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Form **990**

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)

OMB No 1545-0047 2011

Open to Public Inspection

Yes 🗌 No

Form 990 (2011)

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements For the 2011 calendar year, or tax year beginning Jan 1 2011, and ending Dec 31 20 11 D Employer identification number C Name of organization INTEGRATED COMMUNITY DEVELOPMENT INTERNATIONAL Check if applicable Address change Doing Business As 32 0112278 Number and street (or P O box if mail is not delivered to street address) Name change Room/suite E Telephone number Initial return PO Box 247 574-306-2810 City or town, state or country, and ZIP + 4 Terminated П Amended return Winona Lake, IN 46590 G Gross receipts \$ 3,899,971 F Name and address of principal officer: Application pending Jim Hocking H(a) is this a group return for affiliates? LYes Ves No. 3792 North Oakwood Drive Warsaw IN 46580 H(b) Are all affiliates included? Yes No. If "No," attach a list (see instructions)) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 501(c)(3) 501(c) (Tax-exempt status Website: ▶ www.icdinternational.org H(c) Group exemption number ▶ Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 2004 M State of legal domicile IN Summary Part I Briefly describe the organization's mission or most significant activities: The vision of ICDI is to reduce the trend of persistent poverty in central africa through collaborative effort at the community level by equipping and empowering people to create Activities & Governance sustainable transformational solutions. ICDI attacks poverty through training and equipping local staff to provide clean water, sanitation/hygiene training, improved agricultural practices, enterprise development, HIV education and radio reinforcement. Check this box ▶☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 6 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 13 Total number of volunteers (estimate if necessary) 6 3 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year** Contributions and grants (Part VIII, line 1h). 8 2,946,462 3,585,502 Revenue 9 Program service revenue (Part VIII, line 2g) 108.504 314.100 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 3,941 2,909 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 (2,026)·2,540 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,056,881 3,899,971 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). Benefits paid to or for members (Part IX, column (A), line 4) 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 746.800 1,030,263 16a Professional fundraising fees (Part IX, column (A), line 11e) . 3,917 b Total fundraising expenses (Part,IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 142-114, 17 = 24e 17 2,533,957 3,023,926 Total expenses. Add lines 13-17 (must equal Part IX) column (A), li he 25) 3,280,757 4,072,024 Revenue less expenses. Subtract line 18 from line 12 -211,376 -172,053 SQ Beginning of Current Year End of Year 20 Total assets (Part X. line 16) 3,000,950 2,235,758 21 Total liabilities (Part X, line 26) 942,725 405,695 22 Net assets or fund balances. Subtract In 21 from Ine 20-2,058,225 1,830,063 Part II Signature Block 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 an officer) is based on all information of which preparer has any knowledge true, correct, and comple Sign Here nnt name and title Print/Type preparer's name Date Preparer's signature Paid Check [] rf self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no



Cat. No 11282Y

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 99	0 (2011) Page
Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: The violent of ICPL is a graduate the trend of possistant neverty in control Africa through college and at the community level by
	The vision of ICDI is to eradicate the trend of persistent poverty in central Africa through collaborative effort at the community level b equipping and empowering people to create sustainable transformational solutions to the problems they face.
	ographing and ampowering people to state advantage transferring to the problems they lake.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	The feet of the services on Schedule O. 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 organization's program service accomplishments for each of its three largest program services, as measured be 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 \$ 2,918,187 including grants of \$) (Revenue \$ 2,862,997)
	WASH (clean water, sanitation, hygiene): ICDI's central African assets, infrastructure and strategic planning uniquely establish it as a
	key, if not sole, implementer of deep well water drilling in the Central African Republic (CAR). Three fully operational "down-
	hammer drilling" rigs, all the necessary supporting equipment and staff, together with a sophisticated suppport services infrastructu
	well place ICDI to address the WASH needs that exist in central Africa, especially in the CAR. Additionally, ICDI's well repair teams an
	well maintenance programming through trained technical teams, accomplish an integration of getting the job done in the context of community development best practices and sustainable job creation. In calendar year 2011, ICDI drilled 64 new deep water wells
	and rehabilitated or repaired 190 broken wells. By the end of 2011 approximately 1533 wells had been incorporated into the maintena
	program. The combination of these programs ensured access to clean and safe drinking water for over 450,000 people.
	In addition to the implementation of clean water solutions, ICDI bundles new well projects with training in basic hygiene and the
	building of latrines, thus increasing the community health impact of ICDI's programs. Exploratory activities are underway to initiate
	similar humanitarian services in the Democratic Republic of the Congo
4b	(Code:) (Expenses \$ 176,129 including grants of \$) (Revenue \$ 181,647)
	Orphan Care: At present, ICDI is providing orphan care programming to 650 orphaned children in the CAR. Care includes
	provision of food, clothing, education, medical attention and apprenticeship in various skills such as sewing and woodworking. The
	program also includes extra-curricular sports team activities to allow the children outlets for additional developmental opportunities.
	ICDI's orphan care program follows a 'foster care' model of care provision, seeking to place children in qualified family home setting. The program is funded through individual child sponsorships from USA donors.
	The program to tanged wrongs was read of the opening of the program of the progra
4c	(Code:) (Expenses \$ 198,256 including grants of \$) (Revenue \$ 282,549)
	Agriculture: Pursuing its goals of eradicating hunger and mainutrition in the rural communities of the CAR, ICDI's agricultural
	program seeks the following objectives: (1) increasing nutritious food production through provision of basic farming tools, improved
	seeds and fruit seedlings, and small farm animals to family farmers; (2) strengthening the technical capacity of agricultural cooperati through training of village agriculture technicians and best agriculture practices workshops; and (3) conducting targeted farmer-
	focused agricultural research to best serve impoverished African family farmers.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 106,513 including grants of \$) (Revenue \$ 70,184)
4e	Total program service expenses ▶ 3.399,085

Form 99	, _			Page 3
Part	V Checklist of Required Schedules			
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	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	_
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		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		,
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 for which 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		v
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		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		v
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		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	,	
	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		<u></u>
	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		~
	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		~
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		~
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	٧	
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	V	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14 a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a	•	-
-	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	,	
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 United States? If "Yes," complete Schedule F, Parts II and IV	15	-	,
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		~
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		v
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		
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		,
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	n 99¢	(2011)
		ron	11 334	/ (ZUII)

Part	IV C	hecklist of	Required	Schedules	(continued)
04	Did 4b.			- 4L AE 00/	\ - 6

				,
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		v
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? If "Yes," complete Schedule I, Parts I and III	22		v
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		v
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		V
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		٧
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? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
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):			Sarah.
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	y	V
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		y
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? If "Yes," complete Schedule R, Part I	33		>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		> >
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		V
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	~	
		Form	n 990	(2011)

Form 99	90 (2011)			Page :
Part				
	Check if Schedule O contains a response to any question in this Part V	·		
40	Fater the grapher was add in Day 2 of Family 1996 Fater 2 (fact and fact)		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		ļ 1	
2a	reportable gaming (gambling) winnings to prize winners?	1c	-	~
2.0				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	,	ł
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20	Ť	┢
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	1	1
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			ſ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a	~	
b	If "Yes," enter the name of the foreign country: Central African Republic, Democratic Republic of Congo 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		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	L	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1
L	organization solicit any contributions that were not tax deductible?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u></u>		
7	gifts were not tax deductible?	6b		
a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a	,	İ
ь	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		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
9	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		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		\vdash
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		\Box
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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	l		1
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	ŀ		1
12a	section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	IZa	├	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		_
-•	Note. See the instructions for additional information the organization must report on Schedule O.		Γ.	
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	}		
C	Enter the amount of reserves on hand		<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ļ	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		L.

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	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and	for a	Page
a ·	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. 8			
	Check if Schedule O contains a response to any question in this Part VI			. [
Section	on A. Governing Body and Management		<u> </u>	<u>. Ľ</u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	7		
	If there are material differences in voting rights among members of the governing body, or	1	İ	ĺ
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1	ļ	
_	any other officer, director, trustee, or key employee?	2		~
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		-
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	,	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	v	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	V	
b	Each committee with authority to act on behalf of the governing body?	8b	~	1
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		1
ectio	on B. Policies (This Section B requests information about policies not required by the Internal Rever		ode.	1 -
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	,	
13	Did the organization have a written whistleblower policy?	13	~	
14	Did the organization have a written document retention and destruction policy?	14	~	
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?			
	The organization's CEO, Executive Director, or top management official	15a		<u> </u>
b	Other officers or key employees of the organization	15b	~	ļ.,
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1	1
	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		,
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
20.04	organization's exempt status with respect to such arrangements?	16b	<u> </u>	
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed IN, OH, NC Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 501((c)(3)s	oni
	Own website Another's website Upon request			
				1:
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	of inte	rest p	OOIIC

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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. 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.

	T TOTAL OF	Goigi	W. 142))	ompe	1130	I	t officer, director	or trustee.
/25				Pos					_	
(A) Name and Title	(B) Average			ieck	more	than o		(D) Reportable	(E) Reportable	(F)
Name and Title	hours per					is both or/trust		compensation	compensation from	Estimated amount of
	week (describe		_					from the	related	other
	hours for	Individual trustee or director	₹	Officer	Key employee	nplo	Former	organization	organizations (W-2/1099-MISC)	compensation from the
	related organizations	cto	ğ		mple	yee c	*	(W-2/1099-MISC)		organization
	in Schedule	Trus.	호	ļ	уөө	ğ		ļ]	and related organizations
	O)	tee	Institutional trustee			Highest compensated employee				-
(1)James Hocking										
Chief Executive Officer	60		~			~		90,000		90,00
(2)Robert Belohlavek										
Chief Personnel Officer	60			~				69,160		69,16
(3)Theodore Rondeau										
Chief Development Officer	60			~		Ĺ	<u> </u>	64,284		64,28
(4)John Parks										
Chief Financial Officer	60		_	~				43,000		43,00
(5)Rich Klopp		!								
Chief Operations Officer	60		<u> </u>	~			⊢	50,000		50,00
(6)										
(7)										
(8)										
(9)										
(10)										
(11)							_			·-···
(12)										··
(13)										
(14)		 -	├	├			\vdash			

Part	Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (continu	ied)		
	(A) Name and trile		box, office	unles er and	Pos eck is pe d a d	rson rect	e than o	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related		Esti amo	(F) mated ount of ther	
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N		from organi and	ensation the nization related izations	
(15)														
(16)						-								 .
(17)					_	_							·····	
(18)						 	-	-						
						-								
(20)														
						-								
(22)														
(24)			<u></u>											
(25)														
1b c	Sub-total							<u> </u>						
d	Total (add lines 1b and 1c)			<u>.</u>	<u>. </u>	<u> </u>		<u></u>						
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ted -	above	e) w	ho received m	ore than \$1	00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete											3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	portal	ble (con	npe	nsatio	n a	ind other comp	ensation fr	om the	7		
5	individual									ation or inc		5		7
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compens	ation	
								-				-		
												· · · · · · ·		
							-	<u> </u>						
2	Total number of independent contractor received more than \$100,000 of compensations.							L th	nose listed ab	ove) who				
	received more than \$100,000 or compen	Saudii IIOIII	4100	yaı	ıızd	LIOI I								

Part	УШ	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
इ इ	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b					
عَ ق	c	Fundraising events 1c					
\$ Y							
<u>.</u> ≅	d	Related organizations Id		ĺ			
흔틌	е	Government grants (contributions) 1e					
훈뉴	f	All other contributions, gifts, grants,					
ا ﴾ ق		and similar amounts not included above 1f	3,580,392	ľ			
흩님	g	Noncash contributions included in lines 1a-1f: \$	5,110				
S =	h	Total. Add lines 1a-1f	•	3,585,502			
ė,		· · · · · · · · · · · · · · · · · · ·	Business Code				
Program Service Revenue	2a	Ţ					
چ	ь					 	
8	ĺ					 	
Ξ̈́	C						
တ္တ	d						
E.	е						
- pg	f	All other program service revenue.		314,101			
ď	g	Total. Add lines 2a-2f	. <u>.</u>	314,101			
	3	Investment income (including divide	nds, interest,				
		and other similar amounts)	▶	2,909		ļ	
	4	Income from investment of tax-exempt bo	nd proceeds ▶				
	5	Royalties					
		(i) Real	(ii) Personal		, , , , , , , , , , , , , , , , , , , 		· · · · · · · · · · · · · · · · · · ·
	6a	Gross rents					
	b	Less: rental expenses				•	
		· · · · · · · · · · · · · · · · · · ·		į			
	C	Rental income or (loss)					
	_d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory		İ			
	Ь	Less. cost or other basis					
		and sales expenses .		İ		1	
	С	Gain or (loss)		1			
	d	Net gain or (loss)	▶]		1	
ther Revenue	8a	Gross income from fundraising events (not including \$					
r Re		of contributions reported on line 1c).					
he	١.	L					
8		Less: direct expenses b					
		Net income or (loss) from fundraising	events . ►				
	9a	Gross income from gaming activities.		ļ			
		See Part IV, line 19 a					
	b	Less: direct expenses b		1			
	С	Net income or (loss) from gaming activ	/ities ▶				
	10a	Gross sales of inventory, less					
		returns and allowances a	107,328				
	ь	Less: cost of goods sold b	109,868				
	c	Net income or (loss) from sales of inve		-2,540			·
	_ <u> </u>	Miscellaneous Revenue	Business Code	-2,540			
	11a			•		1	1
						 	
	b					 	
	C	All alban marks	_ 			 	ļ
	d	All other revenue				 	
	e	Total Add lines 11a-11d				 	
	12	Total revenue. See instructions	<u> ▶ </u>	3,899,971		.1	1

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).

requir	red to complete columns (B), (C), and (D).	·			
	Check if Schedule O contains a respons		n this Part IX		
Do no 8b, 9t	ot include amounts reported on lines 6b, 7b, b, 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 United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	316,444	164,160	88,000	64.294
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	310,444	104,100	35,555	64,284
7 8	Other salaries and wages	477,864	349,860	63,687	64,317
	section 401(k) and 403(b) employer contributions)	8,814	2,749	3,907	2,158
9	Other employee benefits	148,791	100,326	28,533	19,932
10	Payroll taxes	78,350	54,367	13,571	10,412
11	Fees for services (non-employees):		+		
а	Management				
ь	Legal	12,472	12,177		295
C	Accounting	1,091	1,091		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17	3,917			3,917
f	Investment management fees				
g	Other				
12	Advertising and promotion	13,170			13,170
13	Office expenses	166,645	104,150	35,523	26,972
14	Information technology	155,879	106,388	39,906	9,585
15	Royalties				
16	Occupancy	64,764	44,597	20,120	47
17	Travel	348,007	279,374	44,015	24,618
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	16,617	2,188		14,429
20	Interest	12,950		12,950	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	203,317	192,842	10,475	
23	Insurance	23,231	17,342	5,496	393
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a	WASH specific, including garage	1,571,337	1,540,238	30,142	957
ь	Agriculture specific	62,205	62,205		
C	Orphan specific	110,856	110,856		
d	Currency	-10,683	-22,164	11,481	
9	All other expenses Total functional expenses. Add lines 1 through 24e	285,986	276,339	9,233	414
25		4,072,024	3,399,085	417,039	255,900
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				
				 	Form 990 (2011)

				/A)	- 1	(2)
				(A) Beginning of year		(B) End of year
	Cash—non-interest-bearing			265,364		84,159
				60,744	2	51,66
3	Pledges and grants receivable, net		[3	
4	Accounts receivable, net		[280,128	4	7,81
	employees, and highest compensated employe	ees. C	omplete Part II of		5	
	4958(f)(1)), persons described in section 4958(employers and sponsoring organizations of se		6			
7	Notes and loans receivable, net		[7	
8	Inventories for sale or use		[197,795	8	88,057
9	Prepaid expenses and deferred charges		[9	
10a	Land, buildings, and equipment: cost or				-	
	other basis. Complete Part VI of Schedule D	10a	2,529,821			
b	Less: accumulated depreciation	10b	561,263	1,947,382	10c	1,968,558
11	Investments—publicly traded securities			- ""	11	
12	Investments-other securities. See Part IV, line 1	1 .	[12	
13	Investments - program-related. See Part IV, line	11 .	[13	
14	Intangible assets		[14	
					15	22,243
16	Total assets. Add lines 1 through 15 (must equa	ıl line (34)	2,752,413	16	2,235,758
17	Accounts payable and accrued expenses		[76,695	17	36,776
18	Grants payable		[18	
19	Deferred revenue		[19	
20					20	
21	Escrow or custodial account liability. Complete F	art IV	of Schedule D .		21	
22	employees, highest compensated employees, a	and di	squalified persons.		22	
23	Secured mortgages and notes payable to unrela-	ted thi	rd parties	198,591	23	195,257
24	Unsecured notes and loans payable to unrelated	third	parties	18,966	24	7,225
25	parties, and other liabilities not included on lines	17-24	i). Complete Part X	-		
			i i			166,437
<u> 26</u>	Total liabilities. Add lines 17 through 25	· :		750,297	26	405,695
	lines 27 through 29, and lines 33 and 34.					
27				1,884,739	27	673,301
						1,151,638
29				4,724	29	5,124
		ieck f	ere ▶ 📋 and			
30					30	
						·
						· · · · · · · · · · · · · · · · · · ·
				2 002 116		1,830,063
34						2,359,911
	3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 29 30 31 32 33	2 Savings and temporary cash investments	2 Savings and temporary cash investments	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,529,821 1 Investments—publicily traded securities 1 Investments—publicily traded securities 1 Investments—publicily traded securities 1 Investments—publicily traded securities 1 Investments—program-related. See Part IV, line 11 1 Intangible assets 1 Other assets. See Part IV, line 11 1 Total assets. Add lines 1 through 15 (must equal line 34) 1 Accounts payable and accrued expenses 1 Grants payable 1 Deferred revenue 2 Tax-exempt bond liabilities 2 Escrow or custodial account liability. Complete Part IV of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 2 Secured mortgages and notes payable to unrelated third parties 2 Unsecured notes and loans payable to unrelated third parties 2 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 3 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 throug	2 Savings and temporary cash investments	2 Savings and temporary cash investments

om 99	00 (2011)			Pa	ige 12		
Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				V		
	ı						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,89	9,971		
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,07	72,024		
3	Revenue less expenses. Subtract line 2 from line 1	3	-172		72,053		
4	The same and the s						
5	5 Other changes in net assets or fund balances (explain in Schedule O)						
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		1,83	30,063		
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 Cash Counting Method used to prepare the Form 990: Cash Cash Cash Cash Cash Cash Cash Cash	,	_	[
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	olaın ır	1		İ		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ł	,		
b	Were the organization's financial statements audited by an independent accountant?			_	_		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov			_			
·	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	,			
	If the organization changed either its oversight process or selection process during the tax year, exp			 			
	Schedule O.	ani 11					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ır were	•				
	issued on a separate basis, consolidated basis, or both:		Ì		l		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1		1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in) [İ	ĺ		
	the Single Audit Act and OMB Circular A-133?		3a	l	~		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	go the	,				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	ıdits	3b				
			Fon	п 990	(2011)		

SCHEDULE A (Form 990 or 990-EZ)

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

Open to Public Inspection

Name	of the organization							Employer is	dentification	number	
			NT INTERNATIONAL IN						32 01		
Par			rity Status (All orga						nstructio	ns.	
1 2	☐ A church, cond☐ A school desc☐ A hospital or a☐ A medical rese	vention of churc ribed in section cooperative ho	ntion because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunct	churches ch Sched ation desi	s describe ule E.) cribed in :	ed in sec section '	tion 170 170(b)(1)((b)(1)(A)(i (A)(iii).		(iii). Enter the	
5	An organization	•	the benefit of a colle	ge or uni	versity ov	wned or	operated	by a go	vernment	al unit described	in
6 7	An organization	n that normally	nment or government receives a substantia (A)(vi). (Complete Par	al part of					nit or from	n the general pub	olic
8 9	= = = = = = = = = = = = = = = = = = =										
10 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.										
e		nis box, I certify ndation manage	Type II c that the organization ers and other than one	is not co	ntrolled d	lirectly o	r indirectl		or more		
f		ation received a check this box	a wntten determination	on from	the IRS t	that it is	a Type	I, Type	ll, or Typ	e III supporting	
g	Since August following person		he organization accep	pted any	gift or co	ontributio	n from a	ny of the	•		
	• • •	•	ndirectly controls, eithody of the supported of		_		•		٠,,	nd Yes N	lo
	(ii) A family m	ember of a pers	on described in (i) abo	ove?						11g(ii)	
_			a person described in							11g(iii)	
h			ion about the support	,				,			
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the organ	ou notify nization in of your port?	organiza (i) organi	Is the tion in col ized in the S.?	(vii) Amount of support	
				Yes	No	Yes	No	Yes	No		
(A)											
(B)								<u> </u>			
(C)										_	
(D)											
(E)											
								<u> </u>	T		

Scriedui	e A (Form 990 of 990-EZ) 2011						Page 2
Part		tions Descri	bed in Secti	ons 170(b)(1)	(A)(iv) and 1	70(b)(1)(A)(vi)	
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	organization	n failed to qua	lify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support	· · · · · · · · · · · · · · · · · · ·					
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and			1			
	membership fees received. (Do not						
_	include any "unusual grants.")	2,085,706	2,641,986	2,577,251	2,946,462	3,585,502	13,836,907
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			ŀ			
							
4	Total. Add lines 1 through 3	2,085,706	2,641,986	2,577,251	2,946,462	3,585,502	13,836,907
5	The portion of total contributions by	3		1	ł		
	each person (other than a				i		
	governmental unit or publicly			į			
	supported organization) included on line 1 that exceeds 2% of the amount			Ì			
	shown on line 11, column (f)			ļ	ļ		
6	Public support. Subtract line 5 from line 4.						40.000.000
	on B. Total Support	l					13,836,907
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	2,085,706	2,641,986	2,577,251	3,402,507	3,585,502	13,836,907
8	Gross income from interest, dividends,	2,000,700	2,041,300	2,311,231	3,402,307	3,363,362	13,030,307
•	payments received on securities loans.						
	rents, royalties and income from similar						
	sources		128	650	3,940	2,909	7,627
9	Net income from unrelated business						.,
	activities, whether or not the business						
	is regularly carried on					ļ	
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)		189,889	264,558	108,504	265,217	828,168
11	Total support. Add lines 7 through 10				•		14,672,702
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First five years. If the Form 990 is for the		's first, second	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop he			<u> </u>	<u></u>	<u> </u>	▶ 🗀
Section	on C. Computation of Public Suppor						
14	Public support percentage for 2011 (line 6					14	94 %
15	Public support percentage from 2010 Sch					15	95 %
16a	331/3% support test—2011. If the organic						
•	box and stop here. The organization qua						_
b	331/x3% support test—2010. If the organ check this box and stop here. The organ					15 is 331/3% o	
			-				. ▶ 🗆
17a	10%-facts-and-circumstances test – 20						
	10% or more, and if the organization me						
	Part IV how the organization meets the "forganization			-	luon qualmes a	as a publiciy su	
	•						. • 🗆
b	10%-facts-and-circumstances test-20						
	15 is 10% or more, and if the organization m						
	Explain in Part IV how the organization m supported organization						` • -
18	Private foundation. If the organization di						
	ato realisation il ule digalitzation di	a not brider a l	~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	, va, 100, 17d,	, or ito, crieci	vano dos and s	-

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

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

	ii trie organization fails to quality	under the te	sis listed ber	ow, piease co	implete Part	11.)	
	on A. Public Support	,			,	· · · · · · · · · · · · · · · · · · ·	
_	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees			1	ŀ		
2	received. (Do not include any "unusual grants") Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities]	Ì		İ
	furnished in any activity that is related to the				ŀ	Ì	
_	organization's tax-exempt purpose		<u> </u>			ļ	
3	Gross receipts from activities that are not an unrelated trade or business under section 513			1	İ	ļ	ł
					 		
4	Tax revenues levied for the organization's benefit and either paid			Ì		ì	1
	to or expended on its behalf]			f
5	The value of services or facilities						
5	furnished by a governmental unit to the			:			•
	organization without charge						
e	Total. Add lines 1 through 5	· · · · · · · · · · · · · · · · · · ·	 	-		 	
6 7a	Amounts included on lines 1, 2, and 3			 			
·a	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			i			i
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b		 		<u> </u>		
8	Public support (Subtract line 7c from				 		
	line 6.)				1		
Secti	on B. Total Support		. L 	l	1	<u> </u>	I,
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	· · · · · · · · · · · · · · · · · · ·	<u></u>	,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1,7,
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						1
	royalties and income from similar sources .			Ì			ł
b	Unrelated business taxable income (less			1			
	section 511 taxes) from businesses				j]	
	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		<u> </u>	ļ <u>.</u>			
12	Other income. Do not include gain or	,	-				
	loss from the sale of capital assets				1		
	(Explain in Part IV.)		_				
13	Total support. (Add lines 9, 10c, 11,			1			
4.6	and 12.)	L	Ļ <u></u>	L	<u> </u>	<u> </u>	L
14	First five years. If the Form 990 is for the	_			-		
Cast	organization, check this box and stop he		· · · · ·		· · · · ·		🕨
<u>Secu</u> 15	on C. Computation of Public Suppor			3 column (6)		16	0/
16	Public support percentage for 2011 (line 8 Public support percentage from 2010 Sch	• •	-			15	<u>%</u>
	on D. Computation of Investment In			· · · ·	· · · · ·	10	
17	Investment income percentage for 2011 (**		v line 13 colu	mn (fl)	17	%
18	Investment income percentage from 2010			-	• • • •	18	
19a	331/3% support tests—2011. If the organi	-				<u> </u>	
.50	17 is not more than 331/3%, check this box						
ь	331/3% support tests—2010. If the organiz	•	•			•	_
J	line 18 is not more than 331/3%, check this I						
20	Private foundation. If the organization di	-	•	•		•	
				,			

Schedule A (I	Form 990 or 990-EZ) 2011 Pag	je 4
Part IV	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).	
Other Inco	me represents the drilling of wells for private orgnaiztions, sales of well pump parts to other non-governmental organizations	
sales of ve	hicle parts, invoicing for shared internet bandwidth, lodging in our guest houses and other related products or services.	
The incom	e earned is incidental and assists in achieving the overall vision of ICDI.	
	······································	

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

OMB № 1545-0047

Open to Public Inspection

Name of the organization Employer identification number **Integrated Community Development International Inc** 32 0112278 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) . Aggregate grants from (during year) . . . 3 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? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) . . 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

b Assets included in Form 990, Part X.

•							
O - L - 4	D D (Farm 000) 0011						- 0
	e D (Form 990) 2011	alla adiana ad A	-4		OV	bau Cinailau A	Page 2
Part							
3	Using the organization's acquisition, ac collection items (check all that apply):	cession, and oth	er records, cnec	k any of the	TOIIOW	ving that are a	significant use of its
а	☐ Public exhibition		d 🗋 Loan	or exchange	progr	rams	
b	☐ Scholarty research						·
С	☐ Preservation for future generations						·
4	Provide a description of the organization XIV.	n's collections ar	nd explain how the	ney further th	he org	anization's exe	empt purpose in Part
5	During the year, did the organization so assets to be sold to raise funds rather the						
Part							
	line 9, or reported an amount of						
1a	Is the organization an agent, trustee, c			or contributio	ons or	other assets r	not
•	included on Form 990, Part X?						
ь	If "Yes," explain the arrangement in Part						
	ii res, explain the arrangement iiri art	Alv and comple	te the following to	abie.		T	Amount
С	Beginning balance				1c	· 	
d	•				1d	+	
	Additions during the year				1e		
e	• •				11		
f	Ending balance						
2a	Did the organization include an amount		π X, line 21?.				. 🗌 Yes 🗌 No
	If "Yes," explain the arrangement in Part			"\/" t- C-		00 D-+ N/ E-	- 40
Par							
4		(a) Current year	(b) Pnor year	(c) Two years	Dack	(d) Three years ba	ck (e) Four years back
	Beginning of year balance	5268	4724		q		
	Contributions		0		4000	· · · · · · · · · · · · · · · · · · ·	
	Allah barrasakan dak dan adalah dan dalah barrasak						
С	1 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				- 1		
C	losses	-74	609		760		
d	losses	-74	60 9		760 0		
d	Grants or scholarships Other expenditures for facilities and	-74	609 0				
d	Grants or scholarships Other expenditures for facilities and programs	-74	609 0				
d	Grants or scholarships Other expenditures for facilities and	69	609 0 0 65				
d e	Grants or scholarships	69 5,125	0 0 65 5268		0 036 4724		
d e f	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the	69 5,125 current year end	0 65 5268 I balance (line 1g		0 036 4724	as:	
d e f g	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment	69 5,125 current year end	0 65 5268 I balance (line 1g		0 036 4724	as:	
d e f g	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment	69 5,125 current year end	0 65 5268 I balance (line 1g		0 036 4724	as:	
d e f g 2	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment	5,125 current year end ► 100 %	0 65 5268 I balance (line 1g %		0 036 4724	as:	
d e f g 2 a b	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c	5,125 current year enc 100 %	0 65 5268 I balance (line 1g %	, column (a))	0 036 4724 held a		
d e f g 2 a b	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the percentages.	5,125 current year enc 100 %	0 65 5268 I balance (line 1g %	, column (a))	0 036 4724 held a		
d e f g 2 a b c	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c	5,125 current year enc 100 %	0 65 5268 I balance (line 1g %	, column (a))	0 036 4724 held a		the Yes No
d e f g 2 a b c	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the percentages.	5,125 current year enc 100 %	0 65 5268 I balance (line 1g %	, column (a))	0 036 4724 held a		
d e f g 2 a b c	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the porganization by:	5,125 current year ence 100 % % should equal 100 possession of the	0 65 5268 I balance (line 1g %	, column (a))	0 036 4724 held a		Yes No
def gg 2 a b c c 3a	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the porganization by: (i) unrelated organizations	5,125 current year enc 100 % should equal 100 possession of the	5268 I balance (line 1g %	, column (a)) at are held a	0 036 4724 held a		Yes No
def gg 2 a b c c 3a	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment ■ Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the porganization by: (i) unrelated organizations (ii) related organizations	5,125 current year enc 100 % % should equal 100 possession of the	5268 I balance (line 1g % 9%. e organization that	at are held a	0 036 4724 held a		Yes No 3a(i) ✓ 3a(ii) ✓
de f g 2 a b c c 3a	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the proganization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization bescribe in Part XIV the intended uses of	5,125 current year enc 100 % % should equal 100 possession of the tions listed as ref the organization	5268 I balance (line 1g % 9%. e organization that	at are held and the second sec	0 036 4724 held a		Yes No 3a(i) ✓ 3a(ii) ✓
de fg2 abcc3a	Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment ■ Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the proganization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization bescribe in Part XIV the intended uses of	5,125 current year enc 100 % % should equal 100 possession of the tions listed as ref the organization	5268 I balance (line 1g % 0%. e organization that condition that condition is endowment fi 990, Part X, liner basis (b) Cost of	at are held and the second sec	0 036 4724 held a		Yes No 3a(i) ✓ 3a(ii) ✓

164,000

545,262

24,130

498,194

1,298,235

1a Land

Equipment

c Leasehold improvements

Other . .

d

b Buildings

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

84,030

101,706

374,602

674

164,000

461,232

23,456

396,238

923,633

1,968,558

Part VII	Investments-Other Securities	See Form 990, Part X, I		age C
	n) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financia	I derivatives	-		
	held equity interests			
(3) Other			,	
(A)				
(B)				
(C)				
(D)				
(E)	***************************************			
(F)				
(G)				
(H)	·			
(1)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Relate	T		
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
_(1)				
(2)				
_(3)	······			
(4)		· · · · · · · · · · · · · · · · · · ·		
(5)			· · · · · · · · · · · · · · · · · · ·	
(6)	· · · · · · · · · · · · · · · · · · ·			
<u>(7)</u>				
(8)			 	
(10)	· · · · · · · · · · · · · · · · · · ·	+		
	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	art X. line 15.	· · · · · · · · · · · · · · · · · · ·	
		a) Description	(b) Book value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(8)		···		
(9)	· · · · · · · · · · · · · · · · · · ·			
(10)		-1 (D) (' 45)		
	imn (b) must equal Form 990, Part X, o		<u> </u>	
Part X	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.		
	Income taxes	(b) Book value		'
	t donations for future wells	166 427		
(3)	a donations for future wells	166,437		
(4)		 		
(5)				
(6)	· · · · · · · · · · · · · · · · · · ·			
(7)				
(8)				
(9)	······································			
(10)				
(11)				
	(b) must equal Form 990, Part X, col. (B) line 25.)			
			the organization's financial statements that reports t	he
	n's liability for uncertain tax positions o			

Part	Reconciliation of Change in Net Assets from Form 990 to Au	ıdited Financial Statem	rents	<u>. </u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	3,899,971
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	4,072,024
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	-172,053
4	Net unrealized gains (losses) on investments		4	0
5	Donated services and use of facilities		5	0
6	Investment expenses		6	0
7	Prior period adjustments		7	0
8	Other (Describe in Part XIV.)		8	0
9	Total adjustments (net). Add lines 4 through 8		9	0
10	Excess or (deficit) for the year per audited financial statements. Combine I		10	-172,053
Part			r Ret	urn
1	Total revenue, gains, and other support per audited financial statements		1	3,899,971
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	╛	
C	Recoveries of prior year grants		_	
đ	Other (Describe in Part XIV.)		_	
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1	<i></i>	3	3,899,971
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		
C	Add lines 4a and 4b		40	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1			3,899,971
Part	· · · · · · · · · · · · · · · · · · ·		er R	eturn
1	Total expenses and losses per audited financial statements		1	4,072,024
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a	_	
b	Prior year adjustments	2b	_	
С	Other losses	2c	4	
d	Other (Describe in Part XIV.)		4	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	4,072,024
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
Ь	Other (Describe in Part XIV.)		4	į
C	Add lines 4a and 4b			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 18.)	5	4,026,242
	XIV Supplemental Information			
	lete this part to provide the descriptions required for Part II, lines 3, 5, and			
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,	lines 2d and 4b. Also con	npiete	this part to provide
•	dditional information.			
ched	ule D, Part V, Line 4 - The endowment funds have been set aside to allow the cr	eation of a Operating Agen	cy Fu	nd with Kosciusko
			_	
omn	unity Foundation. A separate Designated Endowment Fund has a balance of 8,	085. These funds are not t	o be r	eported as an asset on I
_				
Inanc	al statements as they are not controlled by ICDI or the Board of Directors. The	funds are intended to stay	In the	account and ICDI
	<u> </u>			
ecelv	e the interest on the investment. The use of interest funds has not been determ	nined and is currently reinv	ested	
ched	ule D, Part V, Line 2b - ICDI Receives contract donations for the completion of w	vater wells. If a contract is	pald	in a the current year and
_				
vork (ompleted in the next, the funds are held as a deposit. The funds are not include	ed as revenue but as a liab	ollity fo	or future work.

Schedule D (Form 990) 2011

Page 4

Schedule D (For	rm 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	

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	•••••••••••••••••••••••••••••••••••••••	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Department of the Treasury internal Revenue Service

Open to Public Inspection

Name of the organization					Employer identification number
	Development Internation		Abo Haita d Chahan Ca	-1-4-164	32 0112278
	i information on Act 0, Part IV, line 14b.	ivities Outside	the United States. Com	plete if the organi	zation answered "Yes" to
1 For grantmak	cers. Does the organizate grantees' eligibility for		cords to substantiate the amassistance, and the selection		
	kers. Describe in Part tside the United States		tion's procedures for mon	toring the use o	f its grants and other
3 Activities per l	Region. (The following F	Part I, line 3 table	can be duplicated if additio	nal space is need	ed.)
(a) Regio	n (b) Numb offices in region	the employees,	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) if activity liste a program se describe specific service(s) in r	rvice, expenditures for c type of and investments
(1) Sub-Saharan Afr	ica - CAR 2	120	program services	Sch F, Part 5	2,189,179
(2) Sub-Saharan Afr	Ica - DRC 1	1	startup costs	Sch F, Part 5	175,528
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total . b Total from	continuation				2,364,707
sheets to Part	H	1		1	1

Page 2

Schedule F (Form 990) 2011

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. ▶ □ Part II can be duplicated if additional space is needed. PartII

	ı			ı					
-	(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	Winding of Welling of Welling (book, FMV, appraisal, other)
Ξ									
(2)									
(2)									
(4)									
(2)									
9									
ε									
8									
6									
(10)									
<u>(1</u>									
(12)									
(13)									
(14)									
(15)									
(16)	·								

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

3 Enter total number of other organizations or entities . . .

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					ļ									!			:		Schedule F (Form 990) 2011
(g) Description of non-cash assistance															;				Sched
(f) Amount of non-cash assistance															, ,				
(e) Manner of cash disbursement																			
(d) Amount of cash grant																			
(c) Number of reciplents													i						
(c) Number of grant or assistance recipients																			
(a) Type of grant or assistance	(1)	(2)	(6)	(4)	(5)	(9)	6	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

_	4
Pana	4

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

Part V	Ç.

Supplemental Information

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

The majority of ICDI's functions are performed in the Central African Republic. ICDI provides clean water, orphan care, agriculture assitance,
HIV/AIDS education, radio programing, and micro-loans. The accomplishment of such programs can be found in the introductory section of
the 990. Starting in 2011, iCDI began work in the Democratic Republic of Congo with a purchase of property and buildings. Associated
start-up costs and supply costs were also incurred.
······································

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

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

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

INTEGRATE	ED COMMUNITY DEVELOPMENT I	NTERNA	TIONAL II	NC				32 ()11227	78		
Part I	Excess Benefit Transactions Complete if the organization ar	(section	501(c)(3 "Yes" o	i) and section 501(c)(on Form 990, Part IV, I	4) organiz ine 25a o	ations only). r 25b, or For	m 99	0-EZ,	Part '	V, line	40b.	
1	(a) Name of disqualified person				(h) Descrip	tion of transacti	nn				(с) Соп	rected?
	ta) realis of obdominos porson,				(a) Descrip						Yes	No
(1)												
(2)		•										
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und						•	nng t	he ye l	> \$			
3 Ent	er the amount of tax, if any, on li	ne 2, ab	ove, reim	bursed by the organ	ızation			!	▶ \$	<u>'</u>		
Part II	Loans to and/or From Interest Complete if the organization as			n Form 990, Part IV, I	ine 26, or	Form 990-E	Z, Pa	rt V, li	ine 38	3a.		
(a) Na	me of interested person and purpose		to or from anization?	(c) Onginal principal amount	(d) Ba	alance due	(e) In c	lefault?	by bo	proved pard or nittee?	(g) W agreer	
		To	From				Yes	No	Yes	No	Yes	No
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Total .				▶ \$	<u> </u>			L				
Part III	Grants or Assistance Benefit Complete if the organization a	i ng Inte nswered	rested P	Persons. n Form 990, Part IV, I	ine 27.		L					
	(a) Name of interested person	(b) R	telationship	between interested person organization	and the	(c) /	Amount	and ty	pe of a	ssistan	ce	
(1)												
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	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organu rever	
					Yes	No
	Jay Hocking	Son of CEO		Graphic work and IT Admin		
(2)	Dawn Rondeau	Wife of CDO	24,669	Office admin assistant salary	<u> </u>	
(3)	Faye Hocking	Wife of CEO	2,539	Travel with CEO on one trip		
(4)	John Hocking	Son of CEO	33,398	Trip cordinator, translator salary		l
(5)	Adrienne Lane	Niece of board member		Grant writing Intern		
(6)	Nick Klopp	Son od COO		Travel with father in RCA		
(7)						
(8)				,		
(9)						
(10)			· · · · · · · · · · · · · · · · · · ·			
- a	Complete this part to provide	de additional information for res	sponses to question	ns on Schedule L (see instructions	s).	
						-
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		***************************************		***************************************		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization	Employer identification number
INTEGRATED COMMUNITY DEVELOPMENT INTERNATIONAL INC	32 0112278
Assessable above from each to econol pulse details above. ALL DRIOD VEAD NOTES	
Accounting change from cash to accrual, prior details change - ALL PRIOR YEAR NOTES	·
990 Part 1 Line 8 - Reduced from 3,402,507 to 2,946,462 because of donated contract well funds that he	ad not been completed and should not b
recognized	
990 Part 10 Line 25 - Contract well funds recorded as other liability of 456,045	
990 Part 10 Line 9 - Reduced from 390,223 to 197,795 by taking out consignment inventory. This inven	tory balance is held by the supplier
and not ICDI	
990 Part 10 Line 10b - Reduced from 2,003,491 to 1,947,382 for incorrectly capitalized computer equips	nent
FORM 990, Part VI, Section A, Line 7a - All board members are selected and approved by the other board	ard members. They must vote for inclus
Into the Board of Directors.	
FORM 990, Part VI, Section A, Line 7b - Decisions to expand operations to a new location, program or	direction than the specified mission
of ICDI must be approved by the Board of Directors. Any actions in regards to litigation against ICDI	outside of African personnel and
transportation) must be approved by the Board of Directorrs. The Board receives regular updates on	the status of each program and address
direction as needed.	
FORM 990, Part VI, Section B, Line 12c - Each year each member of the Board of Directors must sign a	conflict of interest report. A board
member whose interests may be in conflict must exclude himself/herself from deliberations and decis	
FORM 990, Part VI, Section B, Line 15 - The compensation of the chief executive officer is decided by	
feedback from the executive staff on the financial ability of the organization to meet the compensation	package. Additionally, there is an
annual performance evaluation by the board, which factors into the final authorization of the compens	sation package for the coming year.
FORM 990, Part VI, Section C, Line 19 - The governing documents, conflict of interest policy and finan	cial statements are available to the publi
upon request.	