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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 Open to Public Inspection

	OI UI	2011 calendar year, or tax year beginning and ending					
B c	heck if	C Name of organization	D Employer identification number				
	Addre	S CNFA					
	Name chang		52-1447902				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/si	uite E Telephone number				
	Termi		(202)296-3920				
	Amen	Crty or town, state or country, and ZIP + 4	G Gross receipts \$ 18,669,461				
	Application	WASHINGTON, DC 20030	H(a) Is this a group return				
	pendi	F Name and address of principal officer: JACK SWARTWOOD	for affiliates? Yes X No				
		SAME AS C ABOVE	H(b) Are all affiliates included? Yes No				
ΙT	ax-ex	empt status: X 501(c)(3)	527 If "No," attach a list. (see instructions)				
J۷	Vebsi	e: ▶ WWW.CNFA.ORG	H(c) Group exemption number ▶				
K F	orm o	organization: X Corporation	Year of formation: 1985 M State of legal domicile: DC				
Pa	ırt I	Summary					
Governance		Briefly describe the organization's mission or most significant activities: ${\color{red} { extbf{SEE}} \ extbf{PAGE}} $	2, PART III, LINE 1 FOR				
rua		Check this box if the organization discontinued its operations or disposed of n	nore than 25% of its net assets.				
Ş		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				
8		Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5 4				
Activities		Total number of volunteers (estimate if necessary)	6 279				
Activities	i i	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0				
•		Net unrelated business taxable income from Form 990-T, line 34	7ь 0.				
. —			Prior Year Current Year				
	8	Contributions and grants (Part VIII, line 1h)	21,270,554. 18,539,229				
) nu	9	Program service revenue (Part VIII, line 2g)	0. 0.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,295. 292.				
; Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	163,793. 129,940				
Rever		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,436,642. 18,669,461				
(Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,765,897. 2,656,868				
		Benefits paid to or for members (Part IX, column (A), line 4)	0. 0				
ရွ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,512,780. 4,419,907				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.				
<u>8</u>	b	Total fundraising expenses (Part IX, column (D), line 25)					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	15,068,910. 11,457,217				
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A) ine 25)	21,347,587. 18,533,992				
	19	Revenue less expenses. Subtract line 18 from line 12	89,055. 135,469				
ts or		14 8	Beginning of Current Year End of Year				
sets	20	Total assets (Part X, line 16)	5,240,455. 5,502,066				
id B	21	Total liabilities (Part X. line 26)	3,308,068. 3,434,210				
캺		Net assets or fund balances Subtract line 21 from line 20	1,932,387. 2,067,856				
Pa	rt II	Signature Block					
		lties of perjury, I declare that I have examined this return, including accompanying schedules and sta					
true,	corre	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep					
		WANG MOLE	10/09/2012				
Sigr	n	Signature of other	Date				
Her	е	JACK SWARTWOOD, SENIOR VICE PRESIDENT					
		Type or print name and title					
		Print/Type preparer's name Preserrer's signature	Date Check PTIN				
Paid		CRAIG A. STEVENS, CPA Way a Stevens	10-5-12 self-employed P01289490				
Prep	arer	Firm's name CALIBRE CPA GROUP PLC	Firm's EIN ► 47-0900880				
11	Only	•	EST				
use			/2021221 0000				
Use ——		BETHESDA, MD 20814	Phone no. (202)331-9880				

Form	990 (2011) CNFA 52-1447902 Page
Par	t 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.
•	TO PROMOTE GREATER UNDERSTANDING AND INVOLVEMENT AMONG AMERICA'S
	PRIVATE SECTOR ECONOMIC LEADERS WITH THE WORLD'S GROWING ECONOMIES.
	FRIVALE DECION ECONOMIC DEADERD WITH THE WORLD D GROWING ECONOMIED.
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? Yes X No.
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations 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.
42	0 545 050
4a	(Code) (Expenses \$2,517,352. including grants of \$) (Revenue \$2,517,352. THE KENYA DRYLANDS LIVESTOCK DEVELOPMENT PROGRAM AIMS TO INCREASE
	INCOME AND FOOD SECURITY FOR AT LEAST 50,000 PASTORALIST HOUSEHOLDS IN
	NORTHEAST KENYA, FROM MANDERA TO IJARA AND INCLUDING TANA RIVER
	DISTRICT IN COAST PROVINCE. KDLDP CONNECTS HERDERS TO MARKETS, CREDIT
	SERVICES, AND LIVESTOCK-HEALTH INPUTS THAT IMPROVE PRODUCTIVITY. THE
	PROGRAM WILL ALSO IMPROVE POLICY THAT AFFECTS PASTORALISTS. AWARDED IN
	JUNE 2010, AND OFFICIALLY LAUNCHED IN OCTOBER 2010, KDLDP IS A
	THREE-YEAR, \$10-MILLION PROGRAM FUNDED BY USAID/KENYA. KDLDP IS
	IMPLEMENTED BY CNFA WITH THE AGRICULTURAL MARKET DEVELOPMENT TRUST
	(AGMARK) AND THE KENYA LIVESTOCK MARKETING COUNCIL (KLMC). KDLDP IS
	BASED IN NAIROBI WITH A MAIN FIELD OFFICE IN GARISSA AND DISTRICT LEVEL
	OFFICES OPERATED BY KLMC IN WAJIR, MANDERA, IJARA AND TANA RIVER. THE
41-	
4b	
	AFGHAN FARM SERVICES ALLIANCE (AFSA/CNFA) - THE OVERALL GOAL OF CNFA'S
	AFGHANISTAN FARM SERVICE ALLIANCE IS TO INCREASE SALES AND JOBS OF
	FARMERS IN AFGHANISTAN. THIS GOAL IS CONSISTENT WITH
	USAID/AFGHANISTAN'S STRATEGIC OBJECTIVE (SO) 5: A THRIVING LICIT
	ECONOMY LED BY THE PRIVATE SECTOR, BY FOSTERING THE CREATION OF A RURAL
	INPUT DISTRIBUTION SYSTEM THAT WILL CONTRIBUTE TO SMALLHOLDER INCREASES
	IN PRODUCTIVITY AND INCOMES. IN ADDITION, ALLIANCE ACTIVITIES WILL
	CONTRIBUTE DIRECTLY TO USAID PROGRAM ELEMENT AGRICULTURAL SECTOR
	PRODUCTIVITY.
4c	(Code) (Expenses \$ 2,238,070. including grants of \$) (Revenue \$ 2,238,070.
	AMP GEORGIA- CNFA IS USING A COMMERCIALY SUSTAINABLE, MARKET-ORIENTED
	METHODOLOGY TO DEVELOP MACHINERY SERVICE PROVIDERS IN GEORGIA. THE
	PROJECT WILL USE A COMBINATION OF MATCHING INVESTMENTS, LEVERAGED
	COMMERCIAL FINANCE, BUSINESS AND EXTENSION TRAINING AND COLUNTEER
	TECHNICAL ASSISTANCE TO ESTABLISH 25-30 MACHINERY SERVICE CENTERS THAT
	WILL IMPROVE FEE-BASED CUSTOM MACHINERY SERVICES TO AT LEAST 12,500
	SMALL FARMERS.
	· · · · · · · · · · · · · · · · · · ·
	A STATE OF THE STA
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 7,807,768. including grants of \$) (Revenue \$ 7,807,768.)
4e	Total program service expenses ► 14,886,015.
	Form 990 (201
13200	

Form 990 (2011) CNFA 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)?		ŀ	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	X	
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		X
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	X	
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	ļ	X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
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	ļ	X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
u	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	444		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	A	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	446		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		Λ
	Schedule D, Parts XI, XII, and XIII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa	1	<u> </u>
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a	х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	Ė
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	х	:
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		X
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	17		Х
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	<u> </u>	Х
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		Х
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u></u>	
		Form	990 (2011)

			Yes	No
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		Х
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		Х
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	Х	
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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part I	25a		Х
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		Х
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		Х
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		X
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	_30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
~~	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
22	Schedule N, Part II	32		<u> </u>
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	00		v
34	Was the organization related to any tax-exempt or taxable entity?	33		<u> </u>
5 4	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	24		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	-	X
b		33a		
	section 512/hV12\2 If "Vec " complete Schodule B. Port V. Inc. 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335	-	
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>		_ -
	Note. All Form 990 filers are required to complete Schedule O	38	х	
			000	

Form **990** (2011)

a Enter the number reported in Box 3 of Form 1096. Enter 0- if not applicable b Enter the number of Forms W2G included in her 1a. Enter 0- if not applicable c Dd the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. 2b If a least one is reported on line 2a, did the organization file all required to e-file (per entructions) 3a Dd the organization have unrelated business gross income of \$1,000 or more during the year? 3a Dd the organization have unrelated business gross income of \$1,000 or more during the year? 3b If 1''ses, in set filed a form 990-71 for the year? 1''/7'', Provide an explanation in Schodule O 4a Alany 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 bink account, securities account, or other financial account)? 4b If "'yes, enter the name of the foreign country, SEE SCHEDULE O 5c Possible party northly the organization file Form 88861? 6c Descriptions for filing requirements for form 15 90.22.1 Report of Foreign Bank and Financial Accounts. 6c Vi "'yes," to line Sa or Sb, did the organization file Form 88861? 6c Descriptions for the organization have an interest in, or a signature or other authority or year. 6c Descriptions for the party of the		Check if Schedule O contains a response to any question in this Part V				X
tale Enter the number reported m Box 3 of Form 1096. Enter 0-ff not applicable be Enter the number of Forms W20 finduled in the rat. Enter 0-ff not applicable be Enter the number of Forms W20 finduled in the rat. Enter 0-ff not applicable c bild the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gaming) with more within the year covered by this return. Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, light of the calendar year ending with or within the year covered by this return. If if all total one is reported on the 2,0 dit the organization file all required federal employment tax returns? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see nativuctions) If if all total one is reported on the 2,0 dit the organization file all required federal employment tax returns? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see nativuctions) If if all total one is reported on the 2s and 2s is greater than 250, you may be required to e-file (see nativuctions) If if all total one is the complex of			<u></u>		Yes	
b Enter the number of Forms W2G included in line 1a. Enter O of not applicable	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	_{1a} 43			110
Gambleng) winnings to prize winners? 2 Effect from number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				l
2a Earler the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. b If at least one is reported on Iner 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, our may be required to e-rife (see instructions) 3a Did the organization have unrisited business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 990 T for the year? If No. *provide an explanation in Schedule O 3a At any time during the calendary year, did the organization have an interest or, or a spinature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5b If "Yes," short the name of the foreign country, SEES SCHEDULE O 5c enstructions for filing requirements for Form ID F 90.22.1, Report of Foreign Bank and Financial Accounts. 5c Was the organization have the organization that It was or is a pastly to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization file Form 88861"? 6d If "Yes," to line 5a or 5b, did the organization file Form 88861"? 6d If "Yes," to line 5a or 5b, did the organization file Form 88861" or Interest in the organization solicit any contributions that were not tax deductible? 6d If "Yes," indicate the number of time selection for the value of the goods or services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," indicate the number of Forms 8822 filed during the year 9 Did the organization receive a contribution of qualified intellectual property, did the organization file Form 1998 a required to the Form 8282? 9 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1998 or required to the second organization make a distribution to a donor, dinner of in	С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
2a Earler the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. b If at least one is reported on Iner 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, our may be required to e-rife (see instructions) 3a Did the organization have unrisited business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 990 T for the year? If No. *provide an explanation in Schedule O 3a At any time during the calendary year, did the organization have an interest or, or a spinature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5b If "Yes," short the name of the foreign country, SEES SCHEDULE O 5c enstructions for filing requirements for Form ID F 90.22.1, Report of Foreign Bank and Financial Accounts. 5c Was the organization have the organization that It was or is a pastly to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization file Form 88861"? 6d If "Yes," to line 5a or 5b, did the organization file Form 88861"? 6d If "Yes," to line 5a or 5b, did the organization file Form 88861" or Interest in the organization solicit any contributions that were not tax deductible? 6d If "Yes," indicate the number of time selection for the value of the goods or services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," indicate the number of Forms 8822 filed during the year 9 Did the organization receive a contribution of qualified intellectual property, did the organization file Form 1998 a required to the Form 8282? 9 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1998 or required to the second organization make a distribution to a donor, dinner of in		(gambling) winnings to prize winners?		1c	Х	
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a At any time during the calendary year, did the organization in see a segnature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountly? 4 a X 5 If 'Yes,' has if filed a form 990-T for this year' If 'No,' provide an explanation in Schedule O 5 See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5 A Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 C If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 C If 'Yes,' to line 5a or 5b, did the organization that It was or is a party to a prohibited tax shelter transaction? 5 C If 'Yes,' to line 5a or 5b, did the organization that It was or is a party to a prohibited tax shelter transaction? 6 D If 'Yes,' to line 5a or 5b, did the organization in line Form 8896-17 6 D If 'Yes,' to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 D If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 D Organization receive a payment in excess of \$5's made party as a contribution and party for goods and services provided to the payor? 7 D If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 D If the organization received a contribution of cars, boats, airplane	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
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g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distribution sunder section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter 10 Initiation fees and capital contributions included on Part VIII, line 12 11 Section 501(c)(12) organizations. Enter 12 Gross income from members or shareholders 13 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 14 Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	7e		
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		·	[100]	140		Y
· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·			<u> </u>
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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		<u></u>			LX
Sec	tion A. Governing Body and Management					
		1	1 _		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		4		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	l				
b	Enter the number of voting members included in line 1a, above, who are independent	_1b_		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other			
_	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customanly performed by or under the	e direc	t supervision	ì		
_	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form S		•••	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as:	sets?		_5_		<u>X</u>
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	l _		
_	more members of the governing body?			7a_		Х
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockno	olders, or	l		37
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yearned governing body?	ar by tn	e rollowing:			
a b	Each committee with authority to act on behalf of the governing body?			8a	X	
9				8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea organization's mailing address? If "Yes," provide the names and addresses in Schedule O	icried a	at trie	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu.	Code)	1 9		^
	tion 2.1. The local fine section briedlesis information about policies not required by the internal h	evenue	coue.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such cl	hapter	s. affiliates.	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	р	-, aa.o,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	v befo	re filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•	3	T.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y		**** *** *			
	ın Schedule O how this was done			12c	х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	_
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	nth a			_
_	taxable entity duning the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of	nızatıo	n's			
500	exempt status with respect to such arrangements?			16b		
		-	···-			
17	List the states with which a copy of this Form 990 is required to be filed NONE		504/->/0>			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1 for public inspection. Indicate how you made these available. Check all that apply.	(Sect	ion ou i(c)(3)s only)	availab	ie	
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflice.	of interest materials		امیما	
13	statements available to the public during the tax year.	JIIIICT (interest policy, ar	ia iinar	icial	
20	State the name, physical address, and telephone number of the person who possesses the books a	nd roc	orde of the error	tion ►		
	JACK W. SWARTWOOD - (202) 296-3920	nu rec	orus or the organiza	aon. 📂		
	1828 L STREET, NW, SUITE 710, WASHINGTON, DC 2003	6				
132006				Farm	990 (2011

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

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

- 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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	box, offic	not c	Pos heck ss pe	ntion more	than is bot or/trus	h an	an compensation from	Reportable compensation from related	Estimated amount of other
	(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)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JOHN H. COSTELLO		1								
PRESIDENT	40.00	X		X	_			430,219.	0.	47,005.
(2) JOHN R. BLOCK										
BOARD OF DIRECTOR CHAIRMAN	1.00	X		ļ				0.	0.	0.
(3) LUCY WILSON BENSON										
BOARD OF DIRECTOR	1.00	X		<u>L</u> .		_	_	0.	0.	0.
(4) FRANK C. CARLUCCI										
BOARD OF DIRECTOR	1.00	X			_			0.	0.	0.
(5) JOHN J. CAVANAUGH										
BOARD OF DIRECTOR	1.00	X						0.	0.	0.
(6) A MICHAEL ESPY										
BOARD OF DIRECTOR	1.00	X				L	L	0.	0.	0.
(7) RICHARD P. REISING										
BOARD OF DIRECTOR	1.00	X						0.	0.	0.
(8) RICK D. PIERCE										
COUNTRY DIRECTOR	40.00	igsquare			ļ	X	_	228,326.	0.	28,008.
(9) PATRICK NORELL SENIOR VICE PRESIDENT	40.00					х		169,868.	0.	32,689.
(10) JACK W. SWARTWOOD SENIOR VICE PRESIDENT	40.00					x		203,386.	0.	28,571.
(11) SYLVAIN ROY SENIOR VICE PRESIDENT	40.00					x		157,770.	0.	32,961.
(12) MICHAEL C KIMES CHIEF OF KOSOVO PROJECT	40.00					х		171,002.	0.	31,660.
			-							

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Form 990 (2011) CNFA Part VII Section A. Officers, Directors, Tree	istens Kay E.	mpl-	wec		nd L	diah		Compensated Employ	52-1	<u> </u>	204		age 8
(A) Name and title	(B) Average hours per week	(do	not c	(C Posi heck ss per id a d	tion	than	one n an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other		
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	the organizations (W-2/1099-MISC)		s	compensa		ation e tion ted			
1b Sub-total			į					1,360,571.		0.	200),8	94.
 c Total from continuation sheets to Part V d Total (add lines 1b and 1c) 2 Total number of individuals (including but recompensation from the organization 		nose	liste		oove	e) wl	no re	0. 1,360,571. ecceived more than \$100	0,000 of reportab	0. 0. le	200	0,8	0. 94.
compensation from the organization												Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			e, ke	y en	nplo	yee	orl	highest compensated e	mployee on		3		х
4 For any individual listed on line 1a, is the si and related organizations greater than \$15	•		-					•	the organization		4	Х	
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con	•				•		elat	ed organization or indivi	idual for services	i	5		X
Section B. Independent Contractors													
 Complete this table for your five highest co the organization. Report compensation for 	•	-								npens	ation fr	om	
(A) Name and business	address	N	INC	3				(B) Description of s	ervices	c	(C) compen		n
							į						
		<u>-</u>					_						
				<u>.</u>			\dashv						
2 Total number of independent contractors (including but r	ot li	mite	d to	tho	se li	sted	above) who received n	nore than				

Form **990** (2011)

		_		:	(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	1 a	Federated campaigns	1a					
E D	b	Membership dues	1b					
A, (С	Fundraising events	1c					
흝	ď	Related organizations	1d					
S.E	е	Government grants (contribut	ions) <u>1e 1</u>	6109505.	;			
을 위	f	All other contributions, gifts, gran			!			
듗		similar amounts not included abo	ve 1f 2,	429,724.				
4 g	g	Noncash contributions included in lines	1a-1f \$					
<u>a</u> 0	<u>h</u>	Total. Add lines 1a-1f			18539229.			
				Business Code				
je	2 a							
Program Service Revenue	ь							
E S	C							-
Ba	d							
5	e	All alban and and an aire						
_		All other program service reve	enue	•				
\dashv		Total. Add lines 2a-2f	duudoodo intoro					
	3	Investment income (including		_	292.			292.
	4	other similar amounts)			434.			494.
	5	Royalties	x-exempt bond p	Noceeds				
	3	rioyanies	(ı) Real	(iı) Personal				
	6 a	Gross rents	lyrica	(ii) i ciscinai				
	b							
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
1		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses	Ĺ					
	С	Gain or (loss)						
	d	Net gain or (loss) .						
ا و	8 a	Gross income from fundraisin	g events (not					
enne		ıncludıng \$	of					
Other Reve		contributions reported on line	1c). See					
ē		Part IV, line 18	а					
됩		Less: direct expenses	b	L				
_		Net income or (loss) from fund	•					-
	9 a	Gross income from gaming ac						
		Part IV, line 19	a	ļ				
		Less. direct expenses	b	L				
		Net income or (loss) from gan		—				
	10 a	Gross sales of inventory, less						
		and allowances	. а					
		Less: cost of goods sold	b o of muchton.					
ł	С	Net income or (loss) from sale		Dusiness Cada				
}	11 -	Miscellaneous Revenu		Business Code 900099	129,940.			129,940.
				300033	143,340.			143,340.
	b				 			
	c d	A.11 .11						+
	e e		•	<u> </u>	129,940.			-
	12	Total revenue. See instructions.			18669461.		n	. 130,232.
13200	9		<u>.</u>		,			Form 990 (2011)

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 :	Check if Schedule O contains a respon		(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	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	<u>2,656,868.</u>	2,656,868.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	477,224.		477,224.	
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	2,859,940.	1,710,294.	1,149,646.	
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	257,824.	142,859.	114,965.	
9	Other employee benefits	731,170.	359,742.	371,428.	
10	Payroll taxes	93,749.		93,749.	
11	Fees for services (non-employees):				
а	Management			<u> </u>	
b	Legal	20,432.		20,432.	
С	Accounting	42,000.		42,000.	
d	Lobbying	2,750.		2,750.	
е	Professional fundraising services. See Part IV, line 17			,	
f	Investment management fees				
g	Other	352,171.		352,171.	
12	Advertising and promotion				
13	Office expenses	893,336.	731,400.	161,936.	
14	Information technology				
15	Royalties				
16	Occupancy	695,598.		695,598.	
17	Travel	1,038,589.	1,009,059.	29,530.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,772.		4,772.	
20	Interest				
21	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	76,134.		76,134.	
23	Insurance	33,478.		33,478.	
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.)				
а	SUPPORT SERVICES	5,343,755.	5,343,755.		
b	SUBCONTRACTOR REIMBURSE	1,101,614.	1,101,614.		
С	DUES AND SUBSCRIPTION	20,706.		20,706.	
d		•		*	
	All other expenses	1,831,882.	1,830,424.	1,458.	
25	Total functional expenses Add lines 1 through 24e	18,533,992.	14,886,015.	3,647,977.	
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)		İ		

Form 990 (2011)
Part X Balance Sheet

Part A	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	253,803.	1	200,217
2	Savings and temporary cash investments	2,628,582.	2	3,318,112
3	Pledges and grants receivable, net	1,591,825.	3	1,246,819
4	Accounts receivable, net	263,219.	4	155,952
5	Receivables from current and former officers, directors, trustees, key			<u> </u>
	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)		6	
5 7	Notes and loans receivable, net		7	
Assets 7 8	Inventones for sale or use		8	
1 9	Prepaid expenses and deferred charges	88,043.	9	119,280
10a	- · · · · · · · · · · · · · · · · · · ·	00,043.	-	117,200
.00	basis Complete Part VI of Schedule D 10a 641,750.			
6	207 602	216,445.	10c	244,148
11		210,443.	11	244,140
12	Investments - publicly traded securities Investments - other securities. See Part IV, line 11		12	
13	Investments are great added Cos Dort IV Inv. 44		13	·-·
14	taken ble seed		14	
15	Other assets See Part IV line 11	198,538.	15	217,538
16	Total assets. Add lines 1 through 15 (must equal line 34)	5,240,455.	16	5,502,066
17		623,692.	17	382,922
18		023,032.	18	302,722
19	Deferred revenue	2,297,002.	19	2,596,494
20	The command the state of the latest states and the latest states are states as the states are states are states as the states are states a	2,251,002.	20	2,330,434
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Clabilities 21 22 22 22 22 22 22 22 22 22 22 22 22	Payables to current and former officers, directors, trustees, key employees,			
	highest compensated employees, and disqualified persons. Complete Part II			
دّ	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 (including federal income tax, payables to related third	# * * · · · · · · · · · · · · · · · · · ·		
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schodulo D	387,374.	25	454,794
26	Total liabilities. Add lines 17 through 25	3,308,068.	26	3,434,210
	Organizations that follow SFAS 117, check here X and complete	3/300/0001	20	3,131,210
S	lines 27 through 29, and lines 33 and 34.			
Net Assets or Fund Balances 22 8 8 2 9 3 1 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Unrestricted net assets	1,932,387.	27	2,067,856
<u>8</u> 28	Temporarily restricted net assets	2/302/30/1	28	270017030
0 29	Permanently restricted net assets	· · · · · · · · · · · · · · · · · · ·	29	
5	Organizations that do not follow SFAS 117, check here			
<u> </u>	complete lines 30 through 34.			
ह्य 30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund	_	31	
32 32	Retained earnings, endowment, accumulated income, or other funds	-	32	
ž 33	Total and popular and halomans	1,932,387.	33	2,067,856
34	Total liabilities and net assets/fund balances	5,240,455.	34	5,502,066
		J,430,3J)		Form 990 (2011

Form 990 (2011)

Form	990 (2011) CNFA	52-14	47902	Pa	qe 12
Pa	rt 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	18,66	9,4	61.
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,53	3,9	92.
3	Revenue less expenses. Subtract line 2 from line 1	3	13	5,4	69.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,93	2,3	87.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
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	2,06	7,8	56.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		-		\mathbf{x}
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?					X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.	was within a de		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				!
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		. 3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	X	<u> </u>
			Form	990 ((2011)

SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

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

Internal Revenue Service **Employer identification number** Name of the organization 52-1447902 CNFA 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) 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). 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. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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), 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 d Type III - Other b ____ Type II c ____ Type III - Functionally integrated 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) If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s). (iii) Type of (vi) Is the organization in col. (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization in col. (i) listed in your organization in col. organization (i) organized in the support (described on lines 1-9 aovernina document? (i) of your support? above or IRC section (see instructions)) Yes Yes Yes

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12

Schedule A (Form 990 or 990 EZ) 2011 CNFA 52-1447902 Page 2 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.)

Sec	ction A. Public Support	·					
Cale	ndar 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 received. (Do not				<u> </u>		
	include any "unusual grants.")	20638866.	25449073.	36086648.	21270555.	18539229.	121984371
2	Tax revenues levied for the organ-						
	ızation'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	20638866.	25449073.	36086648.	21270555.	18539229.	121984371
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						i
	supported organization) included						i
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4						121984371
Sec	ction B. Total Support		r	1		r · · · · · · · · · · · · · · · · · · 	,
	ndar year (or fiscal year beginning in) 🕨		(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	20638866.	<u>25449073.</u>	36086648.	21270555.	<u> 18539229.</u>	121984371
8	Gross income from interest,						
	dividends, payments received on						
	secunties loans, rents, royalties						
	and income from similar sources	92,591.	82,203.	8,690.	2,295.	292.	186,071.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	•						
	or loss from the sale of capital	C1 F10	25 464	20 100	162 011	100 040	410 006
	assets (Explain in Part IV.)	61,519.	35,464.	20,192.	163,811.		410,926.
	Total support. Add lines 7 through 10		<u> </u>				122581368
12	•		•			12	61,961.
13		•	s first, second, thii	ra, τουrtn, or τιπτη τ	ax year as a sectio	n 501(c)(3)	
Sec	organization, check this box and stoction C. Computation of Pub		rcentage			·	
	Public support percentage for 2011			column (fl)		14	99.51 %
	Public support percentage from 2019		• •		• •••	15	99.48 %
	33 1/3% support test - 2011. If the			n line 13, and line	14 is 33 1/3% or n	<u> </u>	
	stop here. The organization qualifies	-				.,	> X
b	33 1/3% support test - 2010. If the		•	• •	d line 15 is 33 1/3%	or more, check t	
	and stop here. The organization qua			•			▶□
17a	10% -facts-and-circumstances tes		· · · · · · · · · · · · · · · ·		e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fa-	_					· ·
	meets the "facts-and-circumstances"	" test. The organiza	ation qualifies as a	publicly supported	d organization	J	ightharpoons
b	10% -facts-and-circumstances tes		Ť		•	17a, and line 15 is	10% or
	more, and if the organization meets t	_					
	organization meets the "facts-and-cir				•		. ▶□
18	Private foundation. If the organization		•	•		••	ns 🕨
							or 990-EZ) 2011
							-

Schedule A (Form 990 or 990 EZ) 2011 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)

Se	ction A. Public Support						
Cale	endar 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 received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to					1	
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						·
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned 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, thu	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) organiz	zation,
	check this box and stop here	<u>. </u>					▶ □
Sec	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2011 (line 8, column (f) d	livided by line 13, o	column (f))		15	<u>%</u>
	Public support percentage from 2010					16	%
Sec	ction D. Computation of Inve	stment Incom	<u>ie Percentage</u>		F. 1		
17	Investment income percentage for 20)11 (line 10c, colur	mn (f) divided by lii	ne 13, column (f))		17	%
18	Investment income percentage from:	2010 Schedule A,	Part III, line 17			18	%
198	a 33 1/3% support tests - 2011. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organ	ızatıon	. ▶□
t	33 1/3% support tests - 2010. If the	organization did i	not check a box or	n line 14 or line 19	a, and line 16 is n	nore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The org	anization qualifies	as a publicly sup	ported organization	▶□
<u>20</u>	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	this box and see i	nstructions	▶□
1320	23 01-24-12				So	chedule A (Form 99	0 or 990-EZ) 2011

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization				Employer identification number
	CNFA				<u>52-1447902</u>
Pa	irt I-A Complete if the org	janization is exempt und	der section 501(c) or is a section 5	27 organization.
3	Provide a description of the organia Political expenditures Volunteer hours				▶ \$
Pa	rt I-B Complete if the org	janization is exempt und	der section 501(c)(3)	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	** *	> \$
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5	> \$
	If the organization incurred a section	-) for this year?		. Yes No
	Was a correction made?				L Yes L No
	of "Yes," describe in Part IV.	contration is exempt un	der costion 501/o	\ avant postion	501/5)/2)
_	art I-C Complete if the org	 	-		
	Enter the amount directly expended	, ,	•		> \$
2	Enter the amount of the filing organ exempt function activities	ization's funds contributed to o	ther organizations for s	section 527	> 0
•	Total exempt function expenditures		and on Form 1100 DOI	••	▶ \$
3	line 17b	Add lines 1 and 2. Enter here	and on Form 1120-PO	L ,	•
4	Did the filing organization file Form	1120 BOL for this year?	•	•	Yes No
5	Enter the names, addresses and er	•			
3	made payments For each organiza				
	contributions received that were pr	•			•
	political action committee (PAC) If	• •	•	•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	om (e) Amount of political
	(4) (44	(5) / 1001000	(0, 2	filing organization	
				funds. If none, ente	
					delivered to a separate political organization.
					If none, enter -0
			,		

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

Schedule C (Form 990 or 990-EZ) 2011

132041 01-27-12

LHA

14431003 712177 70406

Schedule C (Form 990 or 990-EZ) 2011 Part II-A Complete if the org	CNFA janizatio	on is exer	npt under section	on 501(c)(3) and file	52- ed Form 5768	1447902 Page 2
(election under sec			•			
			liated group (and list i	n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share	re of exces	ss lobbying (expenditures)			
B Check if the filing organiza	tion check	ed box A ar	nd "limited control" pr	ovisions apply.		
Limi	ts on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	ience nub	dic opinion (arass roots lobbying)			
b Total lobbying expenditures to infli				··	**	
c Total lobbying expenditures (add li		_	2) (aoo: .ooo)g)	•	· ···	
d Other exempt purpose expenditure		u 15,		· · · · · · ·		
e Total exempt purpose expenditure		 se 1c and 1c	 N			

f Lobbying nontaxable amount. Enter						
If the amount on line 1e, column (a) o	r (D) is:		bying nontaxable an			
Not over \$500,000			the amount on line 16			
Over \$500,000 but not over \$1,000			00 plus 15% of the ex			
Over \$1,000,000 but not over \$1,5				cess over \$1,000,000		
Over \$1,500,000 but not over \$17	,000,000		00 plus 5% of the exc	ess over \$1,500,000	-	
Over \$17,000,000		\$1,000,0	000.			
g Grassroots nontaxable amount (er	iter 25% c	of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less,	enter -0-				
i Subtract line 1f from line 1c If zero	or less, e	nter -0-				
j If there is an amount other than ze	ro on eithe	er line 1h or	line 1i, did the organi	zation file Form 4720		
reporting section 4911 tax for this	year?			·		Yes No
•		at made a s	• •	r Section 501(h) on do not have to comp es 2a through 2f on pa		
	Lob	bying Exper	nditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))			-			
(coro or ante za, coratini, ci)						-
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						1

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 CNFA 52-1447902 Page 3
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:)
local legislation, including any attempt to influence public opinion on a legislative matter	Yes	No	Amo	unt
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?	_	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?	X		2	750
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?		X		
j Total. Add lines 1c through 1			2	750
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912		,		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		,		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	1 501(c)	(5), or se	ection	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A lines 1 and 2 are answered "				e 3 is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."				e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."	No" OF	(b) Part		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members	No" OF	(b) Part		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	No" OF	(b) Part		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year	No" OF	R (b) Part		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year	No" OF	1 (b) Part		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	No" OF	1 2a 2b		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	No" OR	1 2a 2b 2c		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	No" OR	1 2a 2b 2c		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	No" OR	1 2a 2b 2c		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	No" OR	2a 2b 2c 3		e 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excest does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?	No" OR	2a 2b 2c 3		e 3, is
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexipenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part this part for any additional information.	No" OR	2a 2b 2c 3	III-A, line	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexipenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part this part for any additional information.	No" OR	2a 2b 2c 3 4 5	ne 1 Also, o	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part his part for any additional information. PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:	No" OR	2a 2b 2c 3 4 5 Part II-B, III	ne 1 Also, o	complete
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part his part for any additional information. PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES: HIRED A CONSULTANT TO CONDUCT OUTREACH, EDUCATION, AND EFFORTS ON BEHALF OF A CONSORTIUM TO GAIN CONGRESSIONA	No" OR ss litical II-A; and	2a 2b 2c 3 4 5 Part II-B, III	me 1 Also, o	complete
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part his part for any additional information. PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES: HIRED A CONSULTANT TO CONDUCT OUTREACH, EDUCATION, AND	No" OR ss litical II-A; and	2a 2b 2c 3 4 5 Part II-B, III	me 1 Also, o	complete

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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. QMB No 1545-0047
2011
Open to Public Inspection

Name of the organization

CNFA Employer identification number 52-1447902

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 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 adv	sed funds
-	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		* ** **** ** * * * * * * * * * * * * * *
_	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		. Yes No
Par		ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or o		stoncally important land area
	Protection of natural habitat	·	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti		2c
d	Number of conservation easements included in (c) acquired	• • •	ture
-	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	•
	year ▶	, , ,	
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	· · · · · · · · · · · · · · · · · · ·	•
	violations, and enforcement of the conservation easements		Yes No
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		_
8	Does each conservation easement reported on line 2(d) abo		· · · · · · · · · · · · · · · · · · ·
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	of Art, Historical Treasures, or 0	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 (A	SC 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	chibition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	nbes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue stateme	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	ublic 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 tre	easures, or other similar assets for financ	
	the following amounts required to be reported under SFAS		-
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$
	• • •		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

Sche	dule D (Form 990) 2011				52-	144790	2 Pa	ae 2
	t III Organizations Maintaining C	collections of A	t, Historical T	reasures, c				
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	e following that	t are a significant use o	f its collection	n items	
	(check all that apply)							
а	Public exhibition	d	Loan or ex	change progra	ıms			
b	Scholarly research	е	Other					
c	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further	the organization	on's exempt purpose in	Part XIV.		
5	During the year, did the organization solicit o	r receive donations	of art, historical tre	asures, or othe	er similar assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's o	collection?		Yes		No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizati	on answered '	'Yes" to Form 990, Parl	IV, line 9, or		
	reported an amount on Form 990, Pa							
	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	ons or other as	sets not included			
	on Form 990, Part X?					Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:					
						Amoun	t	
c	Beginning balance				1c	<u> </u>		
d	Additions during the year				1d			_
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?			Yes		No
b	If "Yes," explain the arrangement in Part XIV							
Par	t V Endowment Funds. Complete i	f the organization an	swered "Yes" to F	orm 990, Part	IV, line 10			
		(a) Current year	(b) Prior year	(c) Two year	s back (d) Three years t	oack (e) Four	years i	back
1a	Beginning of year balance							
þ	Contributions							
C	Net investment earnings, gains, and losses						_	
d	Grants or scholarships							
е	Other expenditures for facilities	 ::						
	and programs							
f	Administrative expenses .							
g	End of year balance							
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1g, column	(a)) held as:				
а	Board designated or quasi-endowment		%					
þ	Permanent endowment	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%						
3a	Are there endowment funds not in the posse	ssion of the organization	ation that are held	and administe	red for the organization) _		
	by:						Yes	No
	(i) unrelated organizations					3a(i)		
	(ii) related organizations					3a(ii)		
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	n Schedule R?			. 3b		
4_	Describe in Part XIV the intended uses of the							
Pai	t VI Land, Buildings, and Equipm	nent. See Form 990), Part X, line 10.					
	Description of property	(a) Cost or o	ther (b) Cos	st or other	(c) Accumulated	(d) Boo	k value	,
		basis (investr	nent) basis	s (other)	depreciation			
1a	Land							
b	Buildings							
c	Leasehold improvements		3	54,533.	230,077.	12	4,4!	56.
d	Equipment			87,217.	167,525.		9,69	
<u>e</u>	Other							
Total	Add lines 1a through 1e (Column (d) must e	oual Form 990 Part	X column (R) line	10(c))		24	4 1	18

	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan	cial State	men	<u>144/902</u> ts	Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		18,669,	161
2	Tetal company (Ferry 200 P. 4 N. cell co. (A) F. OF)	2		18,533,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3			469.
4	Net unrealized gains (losses) on investments	4			403.
5	Donated services and use of facilities	5			
-	Investment expenses				
6		6			
7	Prior period adjustments	7			
8	, , , , , , , , , , , , , , , , , , , ,	8	-		
9	Total adjustments (net) Add lines 4 through 8 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	9		125	160
10 Par	rt XII Reconciliation of Revenue per Audited Financial Statements With Rever		etur	135,	403.
1	Total revenue, gains, and other support per audited financial statements	ido poi i	1	21,041,	551
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		–	21,041,	<u> </u>
a	Net unrealized gains on investments 2a				
b		2,090.	1		
c	Recovenes of prior year grants 2c	2,050.	1		
d	Other (Describe in Part XIV.)		1		
e	Add lines 2a through 2d	_	2e	2,372,	ngn.
3	Subtract line 2e from line 1		3	18,669,	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		<u> </u>	20,000,	
a	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV)		ĺ		
c	Add lines 4a and 4b		4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	18,669,	
Pai	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses per			
1	Total expenses and losses per audited financial statements		1	20,906,	082.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities 2a 2,37	2,090.			
b	Prior year adjustments				
С	Other losses . 2c]		
d	Other (Describe in Part XIV.)				
е	Add lines 2a through 2d	_	2e	2,372,	
3	Subtract line 2e from line 1		3	18,533,	992.
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				
b	Other (Describe in Part XIV)				
С	Add lines 4a and 4b		4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	18,533,	992.
	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pa				, Part
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to pro	vide any ad	ditiona	I information	
					
				-	
				_	
			~ -		

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.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Inspection

Name of the	e organization	Employer identification number
CNFA		52-1447902
Part I	General Information on Activities Outside the United States. Complete if the organ	nization answered "Yes"

to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes No the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (a) Region (b) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, agents, and expenditures offices (by type) (e.g., fundraising, program is a program service, for and in the region services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in region in region in region PROGRAM SERVICE TO ENHANCE W/DEVELOPMENT PARTNERS AFRICA - TANZANIA AGRIBUSINESS DEVELOPMENT LAUNCH PROGRAM 526,474. IMPROVING AGRONOMIC STRENGTHENING COCOA AFRICA - GHANA PRODUCTION PRACTICES 175,191. ENHANCING PRODUCTIVITY OF PROVIDE INCREASED ACCESS SMALLHOLDER FARMERS TO AGRICULTURAL INPUTS AFRICA-MALI 512,207. INCREASING FOOD SECURITY TNHANCE TRADE IN 890,383. AFRICA-KENYA CONDITIONS FOR FARMER IVESTOCK PRODUCTS INCREASE AGRICUTLURAL REBUIDING A ROBUST NETWORK PRODUCTION, IMPROVE AFRICA-ZIMBABWE OF AGRODEALERS LIVLIHOODS 22,121. CENTRAL & SOUTH ASIA INC. SALES & JOBS OF CREATION OF RURAL INPUT - AFGHANISTAN FARMERS DISTRIB. SYS 283,350. EASTERN EUROPE & CAUCUSES - GEORGIA INCREASE PRODUCTIVITY OF PURCHASE OF AGRICULTURAL SMALLHOLDER FARMERS MACHINERIES (AMP) 1,340,355. 3 a Sub-total 113 3,750,081. b Total from continuation sheets to Part I 0. c Totals (add lines 3a

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

Schedule F (Form 990) 2011

and 3b)

3,750,081,

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 Schedule F (Form 990) 2011

Part II

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

×

(i) Method of valuation (book, FMV, appraisal, other) COMPARABLE COMPARABLE COMPARABLE COMPARABLE COMPARABLE COMPARABLE COMPARABLE COMPARABLE UOTES FROM NOTES FROM IFFERENT IFFERENT IFFERENT IFFERENT IFFERENT IFFERENT I FFERENT IFFERENT TENDORS ENDORS ENDORS TENDORS ENDORS ENDORS ENDORS FINDORS (h) Description of non-cash assistance 。 (g) Amount of o non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement DIRECT PAYMENT DIRECT PAYMENT IRECT PAYMENT IRECT PAYMENT 139,441, TO CONTRACTOR TO CONTRACTOR 12,000, TO CONTRACTOR 11,750, TO CONTRACTOR (f) Manner of 141,331, PROCUREMENT PROCUREMENT PROCUREMENT 115,475, PROCUREMENT DIRECT IRECT DIRECT IRECT 12,000. 119,985. of cash grant 696'66 (e) Amount STRENGTHENING COCOA STRENGTHENING COCOA STRENGTHENING COCOA GEORGIA: INCREASE SMALLHOLDER FARMERS GEORGIA: INCREASE SMALLHOLDER FARMERS GEORGIA: INCREASE MALLHOLDER FARMERS GEORGIA: INCREASE STRENGTHENING COCOA (d) Purpose of PRODUCTIVITY OF PRODUCTIVITY OF PRODUCTIVITY OF PRODUCTIVITY OF grant PRODUCTION RODUCTION RODUCTION RODUCTION REWLY INDEPENDENT WEWLY INDEPENDENT IEWLY INDEPENDENT WEWLY INDEPENDENT (c) Region Part II can be duplicated if additional space is needed. USSIA & THE USSIA & THE NUSSIA & THE USSIA & THE SUB-SAHARAN SUB-SAHARAN SUB-SAHARAN SUB-SAHARAN AFRICA AFRICA AFRICA FRICA STATES TATES TATES and EIN (if applicable) (b) IRS code section (a) Name of organization N

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

Enter total number of other organizations or entities

3

Schedule F (Form 990) 2011

Schedule F (Form 990)	CNFA				52-1447902	47902		Page 2
Part II Continuation of	Grants and Other	Continuation of Grants and Other Assistance to Organization	ations or Entities Outside the United States. (Schedule F (Form 990), Part II, line	United States.	(Schedule F (Form 9	90), Part II, line 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)
								3 COMPARABLE
			STRENGTHENING		DIRECT PAYMENT			QUOTES FROM
		SUB-SAHARAN	VETERINARY SERVICE		TO SERVICE			DIFFERENT
		AFRICA	PROVIDERS	613,945.	PROVIDER	0		VENDORS
								3 COMPARABLE
			STRENGTHENING		DIRECT PAYMENT			QUOTES FROM
		SUB-SAHARAN	VETERINARY SERVICE		TO SERVICE			DIFFERENT
		AFRICA	PROVIDERS	7,324.	PROVIDER	0		VENDORS
								3 COMPARABLE
			PROVISION OF		DIRECT PAYMENT	•		QUOTES FROM
			AGRICULTURAL		FOR EQUIPMENT			DIFFERENT
		SOUTH ASIA	MACHINERY	64,509.	FROM VENDOR	0		VENDORS
								3 COMPARABLE
			PROVISION OF		DIRECT PAYMENT			QUOTES FROM
			AGRICULTURAL		FOR EQUIPMENT			DIFFERENT
		SOUTH ASIA	MACHINERY	7,000.	FROM VENDOR	0.		VENDORS
								3 COMPARABLE
			PROVISION OF		DIRECT PAYMENT			QUOTES FROM
			AGRICULTURAL		FOR EQUIPMENT			DIFFERENT
		SOUTH ASIA	MACHINERY	19,687,	FROM VENDOR	0		VENDORS
				,				3 COMPARABLE
			PROVISION OF		DIRECT PAYMENT			QUOTES FROM
			AGRICULTURAL		FOR EQUIPMENT			DIFFERENT
		SOUTH ASIA	MACHINERY	20,568,	FROM VENDOR	0.		VENDORS
								3 COMPARABLE
			PROVISION OF		DIRECT PAYMENT			QUOTES FROM
			AGRICULTURAL		FOR EQUIPMENT			DIFFERENT
		SOUTH ASIA	MACHINERY	19,144.	FROM VENDOR	0		VENDORS
								3 COMPARABLE
			PROVISION OF		DIRECT PAYMENT			QUOTES FROM
			AGRICULTURAL		FOR EQUIPMENT			DIFFERENT
		SOUTH ASIA	MACHINERY	12,809,	FROM VENDOR	0		VENDORS
								3 COMPARABLE
			PROVISION OF		DIRECT PAYMENT			QUOTES FROM
			AGRICULTURAL		FOR EQUIPMENT			DIFFERENT
		SOUTH ASIA	MACHINERY	17,500.	17.500 FROM VENDOR	0		VENDORS

Page 2	•	(i) Method of valuation (book, FMV, appraisal, other)	3 COMPARABLE	QUOTES FROM	DIFFERENT	VENDORS	3 COMPARABLE	QUOTES FROM	DIFFERENT	VENDORS	3 COMPARABLE	QUOTES FROM	DIFFERENT	VENDORS	3 COMPARABLE	QUOTES FROM	DIFFERENT	VENDORS	3 COMPARABLE	QUOTES FROM	DIFFERENT	VENDORS	3 COMPARABLE	QUOTES FROM	DIFFERENT	VENDORS		
		(h) Description of non-cash assistance																•										
52-1447902	90), Part II, line 1	(g) Amount of non-cash assistance				0				0			•	0				0				0				0		
52-14	Schedule F (Form 9	(f) Manner of cash disbursement		DIRECT PAYMENT	FOR EQUIPMENT	10,133,FROM VENDOR		DIRECT PAYMENT	FOR EQUIPMENT	FROM VENDOR		DIRECT PAYMENT	FOR EQUIPMENT	206, FROM VENDOR		DIRECT PAYMENT	FOR EQUIPMENT	FROM VENDOR		DIRECT PAYMENT	FOR EQUIPMENT	FROM VENDOR		DIRECT PAYMENT	FOR EQUIPMENT	29,575, FROM VENDOR		
	e United States. ((e) Amount of cash grant		Ω	<u>Ft</u>	10,133,F		Δ.	<u> </u>	27,214,F			<u> </u>	31,206,			<u> </u>	13,907,			<u> </u>	10,098,		Δ.	<u> </u>	29,575,F		
	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States, (Schedule F (Form 990), Part II, line 1	(d) Purpose of grant		PROVISION OF	AGRICULTURAL	MACHINERY		PROVISION OF	AGRICULTURAL	MACHINERY		PROVISION OF	AGRICULTURAL	MACHINERY		PROVISION OF	AGRICULTURAL	MACHINERY		PROVISION OF	AGRICULTURAL	MACHINERY		PROVISION OF	AGRICULTURAL	MACHINERY		
į	ssistance to Organiz	(c) Region				SOUTH ASIA				SOUTH ASIA				SOUTH ASIA				SOUTH ASIA				SOUTH ASIA				SOUTH ASIA		
CNFA	Grants and Other	(b) IRS code section and EIN (if applicable)				J				92				J	-											¥		
Schedule F (Form 990)	Continuation of	1 (a) Name of organization														- 									-			
Schedule	Part II	1 (a) Nan																										

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02
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Page 3

CNFA 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	(book, FMV, appraisal, other)						Schedule F (Form 990) 2011
(a) Description of	non-cash assistance						Schedul
(f) Amount of	non-cash assistance						
(e) Manner of	cash disbursement						
(d) Amount of	cash grant						_
c) Number of	recipients						-
ditional space is neede	(b) Region					,	
Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance						

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

Schedule F (Form 990) 2011

Yes X No

Yes X No

Foreign Partnerships. (see Instructions for Form 8865)

for Form 5713)

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees, and The Compensated Employees

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

CNFA

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

Employer identification number 52-1447902

Pa	art 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.			ĺ
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation pnor to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		L
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			1
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a	_	X
b	Any related organization?	5b		X
	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:	İ		
а	The organization?	6a		X
b	Any related organization?	6b		X
	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		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			_
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	. 8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

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

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

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

		(B) Breakdown of W-2		and/or 1099-MISC compensation	0	Q	(E)	(F)
					Retirement and	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base	(ii) Bonus & incentive	(iii) Other	other deferred	benefits	(B)(ı)-(D)	reported as deferred
•			compensation	compensation	compensation			ın prior Form 990
	ε	430,219.	0.	0	41,000.	6,005.	477,224.	0
1 JOHN H. COSTELLO	Ξ	0	0	0		0	.0	• 0
ı	Ξ	228,32	0.	0	12,912.	15,096.	256,334.	0
2 RICK D. PIERCE	Ξ		0	0	0	0	0.	
	ε	166,49	0.	3,375.	16,428.	16,261.	202,557.	
3 PATRICK NORELL	(E)		0.	0.	0	0.		
	⊕	203,38	0.	0	20,217.	8,354.	231,957.	0
4 JACK W. SWARTWOOD	≘		0.	0.			i	0
1	€	157,77	0.	0.	15,750.	17,211.	190,731.	0
5 SYLVAIN ROY	(ii)		0.	0.	0.		0	0.
	(E)	157,763.	0.	13,239.	11,833.	19,827.	202,662.	0
6 MICHAEL C KIMES	Ξ		0	0.	0	0	0	0
	=							
7	≞							
	Ξ							
8	(1)							
	(E)							
6	(ii)							
	(i)							
10	Ξ							
	Ξ							
11	<u>(ii)</u>							
	Ξ							
12	⊞							
	Ξ							
13	Ξ							
	Ξ							
14	⊞							
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15								
	ε							
16	₿					-,		

Schedule J (Form 990) 2011

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.

2011
Open to Public Inspection

Name of the organization

Employer identification number 52-1447902

CNFA 52-1447902
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
GOAL OF KDLDP IS TO PROMOTE TRADE IN LIVESTOCK AND LIVESTOCK PRODUCTS
TO INCREASE INCOMES AND FOOD SECURITY FOR OVER 50,000 PASTORALIST
HOUSEHOLDS IN THE DISTRICTS OF GARISSA, WAJIR, MANDERA, IJARA AND TANA
RIVER.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER GOVERNMENT AND NONGOVERNMENTAL PROGRAMS
EXPENSES \$ 7,807,768. INCLUDING GRANTS OF \$ 0. REVENUE \$ 7,807,768.
FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:
AFGHANISTAN, ANGOLA, GEORGIA, GHANA,
MOLDOVA, KENYA, MOZAMBIQUE, UGANDA
FORM 990, PART VI, SECTION B, LINE 11: THE PRINCIPAL EXECUTIVE DIRECTOR
RECEIVES THE FORM 990 FROM THE INDEPENDENT PUBLIC ACCOUNTING FIRM AND
REVIEWS THE FORM 990 FOR ACCURACY AND DISCLOSURE.
FORM 990, PART VI, SECTION B, LINE 12C: IT IS THE ORGANIZATION'S ANNUAL
REQUIREMENT TO RE-SIGN ALL CONFLICT OF INTEREST STATEMENTS AS A CONDITION
OF CONTINUED EMPLOYMENT.
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE TOP MANAGEMENT
OFFICIALS ARE APPROVED BY THE BOARD. COMPARATIVE STUDY IS DONE BY THE LEGAL
COUNSEL. COMPENSATION FOR OTHER OFFICERS ARE APPROVED BY THE PRESIDENT
BASED ON COMPARATIVE STUDY OF SIMILAR POSITIONS/RESPONSIBILITIES IN SIMILAR LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011 132211 101-23-12
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Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization CNFA	Employer identification number 52-1447902
ORGANIZATIONS.	
	<u></u>
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION	ON MAKES GOVERNING
DOCUMENTS AND THE CONFLICT OF INTEREST POLICY AVAILABI	LE UPON REQUEST. THE
FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE AND	UPON REQUEST.
FORM 990, PART XII, LINE 2C	
THE AUDIT COMMITTEE ASSUMES OVERSIGHT OF AUDIT.	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	
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