (INCLUDING THE LEARN WITHOUT FEAR CAMPAIGN) AND OTHER RECREATIONAL ACTIVITIES DURING FISCAL YEAR 2011, PLAN TRAINED 76,419 PROFESSIONAL AND VOLUNTEER EDUCATION WORKERS AND SCHOOL MANAGEMENT STAFF ON CHILD FRIENDLY LEARNING SKILLS, BENEFITTING 14,988 COMMUNITIES PLAN ALSO SUPPORTED THE CONSTRUCTION AND REHABILITATION OF 1,723 SCHOOLS

4d

Other program services (Describe in Schedule O) See also Additional Data for Description

(Expenses \$ 254,723,837 including grants of \$) (Revenue \$)

4e

Total program service expenses

\$ 507,780,358

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d	Yes
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV 	15	Yes
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	Yes
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> 	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> 	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>  ☒ Yes ☐ No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance				
Check if Schedule O contains a response to any question in this Part V ☐				
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	15	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return.	2a	116	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	Enter the name of the foreign country: BG, BL, BR, CB, CH, CO, DR, EC, GT, HA, HO, IN, NU, PM, PA, PE, ES, BN, UV, CM, EG, ET, GH, GV, PU, KE, LI, RP, MI, ML, MZ, NG, RW, SG, SL, VM, SU, TZ, TO, UG, ZA, ZI, ID, LA, NP, PK, UK, CE, TH.			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?				
		8		No
9 Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10 Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11 Section 501(c)(12) organizations. Enter				
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c	Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				
		14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part VI

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

Section 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	1a 11		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	15b		No
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filed NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization JILL KRUEGER PO BOX 7670 155 PLAN WAY WARWICK, RI 02887 (401) 737-5770

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PAUL ARLMAN Chairman	6 00	X		X				0	0	0
(2) EZRA MBOGORI Vice-Chair	3 00	X		X				0	0	0
(3) PETER A GROSS Treasurer	3 00	X		X				0	0	0
(4) PIERRE BARDON Director	2 00	X						0	0	0
(5) STAN BARTHOLOMEEUSSEN Director	2 00	X						0	0	0
(6) WERNER BAUCH Director	2 00	X						0	0	0
(7) LYDIE BOKA-MENE Director	2 00	X						0	0	0
(8) MARTIN HOYOS Director	2 00	X						0	0	0
(9) DOROTA KEVERIAN Director	2 00	X						0	0	0
(10) JOSHUA LISWOOD Director	2 00	X						0	0	0
(11) ANNE SKIPPER Director	2 00	X						0	0	0
(12) AWA N'DEYE OUEDRAOGO Director	2 00	X						0	0	0
(13) NIGEL CHAPMAN Chief Executive Officer	48 00			X				65,865	0	235,384
(14) JAMES EMERSON Deputy Chief Executive Officer	48 00			X				0	0	233,176
(15) JOHN CHALONER Deputy Chief Executive Officer	48 00			X				0	0	196,682
(16) TJIPKE BERGSMA Deputy Chief Executive Officer	48 00			X				0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(17) ANN FIRTH COO and Director of Finance	48 00			X				0	0	169,903
(18) HAN DIJSSELBLOEM Operations Mgr , Honduras	48					X		173,045		3,418
(19) HABTE WOLDEMARIAM Country Director, Mozambique	48					X		162,589		4,321
(20) JOHN MCDONOUGH Country Director, Indonesia	48					X		146,250		4,036
(21) MATTHEW CARLSON Deputy Regional Director, Americas	48					X		145,479		4,002
(22) R GOMEZ Project Mgr Guatemala	48					X		141,396		
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								834,624		850,922

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization	5						
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>3</td><td></td><td>No</td></tr></table>		Yes	No	3		No
	Yes	No						
3		No						
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	<table><tr><td></td><td>Yes</td><td></td></tr><tr><td>4</td><td>Yes</td><td></td></tr></table>		Yes		4	Yes	
	Yes							
4	Yes							
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	<table><tr><td></td><td></td><td>No</td></tr><tr><td>5</td><td></td><td>No</td></tr></table>			No	5		No
		No						
5		No						

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
	(A) Name and business address	(B) Description of services	(C) Compensation
	SATYAM COMPUTER SERVICES HYDERABAD IN	Software Design	587,390
	STICHTING THE AFRICA CHILD POLICY FORUM AMSTERDAM NL	Gender & Program Mgmt	496,895
	GPS KISSIDOUGOU KISSIDOUGOU GV	Secreterial Services	404,757
	BRIDGE ASIA HONMACHI JA	Programme Management	384,855
	AACG GUECKEDOU GUECKEDOU GV	Project Monitoring& Mgmt	362,517
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization		10

Part VIII

Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	534,544,954			
	e	Government grants (contributions)	1e	12,006,096			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,194,203			
	g	Noncash contributions included in lines 1a-1f \$		19,839,553			
	h	Total. Add lines 1a-1f		547,745,253			
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		414,388		414,388
4		Income from investment of tax-exempt bond proceeds . . .					
5		Royalties					
6a		Gross Rents	(i) Real	(ii) Personal			
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	811,038		
b		Less cost or other basis and sales expenses			376,089		
c		Gain or (loss)			434,949		
d		Net gain or (loss)			434,949		434,949
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b		Less direct expenses	b				
c		Net income or (loss) from fundraising events . . .					
9a		Gross income from gaming activities See Part IV, line 19	a				
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities . . .					
10a		Gross sales of inventory, less returns and allowances	a				
b		Less cost of goods sold	b				
c		Net income or (loss) from sales of inventory . . .					
	Miscellaneous Revenue	Business Code					
11a	Other Income	900099	310,641			310,641	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		310,641				
12	Total revenue. See Instructions		548,905,231			1,159,978	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	223,170,709	223,170,709		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	63,472	0	63,472	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	105,294,063	104,354,253	146,567	793,243
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,039,217	961,287	76,251	1,679
9	Other employee benefits	27,688,535	27,337,656	56,949	293,930
10	Payroll taxes	237,275	207,622	29,653	0
a	Fees for services (non-employees)				
	Management	42,797,450	31,448,690	7,470,245	3,878,515
b	Legal	1,024,171	1,023,254	0	917
c	Accounting	1,052,919	555,641	497,278	0
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	22,176			22,176
f	Investment management fees				
g	Other	5,623,108	5,592,082	2,153	28,873
12	Advertising and promotion	819,176	719,477	0	99,699
13	Office expenses	18,435,997	18,203,090	28,163	204,744
14	Information technology	4,502,494	4,486,068	0	16,426
15	Royalties				
16	Occupancy	12,420,968	12,420,277	0	691
17	Travel	30,898,749	30,393,996	353,153	151,600
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,630,282	19,424,580	116,143	89,559
20	Interest	17	17	0	0
21	Payments to affiliates	21,387,359	21,387,359	0	0
22	Depreciation, depletion, and amortization	5,069,229	5,069,229	0	0
23	Insurance	1,175,320	1,175,224	0	96
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	Memberships & Subscriptions	87,426	75,872	10,756	798
b	Miscellaneous Expenses	897,146	897,024	0	122
c	Exchange Gains	20,520,903	-1,123,049	21,643,952	0
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	543,858,161	507,780,358	30,494,735	5,583,068
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			49,974,425	1	47,299,427
	2	Savings and temporary cash investments			172,272,733	2	228,139,645
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,915,038	4	2,790,503
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	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). Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	15,492,208
	9	Prepaid expenses and deferred charges			12,142,951	9	15,390,013
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	43,703,534	10,956,839	10c	15,761,821
	b	Less: accumulated depreciation	10b	27,941,713			
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11			1,777	12	1,680
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets			239,501	14	508,941
	15	Other assets. See Part IV, line 11			20,049,277	15	14,332,064
16	Total assets. Add lines 1 through 15 (must equal line 34)			267,552,541	16	339,716,302	
Liabilities	17	Accounts payable and accrued expenses			18,047,317	17	22,571,812
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			33,329,067	25	62,116,101
	26	Total liabilities. Add lines 17 through 25			51,376,384	26	84,687,913
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			151,200,112	27	165,684,709
	28	Temporarily restricted net assets			64,976,045	28	89,343,680
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			216,176,157	33	255,028,389
34	Total liabilities and net assets/fund balances			267,552,541	34	339,716,302	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	548,905,231
2	Total expenses (must equal Part IX, column (A), line 25)	2	543,858,161
3	Revenue less expenses Subtract line 2 from line 1	3	5,047,070
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	216,176,157
5	Other changes in net assets or fund balances (explain in Schedule O)	5	33,805,162
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	255,028,389

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	Yes	
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization PLAN INTERNATIONAL INC	Employer identification number 51-0169168
--	--

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

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

1	☐	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	☐	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	☐	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	☐	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	☐	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)
8	☐	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	☐	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	☒	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a ☒ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other
e	☒	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the supported organization(s)

	Yes	No
11g(i)		No
11g(ii)		No
11g(iii)		No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
See Additional Data Table									
Total									534,544,954

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						0

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	0 %
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						0

Section B. Total Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	0 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	0 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions 		

Part IV

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

Facts And Circumstances Test

Additional Data

Software ID: 10000104
Software Version:
EIN: 51-0169168
Name: PLAN INTERNATIONAL INC

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

4d. Other program services				
(Code See Schedule O	) (Expenses \$	254,723,837	including grants of \$	) (Revenue \$)

SCHEDULE D
(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization PLAN INTERNATIONAL INC	Employer identification number 51-0169168
--	--

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? YesNo	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit YesNo	

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

1	Purpose(s) of conservation easements held by the organization (check all that apply) ☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space											
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>2a</td><td></td></tr><tr><td>2b</td><td></td></tr><tr><td>2c</td><td></td></tr><tr><td>2d</td><td></td></tr></table>		Held at the End of the Year	2a		2b		2c		2d	
	Held at the End of the Year											
2a												
2b												
2c												
2d												
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____											
4	Number of states where property subject to conservation easement is located ▶ _____											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? YesNo											
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? YesNo											
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements											

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

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
	(ii) Assets included in Form 990, Part X	▶ \$ _____
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b	Assets included in Form 990, Part X	▶ \$ _____

Part III

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

3

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

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		1,319,447	843,805	475,642
c Leasehold improvements				
d Equipment		42,384,087	27,097,908	15,286,179
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				15,761,821

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	548,905,231
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	543,858,161
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,047,070
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-16,653,805
9	Total adjustments (net) Add lines 4 - 8	9	-16,653,805
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-11,606,735

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	535,062,882
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-14,584,248
e	Add lines 2a through 2d	2e	-14,584,248
3	Subtract line 2e from line 1	3	549,647,130
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-741,899
c	Add lines 4a and 4b	4c	-741,899
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	548,905,231

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	546,668,945
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	2,068,885
e	Add lines 2a through 2d	2e	2,068,885
3	Subtract line 2e from line 1	3	544,600,060
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-741,899
c	Add lines 4a and 4b	4c	-741,899
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	543,858,161

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Pt X		Federal Income Taxes. A favourable determination letter.
Pt XI Line 8		The other adjustment comprises the net reversal of:
		THE FIRO ADJUSTMENT OF \$12,829,540 (\$14,584,251-\$1,754,711) PLUS THE CAPITAL CONTRIBUTION OF \$3,824,265 TO PLAN LTD. TREATED AS A FUNCTIONAL EXPENSE PER THE FINANCIAL STATEMENTS.
Pt XII Line 2d		Reversal of the FIRO adjustment of \$14,584,248.
Pt XII Line 4b		The other adjustment of (\$741,899) comprises the net effect of the:
		GROSS UP OF FIXED ASSET DISPOSAL INCOME OF \$168,261 LESS THE OFFSET OF INTEREST ALLOCATION OF \$910,160.
Pt XIII Line 2d		Reversal of the FIRO adjustment of (\$1,755,380) plus:
		THE CAPITAL CONTRIBUTION OF \$3,824,265 TO PLAN LIMITED TREATED AS A FUNCTIONAL EXPENSE PER THE FINANCIAL STATEMENTS.
Pt XIII Line 4b		The other adjustment of (\$741,899) comprises the net effect of the:

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
PLAN INTERNATIONAL INC

Employer identification number
51-0169168

Part I

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

- 1

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

For grant makers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States
- 3

Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
Central America	43	1,238	Program Services	General Support	73,916,644
Central America	0	0	Fundraising		420,855
East Asia and Pacific	57	1,360	Program Services	General Support	67,016,290
East Asia and Pacific	0	0	Fundraising		124,678
Middle East	10	195	Program Services	General Support	8,251,947
South America	88	708	Program Services	General Support	54,594,664
South America	0	0	Fundraising		549,070
South Asia	90	837	Program Services	General Support	65,248,976
South Asia	0	0	Fundraising		235,473
Sub-Saharan Africa	123	2,917	Program Services	General Support	223,444,981
Sub-Saharan Africa	0	0	Fundraising		720,633
Europe	1	7	Program Services	General Support	15,416,248
Europe	0	0	Fundraising		3,532,359
Europe	0	0	Operational		34,319,000
3a Sub-total	412	7,262			547,791,818
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	412	7,262			547,791,818

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Use Part V if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Central America	SEE					
			East Asia and Pacific	ATTACHED					
			Europe	PDF					
			Middle East	FILE					
			South America	FOR					
			South Asia	FURTHER					
			Sub-Saharan Africa	INFORMATION					

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 ☐

7

3

Enter total number of other organizations or entities ☐

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

[illegible]

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 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐ Yes ☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

Part V **Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
Pt I Line 2		PAYMENTS ARE SUBJECT TO AN AGREEMENT/MEMORANDUM OF UNDERSTANDING/ CONTRACT BETWEEN PLAN AND THE THIRD PARTY THE PROGRAM IS OFTEN BROKEN INTO DISCRETE PROJECTS AND ACTIVITIES PLANNED OVER TIME FUNDING WOULD BE RELEASED IN TRANCHES WITH EACH TRANCHE BEING CONDITIONAL ON SATISFACTORY PROGRESS OF THE PROGRAM ACTIVITY AND A SATISFACTORY ACCOUNTING FOR THE FUNDS ALREADY ADVANCED LOCAL PROGRAM STAFF WILL WORK WITH IMPLEMENTING PARTNERS THROUGHOUT THE PROJECT'S LIFE AND FINANCE DEPARTMENT STAFF AND O

Identifier	Return Reference	Explanation
Pt I Line 3 Col (F)		All expenditures incurred in program countries are classified as program expenditures with the exception of a comparatively small amount spent in a handful of countries aimed at generating additional income. Central expenditure is classified as program (where it directly relates to programmatic activities such as research and global campaigns) fundraising and operating.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
PLAN INTERNATIONAL INC

Employer identification number
51-0169168

Part I Fundraising Activities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐

Mail solicitations

b

☐

Internet and e-mail solicitations

c

☐

Phone solicitations

d

☐

In-person solicitations

e

☒

Solicitation of non-government grants

f

☒

Solicitation of government grants

g

☐

Special fundraising events
- 2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No
- b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RODRIGO BARRETO VAQUERO	Consultancy		No		22,176	-22,176
Total ▶					22,176	-22,176

- 3
- List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts			
	2	Less Charitable contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16 Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization PLAN INTERNATIONAL INC	Employer identification number 51-0169168
--	--

Part I

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 in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
☐ First-class or charter travel		
☒ Housing allowance or residence for personal use		
☐ Travel for companions		
☐ Payments for business use of personal residence		
☐ Tax idemnification and gross-up payments		
☐ Health or social club dues or initiation fees		
☐ Discretionary spending account		
☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
☐ Compensation committee		
☒ Written employment contract		
☐ Independent compensation consultant		
☒ Compensation survey or study		
☐ Form 990 of other organizations		
☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment from the organization or a related organization?	4a Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," to line 5a or 5b, describe in Part III		
6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," to line 6a or 6b, describe in Part III		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) NIGEL CHAPMAN	(i) (ii)	65,865				235,385	65,865 235,385	16,858
(2) JAMES EMERSON	(i) (ii)					233,176	233,176	
(3) JOHN CHALONER	(i) (ii)					196,682	196,682	
(4) ANN FIRTH	(i) (ii)					169,903	169,903	
(5) HAN DIJSSELBLOEM	(i) (ii)	107,047		65,998	3,418		176,463	
(6) HABTE WOLDEMARIAM	(i) (ii)	86,413		76,176	4,321		166,910	42,873
(7) JOHN MCDONOUGH	(i) (ii)	80,729		65,521	4,036		150,286	
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
Pt I Line 1b		PLAN INTERNATIONAL, INC. PROVIDES REIMBURSEMENT OF COSTS AND EXPENSES IN ACCORDANCE WITH ITS VARIOUS WRITTEN POLICIES RELATING TO THE CONDITIONS OF EMPLOYMENT OF STAFF. THESE POLICIES PROVIDE INTER-ALIA FOR THE PROVISION OF ACCOMODATION FOR INTERNATIONAL EX-PATRIATE STAFF.
Pt I Line 4a		DURING THE YEAR ENDED DECEMBER 31, 2010 SEVERANCE OF \$66,187 WAS PAID TO R. GOMEZ.
Part II		NIGEL CHAPMAN, JAMES EMERSON, JOHN CHALONER, TJIPKE BERGSMA AND ANN FIRTH ARE NOT CITIZENS NOR RESIDENTS OF THE UNITED STATES AND THE SERVICES THEY PROVIDE TO THE ORGANIZATION WERE NOT PERFORMED IN THE UNITED STATES. AS A RESULT, THEIR COMPENSATION IS NOT SUBJECT TO U.S. TAXATION AND HAS BEEN SHOWN IN COLUMN D AS "NON-TAXABLE BENEFITS." THIS COMPENSATION, HOWEVER, IS SUBJECT TO TAX IN THE UNITED KINGDOM. NIGEL CHAPMAN WAS APPOINTED AS CHIEF EXECUTIVE OFFICER IN APRIL 2009. JAMES EMERSON RESIGNED AS DEPUTY CHIEF EXECUTIVE OFFICER AND THE ROLE WAS COVERED BY JOHN CHALONER PENDING THE APPOINTMENT IN FEBRUARY 2011 OF TJIPKE BERGSMA.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
PLAN INTERNATIONAL INC

Employer identification number
51-0169168

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles .				
7 Boats and planes				
8 Intellectual property . .				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles				
19 Food inventory	X	18	15,955,431	Fair Market Value
20 Drugs and medical supplies	X	7	2,201,578	Fair Market Value
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
Computer				
25 Other ► (<u>Software</u>)	X	2	1,195,088	Fair Market Value
Disaster				
26 Other ► (<u>Relief Items</u>)	X	2	340,856	Fair Market Value
27 Other ► (<u>Equipment</u>)	X	3	63,460	Fair Market Value
28 Other ► (<u>Other</u>)	X	4	83,140	Fair Market Value
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement				29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	No
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization PLAN INTERNATIONAL INC	Employer identification number 51-0169168
--	--

Identifier	Return Reference	Explanation
Pt VI-A, Line 3		The members of Plan are National Organizations that are

Identifier	Return Reference	Explanation
Pt VI-A, Line 4		admitted to membership in accordance w ith Plan's by-law s

Identifier	Return Reference	Explanation
Pt VI-A, Line 6		The National Organizations are established in various

Identifier	Return Reference	Explanation
Pt VI-A, Line 7a		countries primarily to raise funds in support of Plan's

Identifier	Return Reference	Explanation
Pt VI-A, Line 7b		activities The Members' Assembly, which meets at least

Identifier	Return Reference	Explanation
		tw ice a year, delegates the day to day management of the

Identifier	Return Reference	Explanation
		corporation to a Board of Directors but retains (and

Identifier	Return Reference	Explanation
		cannot delegate) ultimate responsibility for (inter-alia)

Identifier	Return Reference	Explanation
		the overall strategy of Plan, approval of budgets and

Identifier	Return Reference	Explanation
		financial statements, appointment of directors and

Identifier	Return Reference	Explanation
		amendment of governance documents

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Pt VI-B, Line 11a		The form 990 is review ed by senior members of the finance

Identifier	Return Reference	Explanation
		department as well as the Chief Operating Officer and an

Identifier	Return Reference	Explanation
		outside certified public accountant hired by the organization

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Pt VI-B, Line 12c		Directors, officers and key employees are required to comply

Identifier	Return Reference	Explanation
		w ith the conflict of interest policy throughout their term of

Identifier	Return Reference	Explanation
		office and are required to disclose interests that may give

Identifier	Return Reference	Explanation
		rise to a potential conflict as and w hen it becomes apparent

Identifier	Return Reference	Explanation
		that one may arise and w hen requested by the Chair

Identifier	Return Reference	Explanation
		of the Board or Company Secretary The policy also covers

Identifier	Return Reference	Explanation
		officers and key employees Directors and officers are

Identifier	Return Reference	Explanation
		required to disclose interests annually

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Pt VI-B, Line 15		The CEO's salary is set by review ing comparative salaries

Identifier	Return Reference	Explanation
Form 990, Part III, Line 4d		SEE SCHEDULE O 254723837 0 0

Identifier	Return Reference	Explanation
		in the sector and through a performance review with the

Identifier	Return Reference	Explanation
		Chairman of the Board

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Pt VI-C, Line 19		The financial statements of Plan International, Inc together

Identifier	Return Reference	Explanation
		w ith the governing documents and policies are available

Identifier	Return Reference	Explanation
		upon request. Additionally, Plan International, Inc. posts

Identifier	Return Reference	Explanation
		the Annual Review and Worldw ide accounts as well as the

Identifier	Return Reference	Explanation
		main policies that govern's Plan's work on its website

Identifier	Return Reference	Explanation
		http //plan-international org

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Pt XI		Other changes in net assets or fund balances is a

Identifier	Return Reference	Explanation
		combination of the change of \$37,629,427 w hich is due

Identifier	Return Reference	Explanation
		to the currency translation adjustments betw een opening

Identifier	Return Reference	Explanation
		and closing reserves less \$3,824,265 contributed to Plan

Identifier	Return Reference	Explanation
		Limited as an equity infusion that w as treated as a

Identifier	Return Reference	Explanation
		functional expense on the the financial statements

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Pt XII, Line 3b		The A133 audit for the fiscal year ended June 30, 2010 has

Identifier	Return Reference	Explanation
		been completed The A133 audit for the fiscal year ended

Identifier	Return Reference	Explanation
		June 30, 2011 was underway at the time of this Form 990 filing

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Part I, Question		Plan International Inc 's vision is of a world in w hich

Identifier	Return Reference	Explanation
1 and Part III		all children realize their full potential in societies

Identifier	Return Reference	Explanation
Question 1		that respect people's rights and dignities

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
		Plan strives to achieve lasting improvements in the quality

Identifier	Return Reference	Explanation
		of life of deprived children in developing countries, through a

Identifier	Return Reference	Explanation
		process that unites people across cultures and adds meaning

Identifier	Return Reference	Explanation
		and value to their lives by

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
		* Enabling deprived children, their families and their

Identifier	Return Reference	Explanation
		communities to meet their basic needs and to increase their

Identifier	Return Reference	Explanation
		ability to participate in and benefit from their societies

Identifier	Return Reference	Explanation
		* Building relationships to increase understanding and

Identifier	Return Reference	Explanation
		unity among people of different cultures and countries

Identifier	Return Reference	Explanation
		* Promote the rights and interests of the w orld's children

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Part III		Disaster Risk Management \$58,455,492 Disaster reduction

Identifier	Return Reference	Explanation
Question 4d		training, disaster relief activities including food

Identifier	Return Reference	Explanation
		distribution and the provision of shelter facilities, water

Identifier	Return Reference	Explanation
		and sanitation and health activities and psychosocial

Identifier	Return Reference	Explanation
		support for children During fiscal year 2011 Plan provided

Identifier	Return Reference	Explanation
		life saving humanitarian assistance, child protection,

Identifier	Return Reference	Explanation
		education and psychosocial support in 39 disasters and

Identifier	Return Reference	Explanation
		implemented disaster risk strategies in 37 countries

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
		Water and Sanitation \$58,371,234 Installing latrines

Identifier	Return Reference	Explanation
		and sewer systems, provision of affordable drinking water,

Identifier	Return Reference	Explanation
		hygiene promotion and health education and training During

Identifier	Return Reference	Explanation
		fiscal year 2011 Plan Supported 122,927 households to improve

Identifier	Return Reference	Explanation
		their sanitation facilities, and helped communities to

Identifier	Return Reference	Explanation
		build or refurbish 5,804 water points

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
		Economic Security \$51,710,921 Farming resources,

Identifier	Return Reference	Explanation
		irrigation system development, microfinance, business

Identifier	Return Reference	Explanation
		development and vocational training and training communities

Identifier	Return Reference	Explanation
		in natural resource management During fiscal year 2011,

Identifier	Return Reference	Explanation
		Plan trained 165,418 people in agricultural, vocational

Identifier	Return Reference	Explanation
		and business skills Plan supported 2,119 microfinance

Identifier	Return Reference	Explanation
		organizations and 77,792 local savings and loan groups

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
		Protection from exploitation, neglect, abuse and

Identifier	Return Reference	Explanation
		violence \$19,853,713 Training of children and parents,

Identifier	Return Reference	Explanation
		capacity building of government and civil society organizations

Identifier	Return Reference	Explanation
		in child protection issues, child protection and promotion

Identifier	Return Reference	Explanation
		of child rights During fiscal year 2011, Plan provided

Identifier	Return Reference	Explanation
		child protection training for 110,972 community members

Identifier	Return Reference	Explanation
		and staff of partner organizations

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
		Sponsorship Communications \$54,857,077 Organizing

Identifier	Return Reference	Explanation
		communications betw een sponsors and sponsored children

Identifier	Return Reference	Explanation
		including associated logistical costs and cost of

Identifier	Return Reference	Explanation
		softw are to digitize communication materials

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
		Sexual and Reproductive Health \$11,475,400 Sex Education,

Identifier	Return Reference	Explanation
		family planning, HIV/AIDS and SRH programmes During fiscal

Identifier	Return Reference	Explanation
		year 2011, Plan trained 62,424 community health w orkers

Identifier	Return Reference	Explanation
		and traditional birth attendants, benefitting 9,212

Identifier	Return Reference	Explanation
		communities

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Schedule A Page 1		All of the organizations listed on line H are non-profit

Identifier	Return Reference	Explanation
Part 1, Line 11h		charitable fundraising organizations operating in their

Identifier	Return Reference	Explanation
& Schedule R		home countries Funds obtained by these National Organizations

Identifier	Return Reference	Explanation
Part II, Columns		are distributed by Plan International, Inc to support

Identifier	Return Reference	Explanation
D and E		children, families and communities through Plan International,

Identifier	Return Reference	Explanation
		Inc 's field offices in 50 countries Plan International

Identifier	Return Reference	Explanation
		USA, Inc. is the only affiliated entity incorporated and

Identifier	Return Reference	Explanation
		operating in the United States and is exempt from taxation

Identifier	Return Reference	Explanation
		under Internal Revenue Code Section 501(c)(3) and receives

Identifier	Return Reference	Explanation
		a substantial part of its support from the general public

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Form 990, Page 3		Independent audited financial statements for the fiscal year

Identifier	Return Reference	Explanation
Part IV, Question		ended June 30, 2011 w ere prepared on a consolidated basis

Identifier	Return Reference	Explanation
12 & 12A		but not for Plan International, Inc as a separate entity

Identifier	Return Reference	Explanation
		Line 12A w as checked "yes" in order to provide a

Identifier	Return Reference	Explanation
		reconciliation on Schedule D, Parts XI, XII & XIII for its

Identifier	Return Reference	Explanation
		stand alone basis financial statements

Identifier	Return Reference	Explanation

Identifier	Return Reference	Explanation
Form 990, Part		In addition to the countries listed on the supplemental

Identifier	Return Reference	Explanation
V, Page 5,		schedule for this line item Plan International, Inc

Identifier	Return Reference	Explanation
Line 4b		also maintained accounts in South Sudan, Timor Leste and

Identifier	Return Reference	Explanation
		Myanmar

Identifier	Return Reference	Explanation

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
PLAN INTERNATIONAL INC

Employer identification number
51-0169168

Part I

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

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

Part II

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

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

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) PLAN LIMITED DUKES COURT DUKE STREET WOKING SURR GU BH UK	Support Services	UK	NA	C	28,310,733	10,675,522	100 000 %

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

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

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2010

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

[illegible]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
------------	------------------	-------------

Software ID: 10000104
Software Version:
EIN: 51-0169168
Name: PLAN INTERNATIONAL INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled organization	
						Yes	No
PLAN INTERNATIONAL USA INC 155 PLAN WAY WARWICK, RI02886 13-5661832	Supported Organization Fundraising	RI	501(c)(3)	7	NA		No
PLAN INTERNATIONAL AUSTRALIA LEVEL 18 60 CITY ROAD SOUTHBANK MELBOURNE AS	Supported Organization Fundraising	AS	See Schedule O	See Schedule O	NA		No
PLAN BELGIUM GALERIE RAVENSTEIN 3 B 5 BRUSSELS BE	Supported Organization Fundraising	BE	See Schedule O	See Schedule O	NA		No
PLAN INTERNATIONAL CANADA 95 ST CLAIR AVE WEST SUITE 1001 TORONTO MV CA	Supported Organization Fundraising	CA	See Schedule O	See Schedule O	NA		No
PLAN SUOMI SAATIO PASILANRAITIO 5 2ND FL HELSINKI FI	Supported Organization Fundraising	FI	See Schedule O	See Schedule O	NA		No
PLAN INTERNATIONAL FRANCE 11 RUE DE CAMBRAI 75019 PARIS FR	Supported Organization Fundraising	FR	See Schedule o	See Schedule o	NA		No
PLAN INTERNATIONAL DEUTSCHLAND EV BRAMFELDER STRASSE 70 D-22305 HAMBURG GM	Supported Organization Fundraising	GM	See Schedule O	See Schedule O	NA		No
PLAN JAPAN 11F SUN TOWERS CENTRE BUILDING TOKYO JA	Supported Organization Fundraising	JA	See Schedule o	See Schedule o	NA		No
STICHTING PLAN NEDERLAND VAN BOSHUIZENSTRATT 12 AMSTERDAM NL	Supported Organization Fundraising	NL	See Schedule O	See Schedule O	NA		No
PLAN NORGE TULLINGSGATE 4C 0166 OSLO NO	Supported Organization Fundraising	NO	See Schedule O	See Schedule O	NA		No
PLAN INTERNATIONAL DE ESPANA C/PANTOJA 10 28002 MADRID SP	Supported Organization Fundraising	SP	See Schedule O	See Schedule O	NA		No
PLAN INTERNATIONAL SVERIGE TEXTILGATAN 43 120 08 STOCKHOLM SW	Supported Organization Fundraising	SW	See Schedule O	See Schedule O	NA		No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
PLAN INTERNATIONAL UK FINSGATE 5-7 CRAMWOOD ST EC1V 9LH LONDON UK	Supported Organization Fundraising	UK	See Schedule O	See Schedule O	NA		No
PLAN DENMARK BORGERGADE 102 1300 COPENHAGEN DA	Supported Organization Fundraising	DA	See Schedule O	See Schedule O	NA		No
PLAN IRELAND 126 LOWER BAGGOT STREET DUBLIN EI	Supported Organization Fundraising	EI	See Schedule O	See Schedule O	NA		No
PLAN KOREA 2ND FL CHEONGWOO BD 58-4 SEOUL KS	Supported Organization Fundraising	KS	See Schedule O	See Schedule O	NA		No
PLAN SWITZERLAND TODISTRASSE 51 CH-8002 ZURICH SZ	Supported Organization Fundraising	SZ	See Schedule O	See Schedule O	NA		No
PLAN HONG KONG UNIT 1104 11/F CAMERON COMM CTR CAUSEWAY BAY HK	Supported Organization Fundraising	HK	See Schedule O	See Schedule O	NA		No
PLAN INTERNATIONAL INDIA CHAPTER E-12 KAILASH COLONY 110048 NEW DELHI IN	Supported Organization Fundraising	IN	See Schedule O	See Schedule O	NA		No
FUNDACION PLAN (COLUMBIA) CALLE 71 NO 13-47 BOGOTA DC CO	Supported Organization Fundraising	CO	See Schedule O	See Schedule O	NA		No

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

(a) Name of other organization		(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(1)	PLAN INTERNATIONAL USA INC	c	45,009,033	Pledged Amount
(2)	PLAN INTERNATIONAL AUSTRALIA	c	27,418,096	Pledged Amount
(3)	PLAN BELGIUM	c	11,559,301	Pledged Amount
(4)	PLAN INTERNATIONAL CANADA	c	74,307,967	Pledged Amount
(5)	PLAN SUOMI SAATIO	c	11,142,972	Pledged Amount
(6)	PLAN INTERNATIONAL FRANCE	c	12,546,493	
(7)	PLAN INTERNATIONAL DEUTSCHLAND EV	c	109,309,637	
(8)	PLAN JAPAN	c	30,899,306	
(9)	STICHTING PLAN NEDERLANDS	c	39,548,773	
(10)	PLAN NORGE	c	49,651,806	
(11)	PLAN INTERNATIONAL DE ESPANA	c	11,792,317	
(12)	PLAN INTERNATIONAL SEVERIGE	c	28,399,245	
(13)	PLAN INTERNATIONAL UK	c	60,699,622	
(14)	PLAN DENMARK	c	4,576,713	
(15)	PLAN IRELAND	c	7,688,381	
(16)	PLAN KOREA	c	5,932,727	
(17)	PLAN SWITZERLAND	c	2,895,389	
(18)	PLAN HONG KONG	c	1,167,176	
(19)	PLAN INTERNATIONAL AUSTRALIA	p	148,857	
(20)	PLAN INTERNATIONAL AUSTRALIA	o	303,205	
(21)	PLAN BELGIUM	p	655,753	
(22)	PLAN BELGIUM	o	86,238	
(23)	PLAN INTERNATIONAL CANADA	p	1,681,945	
(24)	PLAN INTERNATIONAL CANADA	o	282,027	
(25)	PLAN DENMARK	p	4,733	
(26)	PLAN DENMARK	o	38,059	
(27)	PLAN SUOMI SAATIO	p	5,559	
(28)	PLAN SUOMI SAATIO	o	119,086	
(29)	PLAN FRANCE	p	17,923	
(30)	PLAN FRANCE	o	86,277	

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

(a) Name of other organization		(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(31)	PLAN INTERNATIONAL DEUTSCHLAND EV	p	55,220	
(32)	PLAN INTERNATIONAL DEUTSHCLAND EV	o	57,026	
(33)	PLAN HONG KONG	o	121,392	
(34)	PLAN IRELAND	p	21,962	
(35)	PLAN IRELAND	o	28,825	
(36)	FOSTER PARENTS PLAN OF JAPAN	p	51,136	
(37)	FOSTER PARENTS PLAN OF JAPAN	o	59,394	
(38)	PLAN KOREA	p	16,258	
(39)	PLAN KOREA	o	89,348	
(40)	STICHTING PLAN NEDERLAND	p	341,457	
(41)	STICHTING PLAN NEDERLAND	o	115,179	
(42)	PLAN NORGE	o	296,445	
(43)	PLAN INTERNATIONAL DE ESPANA	p	37,856	
(44)	PLAN INTERNATIONAL DE ESPANA	o	91,485	
(45)	PLAN INTERNATIONAL SVERIGE	p	154,719	
(46)	PLAN INTERNATIONAL SVERIGE	o	250,767	
(47)	PLAN SWITZERLAND	p	521,583	
(48)	PLAN SWITZERLAND	o	778	
(49)	PLAN INTERNATIONAL UK	p	874,446	
(50)	PLAN INTERNATIONAL UK	o	530,560	
(51)	PLAN INTERNATIONAL USA INC	p	454,084	
(52)	PLAN INTERNATIONAL USA INC	o	61,580	
(53)	FUNDACION PLAN COLUMBIA	p	131,062	
(54)	FUNDACION PLAN COLUMBIA	o	15,094	
(55)	PLAN INTERNATIONAL (INDIA CHAPTER)	p	303,332	
(56)	PLAN INTERNATIONAL (INDIA CHAPTER)	o	8,738	
(57)	FUNDACION PLAN COLUMBIA	b	7,333,621	
(58)	PLAN INTERNATIONAL(INDIA CHAPTER)	b	14,053,739	
(59)	PLAN LIMITED	b	3,824,265	
(60)	PLAN LIMITED	o	27,952,265	

Additional Data

Software ID: 10000104

Software Version:

EIN: 51-0169168

Name: PLAN INTERNATIONAL INC

Form 990, Schedule A, Part I, Line 11h - Provide the following information about the organizations the organization supports.

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section)	(iv) Is the organization in (i) listed in your governing document?		(v) Did you notify the organization in (i) of your support?		(vi) Is the organization in (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
(A) PLAN INT'L USA INC	135661832	7	Yes		Yes		Yes		45009033
(B) PLAN INT'L AUSTRALIA	000000000	7	Yes		Yes			No	27418096
(C) PLAN BELGIUM	000000000	7	Yes		Yes			No	11559301
(D) PLAN INT'L CANADA	000000000	7	Yes		Yes			No	74307967
(E) PLAN SUOMI SAATIO	000000000	7	Yes		Yes			No	11142972
(F) PLAN INT'L FRANCE	000000000	7	Yes		Yes			No	12546493
(G) PLAN INT'L DTSCHLND EV	000000000	7	Yes		Yes			No	109309637
(H) PLAN JAPAN	000000000	7	Yes		Yes			No	30899306
(I) STICHTING PLAN NDRLND	000000000	7	Yes		Yes			No	39548773
(J) PLAN NORGE	000000000	7	Yes		Yes			No	49651806
(K) PLAN INT'L DE ESPANA	000000000	7	Yes		Yes			No	11792317
(L) PLAN INT'L SVERIGE	000000000	7	Yes		Yes			No	28399245
(M) PLAN INT'L UK	000000000	7	Yes		Yes			No	60699622
(N) PLAN DENMARK	000000000	7	Yes		Yes			No	4576713
(O) PLAN IRELAND	000000000	7	Yes		Yes			No	7688381
(P) PLAN KOREA	000000000	7	Yes		Yes			No	5932727
(Q) PLAN SWITZERLAND	000000000	7	Yes		Yes			No	2895389
(R) PLAN HONG KONG	000000000	7	Yes		Yes			No	1167176