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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 2012 Open to Public Inspection
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2012 calendar year, or tax year beginning 10-01-2012 , 2012, and ending 09-30-2013

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS		D Employer identification number 23-6393344
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 7 EAST BALTIMORE STREET	Room/suite	E Telephone number (443) 451-1900
	City or town, state or country, and ZIP + 4 BALTIMORE, MD 21202		G Gross receipts \$ 56,849,420
	F Name and address of principal officer STEPHAN BAUMAN 7 EAST BALTIMORE STREET BALTIMORE, MD 21202		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (Insert no) ☐ 4947(a)(1) or ☐ 527		J Website: ▶ WWW.WR.ORG	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO EMPOWER THE LOCAL CHURCH TO SERVE THE MOST VULNERABLE THE MISSION OF WORLD RELIEF, AS ORIGINATED WITHIN THE NATIONAL ASSOCIATION OF EVANGELICALS, IS TO EMPOWER THE LOCAL CHURCH TO SERVE THE MOST VULNERABLE IN COMMUNITY WITH THE LOCAL CHURCH, WORLD RELIEF ENVISIONS THE MOST VULNERABLE PEOPLE TRANSFORMED ECONOMICALLY, SOCIALLY, AND SPIRITUALLY WORLD RELIEF SEEKS TO ASSIST A CHARITABLE CLASS INTERNALLY REFERRED TO AS THE "POOREST OF THE POOR" PROPOSALS FOR PROGRAMS DESIGNED TO BENEFIT THIS GROUP ARE EVALUATED BY STAFF IN ONE OF WORLD RELIEF'S FIELD OFFICES IN THE USA OR OVERSEAS BEFORE APPROVAL OF FUNDING BY WORLD RELIEF'S MANAGEMENT THESE FIELD OFFICES ARE STAFFED WITH COMPASSIONATE INDIVIDUALS, WHO MAKE TRIPS TO THE PROPOSED SITES BEFORE AND DURING A PROJECT TO ENSURE THAT THE FUNDING IS DIRECTED TO THE QUALIFIED AND APPROVED CHARITABLE PURPOSES OF THE ORGANIZATION			
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	17	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17	
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	555	
6 Total number of volunteers (estimate if necessary)	6	0		
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0		
b Net unrelated business taxable income from Form 990-T, line 34	7b	0		
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	51,828,435	53,218,236
	9	Program service revenue (Part VIII, line 2g)	2,649,753	2,435,995
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	254,266	178,902
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	196,661	1,009,516
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	54,929,115	56,842,649
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	13,453,445	13,724,535
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	27,033,595	27,181,874
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) <u>3,098,418</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	15,490,703	15,489,076
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	55,977,743	56,395,485
	19	Revenue less expenses Subtract line 18 from line 12	-1,048,628	447,164
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	25,932,865	26,796,875
	21	Total liabilities (Part X, line 26)	6,828,849	6,283,120
	22	Net assets or fund balances Subtract line 21 from line 20	19,104,016	20,513,755

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	*****	2014-02-17
	Signature of officer	Date
	BARRY HOWARD CFO/SVP FINANCE, HR AND ADMIN	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name STACY CULLEN	Preparer's signature	Date 2014-02-17	Check ☐ if self-employed	PTIN P00974308
	Firm's name ▶ TAIT WELLER & BAKER LLP				Firm's EIN ▶ 23-1144520
	Firm's address ▶ 1818 MARKET STREET SUITE 2400 PHILADELPHIA, PA 19103				Phone no (215) 979-8800

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

Part III

Statement of Program Service Accomplishments

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

☐

1

Briefly describe the organization’s mission

TO EMPOWER THE LOCAL CHURCH TO SERVE THE MOST VULNERABLE IN COMMUNITY WITH THE LOCAL CHURCH, WORLD RELIEF ENVISIONS THE MOST VULNERABLE PEOPLE TRANSFORMED ECONOMICALLY, SOCIALLY AND SPIRITUALLY

2

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

☐ Yes ☒ No

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 ☒ 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$ 24,065,351 including grants of \$ 10,941,275) (Revenue \$ 1,281,955)
	REFUGEE ASSISTANCE - PROVIDED BASIC NEEDS AND INITIAL RESETTLEMENT SERVICES TO 6,746 REFUGEES FORCED TO FLEE PERSECUTION IN THEIR HOMELANDS OTHER EXTENDED SERVICES WERE PROVIDED TO THESE AND 5,922 OTHERS IN PARTNERSHIP WITH CHURCHES AND VOLUNTEERS, INCLUDING EXTENDED CASE MANAGEMENT, ENGLISH LANGUAGE TRAINING, EMPLOYMENT ASSISTANCE AND OTHER SOCIAL ADJUSTMENT SERVICES TOTAL BENEFICIARIES 12,668
4b	(Code) (Expenses \$ 3,855,620 including grants of \$ 694,083) (Revenue \$ 859,893)
	EMERGENCY RELIEF - WORKING WITH LOCAL CHURCHES AND PARTNERS, WORLD RELIEF RESPONDS TO DISASTERS THROUGHOUT THE WORLD, MEETING URGENT NEEDS INCLUDING RESCUE, RELIEF AND TRAUMA SUPPORT IN AREAS PRONE TO DISASTERS, WORLD RELIEF ALSO TRAINS COMMUNITIES TO PROTECT THEMSELVES FROM PERSISTENT FLOODS, DROUGHTS AND FIRES BY MAPPING OUT RISKS AND DEVELOPING SYSTEMS AND INFRASTRUCTURES TO PREVENT THE WORST EFFECTS SUDAN, SOMALIA, INDIA, DR CONGO 626,303 BENEFICIARIES IN DISASTER RISK REDUCTION, 42,759 BENEFICIARIES IN DISASTER RESPONSE
4c	(Code) (Expenses \$ 5,142,477 including grants of \$ 654,695) (Revenue \$)
	SERVICES TO IMMIGRANTS PROVIDED LEGAL ASSISTANCE AND OTHER INTEGRATION SERVICES TO IMMIGRANTS SUPPORTED CHURCH-CENTERED MINISTRIES AND CHRISTIAN NON-PROFITS PROVIDING IMMIGRATION LEGAL SERVICES IN SOME OF AMERICA'S MOST VULNERABLE COMMUNITIES, SUPPORTED INDIVIDUAL CHURCHES BY PROVIDING CONSULTATIONS FOR IMMIGRATION QUESTIONS AND DIRECTLY REPRESENTING MINISTERS FOR RELIGIOUS WORKER VISAS TOTAL BENEFICIARIES 28,388
	(Code) (Expenses \$ 14,272,298 including grants of \$ 1,434,482) (Revenue \$ 294,147)
	OTHER PROGRAM SERVICES INCLUDE AGRICULTURE WORLD RELIEF'S FINANCIAL AND AGRICULTURE PROGRAMS GIVE PEOPLE, FAMILIES AND ENTIRE COMMUNITIES A CHANCE TO OVERCOME DEPENDENCY AND ACHIEVE THEIR OWN SUCCESS, AN OPPORTUNITY TOO OFTEN DENIED TO THE WORLD'S POOREST 9,597 FARMERS IN 365 FARMER GROUPS (2,943 MEN, 4,042 WOMEN) 6,627 FARMERS AND 271 BUSINESSES GIVEN TECHNICAL AID OR TRAINING 1,017,228 TOTAL KG OF PRODUCE SENT TO MARKET, 7,455 NEW JOBS CREATED, 907 NEW HECTARES FARMED, 4,450 RECULTIVATED HECTARES AFTER DAMAGE FROM WAR, DISASTERS, ETC HAITI, BURUNDI, DR CONGO, KENYA, SOUTH SUDAN, SUDAN, MALAWI, MOZAMBIQUE, INDONESIA ANTI-TRAFFICKING CHURCH AND CARE GROUP MEMBERS, LOCAL LEADERS, TEENS AND CHILDREN ARE EDUCATED AND EQUIPPED WITH PREVENTION MESSAGES WHICH THEY CAN PASS ALONG TO OTHERS THROUGH MENTORSHIP, IN-HOME PRESENTATIONS, AND GENERAL WORD-OF-MOUTH LOCAL LEADERS ARE TRAINED ON TRAFFICKING PREVENTION, COMMUNITY PROTECTION AND SAFE MIGRATION COMPREHENSIVE SERVICES ARE ALSO PROVIDED TO SURVIVORS 2,991 PEOPLE TRAINED TO PREVENT HT, 7 HT VICTIMS ASSISTED, 1,315 NEW CHILDREN'S AND TEEN CLUBS WHERE 37,111 NEW CHILDREN AND YOUTH LEARN ABOUT TRAFFICKING & ITS PREVENTION CAMBODIA IN THE U S , WORLD RELIEF PROVIDES COMPREHENSIVE SERVICES TO SURVIVORS OF HUMAN TRAFFICKING AND THEIR FAMILY MEMBERS, AND RAISES AWARENESS IN LOCAL COMMUNITIES TO INCREASE VICTIM IDENTIFICATION AND RESCUE THIS IS DONE IN PARTNERSHIP WITH CHURCHES, LAW ENFORCEMENT, UNIVERSITIES, AND SERVICE PROVIDERS 42 SURVIVORS RECEIVED RESTORATIVE SERVICES TO SUPPORT THEIR PHYSICAL, EMOTIONAL, SOCIAL AND SPIRITUAL NEEDS 5,675 COMMUNITY MEMBERS WERE EDUCATED ABOUT TRAFFICKING IN THEIR COMMUNITY AND HOW THEY CAN BECOME INVOLVED TOTAL U S BENEFICIARIES 5,717CHILD DEVELOPMENT CHILDREN AND TEENS ARE ENGAGED IN VARIOUS PROGRAMS FOR PSYCHOLOGICAL DEVELOPMENT, CARETAKING, AND CHARACTER-BUILDING 177,597 NEW CHILDREN & TEENS IN NURSERIES AND PROGRAMS CAMBODIA, INDONESIA, MALAWI, RWANDA, KENYA, HAITIHIV/AIDS COUPLES ARE TAUGHT AND ENCOURAGED TO SHARE MESSAGES OF SENSITIVITY, INCREASING THEIR OWN WILLINGNESS TO RECEIVE TESTING AND TREATMENT YOUTH ARE REACHED WITH PREVENTION MESSAGES AND CHALLENGED TO COMMIT TO DISEASE-REDUCTION LIFESTYLE CHOICES THOSE AFFECTED AND AT RISK ARE PROVIDED COMPREHENSIVE SUPPORT THROUGH BASIC SERVICES AND COMMUNITY MOBILIZATION 79,073 TRAINED TO TEACH HIV/AIDS PREVENTION, CARE FOR THOSE LIVING WITH HIV/AIDS 32,606 YOUTH REACHED WITH PREVENTION MESSAGES 55,222 PEOPLE LIVING WITH HIV/AIDS, ORPHANS AND VULNERABLE CHILDREN, AND CAREGIVERS SUPPORTED INDIA, HAITI, BURUNDI, DR CONGO, KENYA, RWANDALOCAL PARTNER STRENGTHENING WORLD RELIEF WORKS TO STRENGTHEN THE LOCAL CHURCH AND OTHER ORGANIZATIONS TO MEET THE NEEDS OF THE POOR AND SUFFERING THROUGH LEADERSHIP DEVELOPMENT, TRAINING IN GENERAL PROJECT DEVELOPMENT AND IMPLEMENTATION, ACCOUNTING, FINANCIAL MANAGEMENT, DISASTER PREPAREDNESS AND RESPONSE, AND SPECIFIC TECHNICAL TRAINING IN SECTORIAL AREAS OF HEALTH, EDUCATION, SOCIAL SERVICE, PEACE-BUILDING AND ECONOMIC DEVELOPMENT 3,430 LOCAL CHURCHES & PARTNER ORGANIZATIONS ACTIVELY WORKING WITH WR 9,950 LOCAL CHURCH LEADERS/MEMBERS TRAINED IN WR CURRICULUM 748 LOCAL, INDIGENOUS CHURCHES INVOLVED IN PEACE BUILDING, 563 ACTIVE PEACE BUILDING AGENTS, 21 NEW PEACE COMMITTEES ESTABLISHED INDONESIA, CAMBODIA, INDIA, MOZAMBIQUE, SOUTH SUDAN, RWANDA, KENYA, DR CONGO, HAITI, BURUNDI MICROECONOMIC DEVELOPMENT WORLD RELIEF'S FINANCIAL AND AGRICULTURE PROGRAMS GIVE PEOPLE, FAMILIES AND ENTIRE COMMUNITIES A CHANCE TO OVERCOME DEPENDENCY AND ACHIEVE THEIR OWN SUCCESS, AN OPPORTUNITY TOO OFTEN DENIED TO THE WORLD'S POOREST 539,213 BORROWERS, SAVERS, AND CLIENTS INVOLVED IN MICROFINANCE PROGRAMMING 81,129 SAVINGS GROUP MEMBERS CURRENTLY TRACKED ZAMBIA, DR CONGO, BURUNDI MATERNAL & CHILD HEALTH WORLD RELIEF EQUIPS THE CHURCH TO HELP THEIR COMMUNITIES ADOPT PRACTICAL METHODOLOGIES - IN NUTRITION, HYGIENE, SANITATION, CHILD DEVELOPMENT AND DISEASE MANAGEMENT - METHODOLOGIES THAT DECREASE CHILD MORTALITY AND INCREASE POSITIVE HEALTH OUTCOMES 115,348 NEW MOTHERS AND CHILDREN REACHED 80,122 HOUSEHOLDS USING MOSQUITO NETS 38,045 VOLUNTEERS HAITI, BURUNDI, RWANDA, SOUTH SUDAN, SUDAN, MOZAMBIQUE, INDONESIA INTEGRATED PROGRAMS
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 14,272,298 including grants of \$ 1,434,482) (Revenue \$ 294,147)
4e	Total program service expenses ▶ 47,335,746

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did 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 W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	BY, CB, CH, CG, HA, IN, ID, KE, RI, MI, MZ, NU, RW, If "Yes," enter the name of the foreign country: SU See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	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.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	17	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	17	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	a The governing body?	8a	Yes
8b	b Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official	15a	Yes
15b	b Other officers or key employees of the organization	15b	No
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA , CO , DC , DE , FL , GA , IL , IN , KS , KY , MA , MD , ME , MI , MN , MT , NC , ND , NH , NJ , NM , NV , OH , OK , OR , PA , SC , TN , UT , VA , WA , WI , WV , CT , LA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	BARRY HOWARD 7 EAST BALTIMORE ST BALTIMORE, MD (443) 451-1900

Part VII

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SCOTT ARBEITER CHAIR	3 00	X		X				0	0	0
(2) JOHN GRIFFIN CPA TREASURER	3 00	X		X				0	0	0
(3) LEITH ANDERSON EX OFFICIO/DIRECTOR	1 00	X						0	0	0
(4) KATHERINE BARNHART DIRECTOR	1 00	X						0	0	0
(5) PAUL BORTHWICK DIRECTOR	1 00	X						0	0	0
(6) TIM BREENE DIRECTOR	1 00	X						0	0	0
(7) REV JOHN CHUNG SECRETARY	1 00	X		X				0	0	0
(8) DR JUDITH M DEAN DIRECTOR	1 00	X						0	0	0
(9) DR TIMOTHY EK EX OFFICIO/DIRECTOR	1 00	X						0	0	0
(10) REV DR CASELY ESSAMAUH DIRECTOR	1 00	X						0	0	0
(11) STEVE MOORE VICE CHAIR/EXECUTIVE COMMI	3 00	X						0	0	0
(12) J STEPHEN SIMMS DIRECTOR	1 00	X						0	0	0
(13) DR ROY TAYLOR EX OFFICIO/DIRECTOR	1 00	X						0	0	0
(14) TIM TRAUDT DIRECTOR	1 00	X						0	0	0
(15) KATHY VASELKIV DIRECTOR	1 00	X						0	0	0
(16) BILL WESTRATE DIRECTOR	1 00	X						0	0	0
(17) DAVID HUSBY DIRECTOR	1 00	X						0	0	0

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	595,789	0	213,279

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 5

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CGLIC BLOOMFIELD EASC 900 COTTAGE GROVE ROAD BLOOMFIELD CT 06152	CIGNA HEALTH BENEFITS	425,420
CONNECTICUT HEALTH & LIFE INS CO PO BOX 644546 PITTSBURGH PA 152644546	BENEFITS	305,064
RIDGE PRINTING CORPORATION 8900 YELLOW BRICK RD ROSEDALE MD 21237	PRINTING/MARKETING	182,731
CRYSTAL & COMPANY 3 BETHESDA METRO CTR STE 709 BETHESDA MD 20814	INSURANCE	138,586
BROTHERHOOD INS 6400 BROTHERHOOD WAY FORT WAYNE IN 46825	INSURANCE	102,602

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶5

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c				
	d	Related organizations . . . 1d				
	e	Government grants (contributions) 1e	36,401,299			
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	16,816,937			
	g	Noncash contributions included in lines 1a-1f \$	544,217			
	h	Total. Add lines 1a-1f	53,218,236			
Program Service Revenue	Business Code					
	2a	TRAVEL LOAN COMMISSION	900099	1,281,955	1,281,955	
	b	CLIENT FEES	900099	859,893	859,893	
	c	SERVICE FEES	900099	282,105	282,105	
	d	MICRO-LOAN INCOME	900099	12,042	12,042	
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	2,435,995			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	163,349			163,349
	4	Income from investment of tax-exempt bond proceeds . . .				
	5	Royalties				
	6a	(i) Real	(ii) Personal			
		57,372				
		0				
		57,372				
	d	Net rental income or (loss)	57,372			57,372
	7a	(i) Securities	(ii) Other			
			22,324			
		6,771	0			
		-6,771	22,324			
	d	Net gain or (loss)	15,553			15,553
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18				
	b	Less direct expenses				
	c	Net income or (loss) from fundraising events . . .				
	9a	Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses				
	c	Net income or (loss) from gaming activities . . .				
	10a	Gross sales of inventory, less returns and allowances				
	b	Less cost of goods sold				
	c	Net income or (loss) from sales of inventory . . .				
	Miscellaneous Revenue		Business Code			
	11a	MISCELLANEOUS	900099	952,144	952,144	
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	952,144			
	12	Total revenue. See Instructions	56,842,649	3,388,139	0	236,274

Part IX

Statement of Functional Expenses

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

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

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	1,289,055	1,289,055		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	11,067,825	11,067,825		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	1,367,655	1,367,655		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	758,708		505,744	252,964
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.	21,350,252	17,537,167	2,462,667	1,350,418
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	235,817	192,631	28,251	14,935
9	Other employee benefits.	3,470,000	2,746,136	524,404	199,460
10	Payroll taxes.	1,367,097	1,058,458	205,087	103,552
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	138,149	55,485	63,747	18,917
c	Accounting.	246,473	94,742	148,295	3,436
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,910,921	1,296,394	224,320	390,207
12	Advertising and promotion.				
13	Office expenses.	3,868,465	3,172,146	308,243	388,076
14	Information technology.	193,336	103,423	48,806	41,107
15	Royalties.				
16	Occupancy.	1,461,314	1,264,379	192,350	4,585
17	Travel.	2,219,604	1,476,054	464,059	279,491
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.				
20	Interest.	115,539		107,909	7,630
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	396,688	168,726	227,962	
23	Insurance.	305,443	77,234	228,209	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	PROGRAM COST	3,866,943	3,866,943		
b	MISCELLANEOUS	704,837	499,314	161,883	43,640
c	BAD DEBT EXPENSE	61,364	1,979	59,385	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	56,395,485	47,335,746	5,961,321	3,098,418
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).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		6,701,977	1	6,105,882
	2	Savings and temporary cash investments		51,665	2	125,414
	3	Pledges and grants receivable, net		4,464,545	3	5,719,385
	4	Accounts receivable, net		333,235	4	258,676
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		34,564	5	35,009
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		431,816	9	451,183
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a8,866,616			
	b	Less accumulated depreciation	10b5,570,040	3,364,868	10c	3,296,576
	11	Investments—publicly traded securities		115,820	11	113,714
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		8,884,618	13	9,363,748
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		1,549,757	15	1,327,288
	16	Total assets. Add lines 1 through 15 (must equal line 34)		25,932,865	16	26,796,875
Liabilities	17	Accounts payable and accrued expenses		2,818,722	17	2,720,713
	18	Grants payable			18	
	19	Deferred revenue		332,605	19	198,406
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		3,677,522	23	3,364,001
	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 Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		6,828,849	26	6,283,120
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		15,003,046	27	16,250,255
	28	Temporarily restricted net assets		4,100,970	28	4,263,500
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		19,104,016	33	20,513,755
	34	Total liabilities and net assets/fund balances		25,932,865	34	26,796,875

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	56,842,649
2	Total expenses (must equal Part IX, column (A), line 25)	2	56,395,485
3	Revenue less expenses Subtract line 2 from line 1	3	447,164
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,104,016
5	Net unrealized gains (losses) on investments	5	-6,202
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	968,777
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	20,513,755

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344
--	--

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% 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 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	49,878,050	54,452,324	50,207,794	51,828,435	53,218,236	259,584,839
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	49,878,050	54,452,324	50,207,794	51,828,435	53,218,236	259,584,839
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						259,584,839

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	49,878,050	54,452,324	50,207,794	51,828,435	53,218,236	259,584,839
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	74,365	10,641	62,669	311,019	220,721	679,415
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	268,328	112,472	382,022	138,107	952,144	1,853,073
11 Total support (Add lines 7 through 10)						262,117,327
12 Gross receipts from related activities, etc (see instructions)					12	12,894,673
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage						
14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	<table><tr><td>14</td><td>99 030 %</td></tr><tr><td>15</td><td>98 230 %</td></tr></table>	14	99 030 %	15	98 230 %
14	99 030 %					
15	98 230 %					
15	Public support percentage for 2011 Schedule A, Part II, line 14					
16a	33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐				
b	33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐				
17a	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐				
b	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐				
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	☐				

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2011 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

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

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS

Employer identification number

23-6393344

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes☐ No	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶_____

4

Number of states where property subject to conservation easement is located ▶_____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ 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 enforcing conservation easements during the year ▶\$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶\$ _____

(ii) Assets included in Form 990, Part X

▶\$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶\$ _____

b

Assets included in Form 990, Part X

▶\$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

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

3

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

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

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

5

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

☐

Yes

☐

No

Part IV

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

1a

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

☐

Yes

☐

No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐

Yes

☐

No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,325		1,325
b Buildings		2,089,467	736,123	1,353,344
c Leasehold improvements		1,347,647	630,165	717,482
d Equipment		2,205,337	2,137,687	67,650
e Other		3,222,840	2,066,065	1,156,775
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,296,576

Schedule D (Form 990) 2012

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	60,120,871
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-6,202
b	Donated services and use of facilities	2b	315,154
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	2,969,270
e	Add lines 2a through 2d	2e	3,278,222
3	Subtract line 2e from line 1	3	56,842,649
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
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	56,842,649

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	58,700,837
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	315,154
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	1,990,198
e	Add lines 2a through 2d	2e	2,305,352
3	Subtract line 2e from line 1	3	56,395,485
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	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	56,395,485

Part XIII

Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	MANAGEMENT HAS REVIEWED THE TAX POSITIONS FOR EACH OF THE OPEN TAX YEARS (YEARS ENDED SEPTEMBER 30, 2010-2012) OR EXPECTED TO BE TAKEN IN WORLD RELIEF'S SEPTEMBER 30, 2013 TAX RETURN AND HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS
PART XI, LINE 2D - OTHER ADJUSTMENTS		ELIMINATION OF MICROFINANCE ACTIVITY 1,990,198 EQUITY EARNINGS IN LLC 106,601 GAIN ON EQUITY INVESTMENT 872,471
PART XII, LINE 2D - OTHER ADJUSTMENTS		ELIMINATION OF MICROFINANCE ENTITY ACTIVITY 1,990,198

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

Employer identification number
23-6393344

Part I

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

1

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

☒ Yes

☐ No

2

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

3

Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	2	76	PROGRAM SERVICES	AIDS (ABY), OVC, MCH, CHURCH ENGAGEMENT, CONFERENCES, DISASTER RESPONSE	1,848,194
EAST ASIA AND THE PACIFIC	8	180	PROGRAM SERVICES, GRANTS TO RECIPIENTS LOCATED IN THE REGION, MICROCREDIT SERVICES	HEALTH EDUCATION, HIV AIDS, DR, AGRICULTURAL VALUE CHAIN DEVELOPMENT, MATERNAL & CHILD HEALTH, CHURCH MOBILIZATION, TEMPORARY HOUSING PROJECT, MATERNAL CHILD HEALTH, TRAFFICKING PREVENTION, MICROCREDITS	1,296,881
SOUTH ASIA	1	5	PROGRAM SERVICES	HIV/AIDS, MICROECONOMIC DEVELOPMENT	67,698
SUB-SAHARAN AFRICA	25	578	PROGRAM SERVICES, FUNDRAISING, MICROCREDIT SERVICES	REFUGEE SHELTER REHABILITATION, CHILD SURVIVOR, CHURCH MOBILIZATION, HIV&AIDS, FOOD SECURITY ACTIVITIES, HEALTH EDUCATION, MATERNAL HEALTH EDUCATION, CHILD DEVELOPMENT, MICROFINANCE - MED, SUPPORTING ORPHANS AND VULNERABLE CHILDREN AFFECTED BY HIV/AIDS DISASTER RESPONSE RELIEF LOANS TO THE ECONOMICALLY ACTIVE POOR	14,352,934
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	1	MICROCREDIT SERVICES	ASSISTING LOW INCOME CLIENTS BY PROVIDING LONG-TERM ACCESS TO QUALITY FINANCIAL SERVICES THROUGH CREDITING ENTREPRENEURSHIP, AGRICULTURE, BASIC NEEDS AND SUSTAINABLE LIVELIHOOD	
3a Sub-total	37	840			17,565,707
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	37	840			17,565,707

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								

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

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TUITION & FEES	CENTRAL AMERICA & THE CARIBBEAN	133		WIRE TRANSFER	24,058		
SPECIFIC ASSISTANCE	CENTRAL AMERICA & THE CARIBBEAN	1			12,624	UTILITIES	FMV
SPECIFIC ASSISTANCE	SUB SAHARAN AFRICA	9			1,859	INSTRUCTION MATERIALS	FMV

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes

☒ No
- 3

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

☐ Yes

☒ No
- 4

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

☐ Yes

☒ No
- 5

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

☐ Yes

☒ No
- 6

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

☐ Yes

☒ No

Supplemental Information

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

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 23-6393344
Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(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)
		EAST ASIA AND THE PACIFIC	PROVISION OF RELIEF MATERIALS TO EARTHQUAKE VICTIMS IN WEST SUMATRA	20,030	WIRE FROM HEADQUARTERS			
		SUB-SAHARAN AFRICA	TO BRING A LASTING IMPACT ON THE EDUCATION AND YOUTH OF SOUTH SUDAN THROUGH THE CONSTRUCTION OF NEW SCHOOLS, DEVELOPMENT OF TEACHING AND CURRICULUM MATERIALS, AND TRAINING OF 2400 TEACHERS AND LOCAL GOVERNMENT OFFICERS	166,946	WIRE FROM HEADQUARTERS			
		EAST ASIA AND THE PACIFIC	UTTARAKHAND CLOUD BURST AND FLOOD RELIEF TO CARRY OUT EMERGENCY RELIEF IN RUDRAPRAYAG, CHAMOLI AND UTTARAKASHI DISTRICTS DUE TO INCIDENCE OF CLOUDBURST, FLASH FLOODS AND LANDSLIDES	10,000	WIRE FROM HEADQUARTERS			
		SUB-SAHARAN AFRICA	TO TRAIN LOCAL CHURCH VOLUNTEERS IN IOTU WITH CARE GROUP MODEL IT WILL BE THE PROMOTERS OF HEALTH FACILITATION TO THE COMMUNITY THROUGH PARTNERSHIP WITH OTHER HEALTH INSTITUTION SUCH AS THE COMMUNITY HEALTH CENTER	280,103	WIRE FROM HEADQUARTERS			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(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)
		SUB-SAHARAN AFRICA	SAVING FOR LIFE WORK WITH COMMUNITY GROUP, TRAINING AGENTS, CHURCHES AND COMMUNITIES BASED ORGANIZATIONS TO IMPLEMENT SFL ACTIVITIES	50,728	WIRE FROM HEADQUARTERS			
		SUB-SAHARAN AFRICA	TO BRING A LASTING IMPACT ON THE HEALTH SYSTEM OF SOUTH SUDAN THROUGH THE TRAINING AND CAPACITY BUILDING OF LOCAL FBOS AND MEDICAL PERSONNEL	179,693	WIRE FROM HEADQUARTERS			
		EAST ASIA AND THE PACIFIC	TO TRAIN LOCAL CHURCH VOLUNTEERS WITH GROUP CARE MODEL IT WILL BE THE PROMOTERS OF HEALTH FACILITATION TO THE COMMUNITY THROUGH PARTNERSHIP WITH OTHER HEALTH INSTITUTIONS SUCH AS THE COMMUNITY HEALTH CENTER	8,275	WIRE FROM HEADQUARTERS			
		SUB-SAHARAN AFRICA	TO PROVIDE TRAINING IN AGRICULTURAL PRODUCTION	63,747	WIRE FROM HEADQUARTERS			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(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)
		SUB-SAHARAN AFRICA	TO SUPPORT AGRIBUSINESS ACTIVITY IN COLLABORATION WITH A PARTNER ENTERPRISE IN RWANDA	25,000	WIRE FROM HEADQUARTERS			
		CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT AGRIBUSINESS ACTIVITY IN HAITI	46,154	WIRE FROM HEADQUARTERS			
		CENTRAL AMERICA AND THE CARIBBEAN	INVESTMENT FOR THE DEVELOPMENT OF BUSINESS INITIATIVES BASED ON AGRICULTURAL PRODUCTION	307,610	WIRE FROM HEADQUARTERS			
		EAST ASIA AND THE PACIFIC	MOBILIZATION FOR LIFE PROTECTING PAPUA (MFLP) PROGRAM IS TO CREATE A SUSTAINABLE MOVEMENT OF LOCAL PARTNERS AND VOLUNTEERS RESPONDING TO REDUCE NEW HIV INFECTIONS AND MITIGATE THE IMPACT OF AIDS ON FAMILIES AND COMMUNITIES THE PROGRAM ALSO EQUIPS COMMUNITY VOLUNTEERS TO COUNSEL AND CARE FOR THOSE INFECTED AND AFFECTED BY HIV AND AIDS	10,924	WIRE FROM HEADQUARTERS			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(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)
		SUB-SAHARAN AFRICA	SUPPORT TO ORPHANS AND VULNERABLE CHILDREN AFFECTED BY HIV/AIDS (OVC)	9,996	WIRE FROM HEADQUARTERS			
		SUB-SAHARAN AFRICA	AGRICULTURAL DEVELOPMENT PROGRAM FOCUSING ON CASHEW FARMING	82,000	WIRE FROM HEADQUARTERS			

Schedule I (Form 990)	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990	OMB No 1545-0047
		2012
		Open to Public Inspection
Department of the Treasury Internal Revenue Service	Name of the organization WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ALBANY PARK COMMUNITY CENTER 3404 W LAWRENCE AVE SUITE 300 CHICAGO,IL 60625	36-2841886	501(C)(3)	27,106				WR-C SERVES AS THE LEAD AGENCY IN A CITIZENSHIP GRANT CALLED RICI APCC PROVIDES CITIZENSHIP CLASSES FOR THE GRANT
(2) COLLEGE OF DUPAGE 425 FAWELL BLVD GLEN ELLYN,IL 60137	36-2594972	501(C)(3)	19,486				PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
(3) EXODUS WORLD SERVICE 109 FAIRFIELD WAY 101 BLOOMINGDALE,IL 60108	36-3604920	501(C)(3)	8,760				PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
(4) THE EPISCOPAL CHURCH IN WESTERN WASHINGTON 1551 10TH AVE E SEATTLE,WA 98102	91-0200430	501(C)(3)	150,698				PROVIDES EMPLOYMENT, ENGLISH AS A SECOND LANGUAGE (ESL) SERVICES, AND SKILLS TRAINING TO REFUGEES
(5) WEST CHICAGO HIGH SCHOOL DISTRICT 94 326 JOLIET ST WEST CHICAGO,IL 60185	36-6004531	501(C)(3)	6,735				PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
(6) WORLD RELIEF MINNESOTA 1515 EAST 66TH STREET RICHFIELD,MN 55423	41-2763181	501(C)(3)	840,675				DIRECTLY FUNDED THE RESETTLEMENT AND PROCESSING OF REFUGEES
(7) CHRISTIANVILLE FOUNDATION PO BOX 24598 JACKSONVILLE,FL 32241	98-0049674	501(C)(3)	32,311				PROJECT ACTIVITIES AT THE CHRISTIANVILLE DEMONSTRATION FARM INCLUDING PRODUCTION OF VEGETABLES UNDER GREENHOUSES AND PROTECTED AGRICULTURE, AND IMPROVEMENT AND MAINTENANCE OF GOAT HERD/BARN WHILE AT THE SAME TIME TRAIN FARMERS IN NEW TECHNOLOGIES
(8) COMPASSION AND MERCY ASSOCIATES (CAMA)CHRISTIAN & MISSIONARY ALLIANCE 8595 EXPLORER DRIVE COLORADO SPRINGS,CO 809353500	84-1234511	501(C)(3)	20,000				TO PROVIDE EMERGENCY SERVICES TO IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE FIGHTING IN SYRIA
(9) EVANGELICAL FELLOWSHIP INTERNATIONAL 24 KINGS LANE C/O TIMOTHY MECH GROVE CITY,PA 16127	26-3403493	501(C)(3)	25,567				TO MOVE TOWARDS THE KINGDOM VISION OF SEEING GOD'S CHURCH MOBILIZED TO BRING HEALTH AND WHOLENESS TO THE MOST VULNERABLE, FLOW OUT OF THE PEACE BUILDING PROGRAM
(10) HDI (WHEATON COLLEGE) 501 COLLEGE AVE WHEATON,IL 60187	36-2182171	501(C)(3)	65,000				EMERGENCY & RECOVERY NEEDS FOR PEOPLE AFFECTED BY JAPAN TSUNAMI
(11) MEDICAL TEAMS INTERNATIONAL PO BOX 10 PORTLAND,OR 972070010	93-0878944	501(C)(3)	81,200				EMERGENCY & RECOVERY NEEDS OF AFFECTED POPULATIONS OF S SOMALIA
(12) WORLD RENEW 2850 KALAMAZOO SE GRAND RAPIDS,MI 49560	38-1708140	501(C)(3)	11,517				TO PROVIDE EMERGENCY SERVICES TO IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE FIGHTING IN SYRIA

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	12
3	Enter total number of other organizations listed in the line 1 table	

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WORLD RELIEF'S GRANT PROCESS INVOLVES BOTH FINANCIAL AND PROGRAMMATIC MONITORING OF GRANT FUNDS PROGRAMMATIC MONITORING IS PERFORMED BY TECHNICAL PERSONNEL WHO VISIT IMPLEMENTATION SITES AND DO MONITORING AND EVALUATION WORLD RELIEF ALSO HAS AN ESTABLISHED FINANCIAL PROCESS THAT INVOLVES AUDITING OF GRANTS AS REQUIRED BY SPECIFIC AGREEMENTS, AND THE HOME OFFICE PERFORMS MONTHLY INTERNAL ANALYSIS, REVIEW AND MONITORING OF ACTIVITIES

Software ID:

Software Version:

EIN: 23-6393344

Name: WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALBANY PARK COMMUNITY CENTER3404 W LAWRENCE AVE SUITE 300 CHICAGO,IL 60625	36-2841886	501(C)(3)	27,106				WR-C SERVES AS THE LEAD AGENCY IN A CITIZENSHIP GRANT CALLED RICI APCC PROVIDES CITIZENSHIP CLASSES FOR THE GRANT
COLLEGE OF DUPAGE425 FAWELL BLVD GLEN ELLYN,IL 60137	36-2594972	501(C)(3)	19,486				PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EXODUS WORLD SERVICE 109 FAIRFIELD WAY 101 BLOOMINGDALE,IL 60108	36-3604920	501(C)(3)	8,760				PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
THE EPISCOPAL CHURCH IN WESTERN WASHINGTON 1551 10TH AVE E SEATTLE,WA 98102	91-0200430	501(C)(3)	150,698				PROVIDES EMPLOYMENT, ENGLISH AS A SECOND LANGUAGE (ESL) SERVICES, AND SKILLS TRAINING TO REFUGEES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST CHICAGO HIGH SCHOOL DISTRICT 94326 JOLIET ST WEST CHICAGO,IL 60185	36-6004531	501(C)(3)	6,735				PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
WORLD RELIEF MINNESOTA1515 EAST 66TH STREET RICHFIELD,MN 55423	41-2763181	501(C)(3)	840,675				DIRECTLY FUNDED THE RESETTLEMENT AND PROCESSING OF REFUGEES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTIANVILLE FOUNDATIONPO BOX 24598 JACKSONVILLE,FL 32241	98-0049674	501(C)(3)	32,311				PROJECT ACTIVITIES AT THE CHRISTIANVILLE DEMONSTRATION FARM INCLUDING PRODUCTION OF VEGETABLES UNDER GREENHOUSES AND PROTECTED AGRICULTURE, AND IMPROVEMENT AND MAINTENANCE OF GOAT HERD/BARN WHILE AT THE SAME TIME TRAIN FARMERS IN NEW TECHNOLOGIES
COMPASSION AND MERCY ASSOCIATES (CAMA) CHRISTIAN & MISSIONARY ALLIANCE8595 EXPLORER DRIVE COLORADO SPRINGS,CO 809353500	84-1234511	501(C)(3)	20,000				TO PROVIDE EMERGENCY SERVICES TO IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE FIGHTING IN SYRIA

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EVANGELICAL FELLOWSHIP INTERNATIONAL24 KINGS LANE C/O TIMOTHY MECH GROVE CITY,PA 16127	26-3403493	501(C)(3)	25,567				TO MOVE TOWARDS THE KINGDOM VISION OF SEEING GOD'S CHURCH MOBILIZED TO BRING HEALTH AND WHOLENESS TO THE MOST VULNERABLE, FLOW OUT OF THE PEACE BUILDING PROGRAM
HDI (WHEATON COLLEGE) 501 COLLEGE AVE WHEATON,IL 60187	36-2182171	501(C)(3)	65,000				EMERGENCY & RECOVERY NEEDS FOR PEOPLE AFFECTED BY JAPAN TSUNAMI

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDICAL TEAMS INTERNATIONALPO BOX 10 PORTLAND,OR 972070010	93-0878944	501(C)(3)	81,200				EMERGENCY & RECOVERY NEEDS OF AFFECTED POPULATIONS OF S SOMALIA
WORLD RENEW2850 KALAMAZOO SE GRAND RAPIDS,MI 49560	38-1708140	501(C)(3)	11,517				TO PROVIDE EMERGENCY SERVICES TO IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE FIGHTING IN SYRIA

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SPECIFIC ASSISTANCE TO INDIVIDUALS	3066		234,863	FMV	FOOD AND HOUSEHOLD ITEMS
SPECIFIC ASSISTANCE TO INDIVIDUALS	225		31,043	FMV	CLOTHING
SPECIFIC ASSISTANCE TO INDIVIDUALS	23	2,479			
SPECIFIC ASSISTANCE TO INDIVIDUALS	70	3,334			
SPECIFIC ASSISTANCE TO INDIVIDUALS	712		358,691	FMV	FURNITURE
SPECIFIC ASSISTANCE TO INDIVIDUALS	8877		3,087,071	FMV	HOUSING
SPECIFIC ASSISTANCE TO INDIVIDUALS	261	34,868			
SPECIFIC ASSISTANCE TO INDIVIDUALS	429	35,003			
SPECIFIC ASSISTANCE TO INDIVIDUALS	661	276,149			
SPECIFIC ASSISTANCE TO INDIVIDUALS	5924	1,377,925			
SPECIFIC ASSISTANCE TO INDIVIDUALS	1159	259,268			
SPECIFIC ASSISTANCE TO INDIVIDUALS	26	2,332			
SPECIFIC ASSISTANCE TO INDIVIDUALS	2783	291,963			
INITIAL REFUGEE GRANTS	13566	4,731,075			

Schedule J (Form 990) Department of the Treasury Internal Revenue Service	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23. ▶ Attach to Form 990. ▶ See separate instructions.	OMB No 1545-0047
		2012
		Open to Public Inspection

Name of the organization WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344
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Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☐ First-class or charter travel ☒ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3	Indicate which, if any, of the following the 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, but explain in Part III		
	☒ Compensation committee ☒ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

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

Note. The sum of columns (B)(i)-(iii) 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)STEPHAN BAUMAN CEO/PRESIDENT	(i)	119,945	0	0	12,823	78,883	211,651	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

Employer identification number

23-6393344

Part I

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2

Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958

\$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

\$

Part II

Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) DONALD GOLDEN	OFFICER	RELOCATION FROM MICHIGAN TO BALTIMORE		X	53,022	35,009		No		No	Yes	
Total						35,009						

Part III

Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

Employer identification number
23-6393344

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		444,959	FMV
6 Cars and other vehicles	X	18	38,077	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	172	12,330	FMV
20 Drugs and medical supplies	X	21	1,706	FMV
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
OFFICE				
25 Other ► (<u>SUPPLIES</u>)	X	12	1,283	FMV
26 Other ► (<u>BICYCLE</u>)	X	27	5,260	FMV
27 Other ► (<u>ELECTRONICS</u>)	X	162	23,177	FMV
HOLIDAY				
28 Other ► (<u>GIFTS</u>)	X	11	5,804	FMV
SCHOOL				
Other ► (<u>SUPPLIES</u>)	X	87	10,897	FMV
MEDIA				
Other ► (<u>PRODUCTS</u>)	X	1	200	FMV
ESL				
Other ► (<u>MATERIALS</u>)	X	5	524	FMV

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE NATIONAL ASSOCIATION OF EVANGELICALS IS THE SOLE SHAREHOLDER IN WORLD RELIEF CORPORATION
	FORM 990, PART VI, SECTION A, LINE 7B	THE CHAIRMAN OF THE BOARD OF DIRECTORS HAS TO BE APPROVED BY THE STOCKHOLDER
	FORM 990, PART VI, SECTION B, LINE 11	IT IS WORLD RELIEF'S POLICY THAT THE CORPORATION'S BOARD OF DIRECTORS ANNUALLY REVIEW IRS FORM 990 PRIOR TO ITS FILING WITH THE IRS. THE REVIEW IS ACCOMPLISHED THROUGH THE AUDIT COMMITTEE OF WORLD RELIEF'S BOARD OF DIRECTORS. UPON COMPLETION, THE APPROVED FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE AND THE ENTIRE BOARD OF DIRECTORS VIA ELECTRONIC MAIL. ADDITIONALLY, THE FORM IS POSTED TO WORLD RELIEF'S INTERNAL BOARD OF DIRECTORS SHAREPOINT SITE AT LEAST FIVE DAYS PRIOR TO FILING.
	FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS AND ALL OFFICERS OF WORLD RELIEF CORPORATION ARE REQUIRED TO ANNUALLY SIGN A STATEMENT STATING THEY HAVE READ AND INTEND TO COMPLY WITH THE BOARD-APPROVED CONFLICT OF INTEREST STATEMENT. ALL EMPLOYEES OF WORLD RELIEF ARE REQUIRED AT THEIR TIME OF HIRE TO READ AND SIGN A BOARD-APPROVED CONFLICT OF INTEREST STATEMENT.
	FORM 990, PART VI, SECTION B, LINE 15A	WORLD RELIEF ADHERES TO A BOARD-APPROVED EXECUTIVE COMPENSATION POLICY WHICH OUTLINES THE PROCESS BY WHICH COMPENSATION OF THE CEO IS REVIEWED ANNUALLY AND APPROVED BY THE BOARD.
	FORM 990, PART VI, SECTION C, LINE 19	WORLD RELIEF COMPLIES WITH ALL UNITED STATES FEDERAL AND STATE PUBLIC DISCLOSURE REQUIREMENTS WITH RESPECT TO ITS GOVERNING DOCUMENTS (ARTICLES OF INCORPORATION, BYLAWS AND IRS DETERMINATION LETTER), CONFLICT OF INTEREST POLICY AND OTHER CORPORATE POLICIES OF OUR ORGANIZATION EITHER BY POSTING THEM TO OUR CORPORATE WEBSITE OR BY FULFILLING ALL REQUESTS MADE IN PERSON OR IN WRITING OR BY SOME COMBINATION OF THESE AVENUES.
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	EQUITY EARNINGS IN LLC 106,601. LOSS ON DISCONTINUED OPERATIONS -1,218,772. GAIN ON EQUITY INVESTMENT 872,471. GAIN ON IMPAIRMENT OF DISCONTINUED OPERATIONS 1,208,477.
	FORM 990, PART XI, LINE 2C	THE BOARD OF WORLD RELIEF HAS AN AUDIT COMMITTEE WHICH MEETS REGULARLY AND REVIEWS ISSUES RELATED TO THE ANNUAL AUDIT, THE 990 AND ANY OTHER ADDITIONAL AUDITS BEING CONDUCTED IN THE ORGANIZATION. THE AUDIT COMMITTEE IS ALSO RESPONSIBLE FOR THE SELECTION OF AN INDEPENDENT AUDIT FIRM TO CONDUCT THE ANNUAL AUDIT.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

Employer identification number

23-6393344

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) WORLD RELIEF GLOBAL DEVELOPMENT LLC 7 EAST BALTIMORE STREET BALTIMORE, MD 21202 45-3236548	MICROFINANCE	DE	0	0	

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) NATIONAL ASSOCIATION OF EVANGELICALS 1023 15TH ST NW STE 500 WASHINGTON, DC 20005		DC	501(C)(3)	1			No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) IMF HEKIMA SOCIETE CIVILE GALLERIE BENEDICTION AVENUE TOURIS GOMA, PROVINCE OF NORTH CG	MICROENTERPRISE	CG		C			100 000 %		No
(2) KREDIT LTD BLDG NO 71 STREET 163 TOUL SVAY PHNOM PEHN CB	MICROENTERPRISE	CB		C			32 570 %		No
(3) TURAME COMMUNITY FINANCE SA PO BOX 7537 3673 AVENUE DE LA CR BUJUMBURA BY	MICROENTERPRISE	BY		C			62 900 %		No
(4) BESELIDHJA ZAVET MICRO FINANCE LLC RR UCK NO 18 PRISTINA RI	MICROENTERPRISE	SC		C			100 000 %		No
(5) URWEGO OPPORTUNITY BANK PLOT 1230 NYARUGENG AVENUE DE LA P KIGALI RW	MICROENTERPRISE	RW		C			17 000 %		No

Part V

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

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

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

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

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

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

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2012

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

[illegible]

Software ID:
Software Version:
EIN: 23-6393344
Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation	
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TY 2012 Itemized Other Current Liabilities Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Description	Beginning Amount	Ending Amount
KREDIT LTD		CURRENT TAX LIABILITIES	97,673	106,210
		DEFERRED REVENUE	49,598	28,345
		PROVISIONS FOR EMPLOYEE BENEFITS	136,970	208,032

TY 2012 Itemized Other Current Liabilities Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Description	Beginning Amount	Ending Amount
IMF HEKIMA SOCIETE CIVILE		OTHER LIABILITIES	838,940	805,784
		DEFERRED REVENUE	83,318	83,196

TY 2012 Itemized Other Current Liabilities Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS
EIN: 23-6393344

Corporation Name	Corporation EIN	Description	Beginning Amount	Ending Amount
TURAME COMMUNITY FINANCE SA		OTHER LIABILITIES	406,540	296,721
		DEFERRED REVENUE	66,798	0

TY 2012 Itemized Other Assets Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Assets Description	Beginning Amount	Ending Amount
KREDIT LTD		MICROENTERPRISE AND AGRICULTURAL LOANS	15,782,608	21,804,477

TY 2012 Itemized Other Assets Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Assets Description	Beginning Amount	Ending Amount
IMF HEKIMA SOCIETE CIVILE		MICROENTERPRISE AND AGRICULTURAL LOANS	1,276,748	1,373,779

TY 2012 Itemized Other Assets Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Assets Description	Beginning Amount	Ending Amount
TURAME COMMUNITY FINANCE SA		MICROENTERPRISE AND AGRICULTURAL LOANS	1,283,794	1,142,604

TY 2012 Itemized Other Assets Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Assets Description	Beginning Amount	Ending Amount
BESELIDHJA ZAVET MICRO FINANCE LLC		ASSETS OF DISCONTINUED OPERATIONS	2,275,828	1,235,671

TY 2012 Itemized Other Current Assets Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
KREDIT LTD		DEFERRED TAX ASSET	45,432	19,384

TY 2012 Itemized Other Current Assets Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
IMF HEKIMA SOCIETE CIVILE		PREPAID EXPENSES AND OTHER ASSETS	61,557	76,734

TY 2012 Itemized Other Current Assets Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
TURAME COMMUNITY FINANCE SA		PREPAID EXPENSES AND OTHER ASSETS	47,692	27,381
		OTHER RECEIVABLES	120,051	3,825

TY 2012 Other Deductions Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
PERSONNEL BENEFITS		12,959
TRAVEL		1,106
OFFICE EXPENSES		
EQUIPMENT COSTS		4,978
PERSONNEL EXPENSES		12,258
BAD DEBT		-4,540
PROFESSIONAL FEES		11,097
MISCELLENAEIOUS		4,992
CURRENCY EXCHANGE		245
VEHICLE EXPENSE		12,109
COMMUNICATIONS		3,722
PROMOTION/RECRUIT		7,506
LOAN PARTICIPANT EXPENSES		63

TY 2012 Other Deductions Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
PERSONNEL BENEFITS		38,164
TRAVEL		55,258
OFFICE EXPENSES		22,966
EQUIPMENT COSTS		10,006
PERSONNEL EXPENSES		22,026
PROFESSIONAL FEES		44,468
COMPUTER EXPENSE		7,901
BAD DEBT		-3,279
MISCELLANEOUS		105,565
VEHICLE EXPENSE		22,424
COMMUNICATIONS		23,884
PRINTING		2,928
DUES AND ASSESSMENTS		7,257
INSURANCE		583
SPECIFIC ASSISTANCE		1,859

TY 2012 Other Deductions Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
PERSONNEL BENEFITS		249,530
TRAVEL		73,925
OFFICE EXPENSES		68,544
EQUIPMENT COSTS		4,129
PERSONNEL EXPENSES		20,766
PROFESSIONAL FEES		57,777
COMPUTER EXPENSE		1,663
BAD DEBT		58,999
MISCELLANEOUS		337,659
VEHICLE EXPENSE		20,333

TY 2012 Other Deductions Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
PERSONNEL BENEFITS	34,074	44,794
TRAVEL	5,650	7,398
OFFICE EXPENSES	67,056	96,796
EQUIPMENT COSTS	80	0
PERSONNEL EXPENSES	3,644	4,787
COMPUTER EXPENSE	4,306	5,629
PROFESSIONAL FEES	539,483	709,602
CURRENCY EXCHANGE	0	-88,075
VEHICLE EXPENSE	20,333	26,753
BAD DEBT	237,861	312,456
MISCELLANEOUS	104,083	127,219

TY 2012 Itemized Other Investments Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Investments Description	Beginning Amount	Ending Amount
KREDIT LTD		EQUITY INVESTMENT	18,070	18,691

TY 2012 Itemized Other Liabilities Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Liabilities Description	Beginning Amount	Ending Amount
KREDIT LTD		MICROENTERPRISE/AG DEVELOPMENT LOANS	12,683,035	15,737,378
		CUSTOMERS' DEPOSITS	2,516,687	4,476,310

TY 2012 Itemized Other Liabilities Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Liabilities Description	Beginning Amount	Ending Amount
IMF HEKIMA SOCIETE CIVILE		MICROENTERPRISE/AG DEVELOPMENT LOANS	931,299	797,103

TY 2012 Itemized Other Liabilities Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Liabilities Description	Beginning Amount	Ending Amount
TURAME COMMUNITY FINANCE SA		MICROENTERPRISE/AG DEVELOPMENT LOANS	165,117	256,182

TY 2012 Itemized Other Liabilities Schedule

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Corporation Name	Corporation EIN	Other Liabilities Description	Beginning Amount	Ending Amount
BESELIDHJA ZAVET MICRO FINANCE LLC		LIABILITIES OF DISCONTINUED OPERATIONS	467,375	16,007

TY 2012 Other Income Statement

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount	Amount
MICROFINANCE INCOME		451,888
CONTRIBUTIONS		4,918
OTHER REVENUE		4,523

TY 2012 Other Income Statement

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount	Amount
MICROFINANCE INCOME		722,247
CONTRIBUTIONS		46
OTHER REVENUE		15,191

TY 2012 Other Income Statement

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount	Amount
MICROFINANCE INCOME		1,186,800
CONTRIBUTIONS		27,889
OTHER REVENUE		115,158

TY 2012 Other Income Statement

Name: WORLD RELIEF CORP OF NATIONAL
ASSOCIATION OF EVANGELICALS

EIN: 23-6393344

Description	Foreign Amount	Amount
MICROFINANCE INCOME	354,638	466,791