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990

Department of the

DLN: 93493129017707

OMB No 1545-0047 2015

Open to Public

**Return of Organization Exempt From Income Tax** 

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

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www IRS qov/form990

Inspection

Internal Revenue Service For the 2015 calendar year, or tax year beginning 10-01-2015 , and ending 09-30-2016 C Name of organization D Employer identification number B Check if applicable COUNTERPART INTERNATIONAL INC Address change 13-6183605 Name change Doing business as Initial return -Fınal E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite return/terminated 2345 CRYSTAL DRIVE NO 301 (571) 447-5700 Amended return City or town, state or province, country, and ZIP or foreign postal code ARLINGTON, VA  $\,$  22202  $\,$ Application pending G Gross receipts \$ 62,256,514 Name and address of principal officer **H(a)** Is this a group return for JOAN PARKER subordinates? 2345 CRYSTAL DRIVE NO 301 Νo ARLINGTON, VA 22202 H(b) Are all subordinates Tax-exempt status included? **√** 501(c)(3) 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) Website: ► WWW COUNTERPART ORG Group exemption number 🕨 L Year of formation 1965 M State of legal domicile NY ✓ Corporation Trust Association K Form of organization Part I Summary 1 Briefly describe the organization's mission or most significant activities HELPING PEOPLE BUILD BETTER LIVES AND MORE DURABLE FUTURES, COMMUNITY BY COMMUNITY Activities & Governance 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 10 Number of independent voting members of the governing body (Part VI, line 1b) 4 10 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 140 Total number of volunteers (estimate if necessary) . 6 10 Total unrelated business revenue from Part VIII, column (C), line 12 7a Ω **b** Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 64,620,661 62,087,415 8 Contributions and grants (Part VIII, line 1h) . Ravenue 2,750 161,001 Program service revenue (Part VIII, line 2g) 8,098 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 12,824 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,118 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 64,642,353 62,256,514 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 18,049,165 15,600,815 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 21,579,461 22,855,331 Expenses 5 - 10)64.194 Professional fundraising fees (Part IX, column (A), line 11e) . 16a b Total fundraising expenses (Part IX, column (D), line 25)  $\triangleright$  9,506 17 24,997,427 24,083,757 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 64,690,247 62,539,903 18 -283,389 19 Revenue less expenses Subtract line 18 from line 12 -47,894 Assets or d Balances Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) . 18,441,844 13,530,837 21 17,183,698 12,663,192 Total liabilities (Part X, line 26) . Net assets or fund balances Subtract line 21 from line 20 1,258,146 867,645 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 2017-05-09 Signature of officer Sign Here THOMAS MAGNANI CHIEF FINANCIAL OFFICER Type or print name and title Date Print/Type preparer's name Preparer's signature Check I if self-employed Paid ► GELMAN ROSENBERG & FREEDMAN Firm's EIN ▶ 52-1392008 **Preparer** Firm's address ► 4550 MONTGOMERY AVE SUITE 650N Phone no (301) 951-9090 Use Only

BETHESDA, MD 208142930

# Part III Statement of Program Service Accomplishments

<del>-</del>							
Check if Schedule O contains a response or note to any line in this Part III							. [

Briefly describe the organization's mission

FOR OVER 50 YEARS, COUNTERPART'S MISSION HAS FOCUSED ON WORKING WITH EFFECTIVE AND EMERGING LOCAL ORGANIZATIONS AND CITIZEN LEADERS WHO DELIVER IMPORTANT SERVICES TO THEIR COMMUNITIES TO HELP THEM GROW THEIR CAPABILITIES IN WAYS THAT RESULT IN SIGNIFICANT EXPANSION OF THEIR PROGRAM REACH, IMPACT, AND SUSTAINABILITY OUR MISSION STATEMENT READS. WE PARTNER WITH LOCAL ORGANIZATIONS - FORMAL AND INFORMAL BUILD INCLUSIVE, SUSTAINABLE COMMUNITIES IN WHICH THEIR PEOPLE THRIVE AROUND THE WORLD, WE ARE CURRENTLY PARTNERING WITH 1,823 LOCAL ORGANIZATIONS OF ALL TYPES THAT HAVE A SIMILAR VISION OF STRONG, VIBRANT COMMUNITIES IN 2016, COUNTERPART'S 29 PROJECTS IN GOVERNMENT AND CIVIL SOCIETY STRENGTHENING, NUTRITION AND HEALTH, AND ACCESS TO EDUCATION, AND LIVELIHOOD, ENVIRONMENTAL SUSTAINABILITY AND ECONOMIC DEVELOPMENT WERE IMPLEMENTED ACROSS 24 COUNTRIES

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

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

If "Yes," describe these changes on Schedule O 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

51,505,422 including grants of \$ 15,044,017 ) (Revenue \$ ) (Expenses \$ GOVERNMENT AND CIVIL SOCIETY STRENGTHENING DELIVERY OF FAIR AND EQUITABLE CITIZEN SERVICES REQUIRES BOTH GOVERNMENT RESPONSIVENESS AND

ACCOUNTABILITY, AS WELL AS MOTIVATED CIVIL SOCIETY ORGANIZATIONS WITH THE KNOW-HOW TO MOBILIZE CITIZENS AND EFFECTIVELY ENGAGE WITH GOVERNMENT TO PROMOTE AND SUSTAIN PROGRESS IN AFGHANISTAN, COUNTERPART - THROUGH AFGHAN CIVIC ENGAGEMENT PROGRAM (ACEP) - PROMOTES CIVIL SOCIETY AND MEDIA ENGAGEMENT TO INFLUENCE POLICY, MONITOR GOVERNMENT ACCOUNTABILITY, AND ADVOCATE FOR POLITICAL REFORM TO THAT END, COUNTERPART SUPPORTS CIVIL SOCIETY ORGANIZATIONS (CSOS) TO MONITOR GOVERNMENT ACCOUNTABILITY, AND SERVE AS ADVOCATES FOR POLITICAL REFORM THE FOCUS OF THIS YEAR WAS TO ENSURE NATION-WIDE

) (Expenses \$ 7,684,998 including grants of \$ 96,901 ) (Revenue \$

(Code ) (Expenses \$ 7,684,998 including grants of \$ 96,901) (Revenue \$ ))

NUTRITION, HEALTH AND ACCESS TO EDUCATION TRANSFORMING COMMUNITIES INTO HEALTHY AND PRODUCTIVE FOOD-SECURE VILLAGES AND ENSURING RELIABLE AND CONSISTENT ACCESS TO SAFE, AFFORDABLE, ABUNDANT AND DIVERSE SUPPLIES OF NUTRITIOUS FOOD NOTING PRODUCTIVE FOOD-SECURE VILLAGES AND ENSURING RELIABLE AND CONSISTENT ACCESS TO SAFE, AFFORDABLE, ABUNDANT AND DIVERSE SUPPLIES OF NUTRITIOUS FOOD NOTING FROM COMMUNITY AND DIVERSE SUPPLIES OF NUTRITION ONLY REDUCES SUSCEPTIBILITY OF DISEASE AND OTHER HEALTH KIRS, PARTICULARLY IN CHARGEN, THE ADDRESS AND PROVIDES OF NUTRITION ONLY REDUCES SUSCEPTIBILITY OF MAINTAINIA, COUNTERPART LINE SUSCEPTIBILITY OF MAINTAINIA, COUNTERPART LINE SUSCEPTIBILITY OF MAINTAINIA, COUNTERPART LINE COMMUNITY HEALTH WOLKERS OF THE PROCESS AND HYDROGE OF NUTRITION AND PROVIDES OF THE PROGRAM TRANSPORT AND PROVIDES OF THE PROGRAM TRANSPORT OF THE PROGR

2,726,519 including grants of \$ 459,897 ) (Revenue \$ ) (Expenses \$

OF BENEFICIARIES WERE AWARE OF HEALTHY NUTRITION PRACTICES COMPARED 20% FROM A BASELINE STUDY CARRIED OUT AT THE START OF THE PROJECT

(Code ) (Expenses \$ 2,726,519 Including grants of \$ 459,897) (Revenue \$ )

LIVELIHOOD, ENVIRONMENTAL SUSTAINABILITY AND ECONOMIC DEVELOPMENT THE BARRIERS TO SUSTAINED ECONOMIC GROWTH ARE NUMEROUS AND COMPLEX WOMEN, YOUTH, PEOPLE WITH DISABILITIES AND POPULATIONS DISPLACED BY NATURAL OR MAN-MADE DISASTERS ARE OFTEN THE MOST AFFECTED BY THESE BARRIERS AND THE LEAST ABLE TO ADDRESS THEM COUNTERPART AIMS TO ENHANCE LIVELIHOODS, JOB CREATION, AND QUALITY OF LIFE THROUGH COMMUNITY-DRIVEN ECONOMIC DEVELOPMENT PLANNING, ENHANCED PRODUCTIVITY AND PROFITABILITY OF SMALL AND MEDIUM BUSINESSES, EXPANSION OF MARKETS AND ACCESS TO FINANCING, AND ENVIRONMENTAL CONSERVATION AND RESTORATION IN THE DOMINICAN REPUBLIC, COUNTERPART LAUNCHED ITS COASTAL COMMUNITY CLIMATE RESILIENCY PROGRAM FRAMEWORK IN ORDER TO COORDINATE THREE STRATEGIC OBJECTIVES THE FIRST ENGAGES THE DOMINICAN GOVERNMENT AT A POLICY LEVEL, ENABLING AN EFFECTIVE POLICY ENVIRONMENT AND OPPORTUNITIES FOR THE PRIVATE SECTOR TO ENGAGE AND CONTRIBUTE TO SUSTAINABLE CONSERVATION EFFORTS FOR EXAMPLE, THE GOVERNMENT AND COUNTERPART ESTABLISHED A PARTNERSHIP TO CONSERVE THE COUNTRY'S VAST MANGROVE RESERVES AND PROTECT THEM FROM FUTURE LOSS THE SECOND OBJECTIVE EMPOWERS COMMUNITIES TO BUILD THEIR PROVINCE TO REDUCE THEIR CHEMICAL FERTILIZER AND PESTICIDE USE TO REDUCE NUTRIENT LOADS DOWNSTREAM FROM THEIR CANAL SYSTEM INTO MONTECRISTI NATIONAL PARK'S MANGROVE COMPLEX, AND TO DEVELOP RICE VALUE CHAINS SO THAT THEIR SUSTAINABLE PRACTICES ARE REWARDED IN A HIGH-YAULE MARKET THE THIRD OBJECTIVE CREATES OPPORTUNITIES FOR DOMINICAN YOUTH TO ENGAGE IN INQUIRY) PASSED SERVICE-LEARNING PROGRAMS TO LEARN ABOUT MARINE BIOLOGY AND CONSERVATION, THROUGH PARTNERSHIPS INITIATED WITH HIRAM COLLEGE AND THE UNIVERSITY OF MIAMI IN GUATEMALA, COUNTERPART IMPLEMENTED A FOOD FOR PROGRESS PROGRAM FUNDED BY THE U S DEPARTMENT OF AGRICULTURAL WINISTRY'S CAPACITIES TO REVIVE THE AGRICULTURAL EXTENSION SYSTEM AND PROVIDE HIGH QUALITY EXTENSION SERVICES TO SMALL HOLDER FARMERS IN ABOUT 70 COMMUNITIES THROUGH THE RURAL EXTENSION CERTIFICATE PROGRAM 28 ORGANIZATIONS RECEIVED ORGANIZATIONAL CAPACITY BUILDING GRANTS, AND 18 ORGANIZATIONS RECEIVED IN KIND GRANTS TO IMPROVE THEIR TECHNICAL AND PRODUCTIONS RESOURCES IN TOTAL, 131 CAPACITY BUILDING TRAININGS WERE DELIVERED TO FARMERS AND ORGANIZATIONS DURING THE YEAR AND MORE THAN 6,800 SMALL LOANS WERE PROVIDED TO LOCAL FARMERS FOR A TOTAL AMOUNT OF \$15,100,000 ON SEPTEMBER 28, 2016, COUNTERPART SIGNED ANOTHER AGREEMENT WITH USDA FOR IMPLEMENTATION OF THE FOOD FOR PROGRESS 2016 PROGRAM IN GUATEMALA THE PROGRAM WILL MONETIZE 31,060 MT OF SOYBEAN MEAL AND 15,740 MT OF YELLOW CORN OVER A PERIOD OF APPROXIMATELY FIVE YEARS, AND WILL FURTHER STRENGTHEN THE CAPACITIES OF THE GUATEMALAN MINISTRY OF AGRICULTURE TO EFFECTIVELY MANAGE THE RURAL EXTENSION SYSTEM, AS WELL AS INCREASE THE AGRICULTURAL PRODUCTIVITY BY ADDRESSING MARKET ACCESS CHALLENGES. THE PROGRAM WILL ALSO STRENGTHEN THE SKILLS AND TECHNICAL KNOWLEDGE OF PUBLIC AND PRIVATE SECTOR EXTENSION AGENTS AND DEVELOP THE CAPACITIES OF COFFEE PRODUCERS' GROUPS IN DECEMBER 2012, COUNTERPART WAS AWARDED FUNDING FROM THE UNITED STATES DEPARTMENT OF LABOR TO IMPLEMENT THE FOUR-YEAR REDUCING CHILD LABOR THROUGH EDUCATION AND SERVICES PROGRAM (R-CLES) IN BURKINA FASO THE GOAL OF THE R-CLES PROGRAM IS TO REDUCE THE OVERALL NUMBER OF CHILDREN ENGAGED IN EXPLOITATIVE CHILD LABOR IN THE GOLD MINES AND COTTON FIELDS OF BURKINA FASO. AN ESTIMATED 1 25 MILLION CHILDREN BETWEEN THE AGES OF 5 AND 14 (37 8%) IN BURKINA FASO WORK, MANY OF THEM IN HAZARDOUS FIELDS, WHERE CHILD AND FORCED LABOR IS PRESENT. THIS PROJECT IS FOCUSED ON PROVIDING KNOWLEDGE AND EXPERIENCE FOR IMPLEMENTING CHILD LABOR FOCUSED. AND FORCED LABOR IS PRESENT THIS PROJECT IS FOCUSED ON PROVIDING NOWLEDGE AND EXPERIENCE FOR IMPLEMENTING CHILD LABOR FOCUSED ON PROVIDING NOWLEDGE AND EXPERIENCE FOR IMPLEMENTING CHILD LABOR FOCUSED ON PROVIDING NOWLEDGE AND EXPERIENCE FOR IMPLEMENTING CHILD LABOR FOCUSED ON PROVIDING NOWLEDGE AND EXPERIENCE FOR IMPLEMENTING OF SUITABLE FOR IMPLEMENTING IN GOLD MINES AND COTTON FIELDS IN THE BOUCLE DU MOUHOUN, CASCADES, AND HAUTS-BASSINS REGIONS OF BURKINA FASO. THE PROGRAM WORKS WITH SEVEN (7) CSO PARTNERS AND EIGHT (8) GOVERNMENT MINISTRIES IN THE AREAS OF AWARENESS RAISING AND STRENGTHENING OF SOCIAL PROTECTION NETWORKS AROUND CHILD LABOR. IN ADDITION, 2,500 CHILDREN WERE SUPPORTED IN 2016 WITH FORMAL AND INFORMAL EDUCATION SUPPORT (PAYMENT OF SCHOOL FEES, EDUCATION KITS, REMEDIAL COURSES) WHILE MORE THAN 1,500 BENEFICIARY HOUSEHOLDS WERE SUPPORTED WITH LIVELIHOOD SERVICES.

See Additional Data

4d Other program services (Describe in Schedule O )

147.963) (Expenses \$ 382,737 including grants of \$ ) (Revenue \$

TRAINING (INCLUDING IMPROVED AGRICULTURAL PRACTICES, VILLAGE SAVINGS AND LOANS, AND FARMING AS A BUSINESS TRAINING)

Total program service expenses ▶ 62,299,676 4e

orm	990 (2015)			Page <b>3</b>
Par	t 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? <i>If "Yes," complete Schedule C, Part I</i>	3		N o
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			
	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	
	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
	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	<b>11</b> c		No
	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	<b>11</b> d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^7$ 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? <i>If "Yes," complete Schedule G, Part II</i>	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		

Form	990 (2015)			Page <b>4</b>
Pai	t IV Checklist of Required Schedules (continued)			<u>=</u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	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), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"	25a		No

25b

26

27

28a

28b

**28**c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Yes

Yes

Yes

Yes

Form 990 (2015)

Nο

Νo

Nο

Nο

Nο

Nο

Nο

Νo

Νo

Nο

Nο

Nο

**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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV.

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 📑 🕏 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . 💆 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Pait I

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L.

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

complete Schedule L. Part I

29

31

instructions for applicable filing thresholds, conditions, and exceptions)

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance			
		Check if Schedule O contains a response or note to any line in this Part V	<del></del>		. 🗸
1~	Entor	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   52		Yes	No
		the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 52 the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
		the organization comply with backup withholding rules for reportable payments to vendors and reportable			
Ü		ie organization comply with backup withholding rules for reportable payments to vendors and reportable ing (gambling) winnings to prize winners?	1c	Yes	
2a		the number of employees reported on Form W-3, Transmittal of Wage and			
		tatements, filed for the calendar year ending with or within the year covered s return			
b	•	east one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did th	ne organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
		s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
4a		y time during the calendar year, did the organization have an interest in, or a signature or other authority a financial account in a foreign country (such as a bank account, securities account, or other financial			
		int)?	4a	Yes	
b		AF,AJ,BG,UV,BY,CM,GT,HO,MI,MR,MZ,NG			
	T f "W o	, PP , SG , TT , YM , EC , MO , CG , DR , ZA , GY , SU , s," enter the name of the foreign country ▶RW , AM			
	See in	s," enter the name of the foreign country Pick (1977) structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
_	(FBAF	· ·	_ 1	ı	
		he organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?	5c		
<b>6</b> a	Does	the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
		ization solicit any contributions that were not tax deductible as charitable contributions?			
b		s," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
7		not tax deductible?	OD.		
	_	ne organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
u		tes provided to the payor?			.,,
b	If"Ye	s," did the organization notify the donor of the value of the goods or services provided?	7b		
c		ne organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7c		No
а		orm 8282?	70		INO
u	11 16	5, indicate the number of forms 6262 fried during the year			
e	Did th	ne organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_		
e	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		No No
		organization, during the year, pay premiums, directly of muliectly, on a personal benefit contract? organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	/1		NO
y	requir		<b>7</b> g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
		1098-C?	7h		
8		coring organizations maintaining donor advised funds.  donor advised fund maintained by the sponsoring organization have excess business holdings at any time			
	during	g the year?	8		
9a	Did th	ne sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did th	ne sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
LO		on 501(c)(7) organizations. Enter			
		tion fees and capital contributions included on Part VIII, line 12 10a			
b	Gross faciliti	receipts, included on Form 990, Part VIII, line 12, for public use of club les			
L1		on 501(c)(12) organizations. Enter			
а	Gross	Income from members or shareholders			
b		income from other sources (Do not net amounts due or paid to other sources			
	agains	st amounts due or received from them)............ <mark>11b</mark>			
L2a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b		s," enter the amount of tax-exempt interest received or accrued during the			
L3	year Section	on 501(c)(29) qualified nonprofit health insurance issuers.			
	Jecuit	on soates/ass, quantied nonprovid medicin insulance issuess.			
а		organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
		onal information the organization must report on Schedule O	13a		
b		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans			
с		the amount of reserves on hand			
L4a	Did th	ne organization receive any payments for indoor tanning services during the tax year?	14a		No
		s," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		· · · · · · · · · · · · · · · · · · ·			

orm	990 (2015)			Page <b>6</b>
Par	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, describe the circumstances, processes, or changes in Schedule O. See instructions.	or 10	b belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI			🗸
Se	ction 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 10			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			
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	Yes	
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		No
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
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R		ie Cod	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	<b>10</b> a		No
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	<b>12</b> a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12</b> c	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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?	<b>16</b> a		No
	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		
Se	ction C. Disclosure			

List the States with which a copy of this Form 990 is required to be filed

 ${\tt AL,AR,CA,CT,FL,GA,HI,IL,KS,KY,MA,MD,MI,}$  $\mathsf{MS}$  ,  $\mathsf{MN}$  ,  $\mathsf{NC}$  ,  $\mathsf{NJ}$  ,  $\mathsf{NH}$  ,  $\mathsf{NM}$  ,  $\mathsf{NY}$  ,  $\mathsf{OR}$  ,  $\mathsf{PA}$  ,  $\mathsf{RI}$  ,  $\mathsf{SC}$  ,  $\mathsf{TN}$  ,  $\mathsf{UT}$ , VA, WI, WV

- 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
- ☐ O wn website ☐ A nother's website ☐ Upon request ☐ O ther (explain in Schedule O) 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
- State the name, address, and telephone number of the person who possesses the organization's books and records ▶THOMAS MAGNANI 2345 CRYSTAL DRIVE NO 301 ARLINGTON, VA 22202 (571) 447-5700

Part VII

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 no	r any related or	ganıza	tion	com	pen	sated	lany	current officer, o	lirector, or truste	e
(A) Name and Title	(B) A verage hours per week (list any hours for related	unle	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) DEBORAH NOLAN	1 00	х		х				0	0	0
(2) RAUL HERRERA VICE CHAIR	1 00	x		×				0	0	0
(3) MARCIA SILVERMAN BOARD TREASURER (END 11/15)	1 00	х		х				0	0	0
(4) CARLOS AGUILAR BOARD TREASURER (EFF 11/15)	1 00	х		×				0	0	0
(5) LES WALLACE BOARD MEMBER (END 11/15)	1 00	х						0	0	0
(6) DAVID WICKLINE BOARD MEMBER (END 11/15)	1 00	x						0	0	0
(7) ANDREA BONIME-BLANC BOARD MEMBER (END 11/15)	1 00	х						0	0	0
(8) MARY KAREN WILLS BOARD MEMBER	1 00	x						0	0	0
(9) HILDA BAMBI ARELLANO BOARD MEMBER (START 04/16)	1 00	х						0	0	0
(10) ROLDAN TRUJILLO BOARD MEMBER (START 09/16)	1 00	х						0	0	0
(11) ERIC MEADE BOARD MEMBER	1 00	х						0	0	0
(12) BRENDA EDDY BOARD MEMBER	1 00	х						0	0	0
(13) JUDY WHITTLESEY BOARD MEMBER	1 00	х						0	0	0
(14) THOMAS LOVEJOY BOARD MEMBER	1 00	х						0	0	0
										Form <b>990</b> (2015)

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	m unle:	ore the second of the second o	han rso cer tor/t	not one n is and rus	tee)	an	(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 ompensation from the organization
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former				and related organizations
(15) JOAN PARKER	40 00			х				305,217		0	23,730
CEO & SECRETARY				^				303,217			23,730
(16) DEREK HODKEY  CHIEF OPERATIONG OFFICER	40 00			х				232,951		0	25,916
(17) THOMAS MAGNANI	40 00										
CHIEF FINANCIAL OFFICER				Х				198,522		0	20,839
(18) SIBEL BERZEG VICE PRESIDENT	40 00				х			183,640		0	13,591
(19) ANN SHIPMAN	40 00										
VICE PRESIDENT					X			160,458		0	17,888
(20) CHRISTOPHER BARNES CHIEF OF PARTY (END 11/15)	40 00					х		180,469		0	14,780
(21) SARAWATTEE REEKOYE	40 00									+	
DEPUTY CHIEF OF PARTY (END 9/15)						×		172,147		0	6,787
(22) ALEX SARDAR	40 00										
VICE PRESIDENT (END 01/16)						X		165,276		0	15,363
(23) STEVE WISMAN	40 00					x		160.051		0	7,389
CHIEF OF PARTY						^		160,051		١	7,389
(24) MICHAEL KUNZ	40 00					x		155,947		0	12,812
SR DIRECTOR								133,547		4	12,012
			•	•							
c Total from continuation sheets to Part VI	•		•	<b>&gt;</b>			1.0	14 679	0		150.005
d Total (add lines 1b and 1c)				▶			1,9	14,678	U		159,095

			163	110
3	Did the organization list any <b>former</b> 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? If "Yes," complete Schedule J for such individual	4	Yes	
	L	7	103	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	_		No

# **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

(A) Name and business address	(B) Description of services	(C) Compensation
EDINBURGH INTERNATIONAL RMC LTD (ERSM)	SECURITY SERVICES	839,501
SUITE 402 SABA TOWER 1 JUMEIRAH L DUBAI AE		
DELCOR TECH SOLUTIONS	INFORMATION TECH CONSULTING	182,484
8380 COLESVILLE RD 550 SILVER SPRING, MD 20910		
LANGER RESEARCH ASSOCIATES LLC	PROGRAM IMPLEMENTATION SVCS	146,300
140W 74TH STREET 1E NEW YORK, NY 10023		
YOUSEEF ABDEL KHALICK, VILLA D35 MOON VALLEY CMPND 90 5TH SET , CAIRO EG	PROGRAM IMPLEMENTATION SVCS	137,745
KFORCE INC	TEMPORARY STAFFING SERVICES	119,278
PO BOX 277997 ATLANTA, GA 30384		

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 8

Form 99	0 (20	915)				Page <b>S</b>
Part V	1111	Statement of Revenue				
		Check if Schedule O contains a response or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र र	1a	Federated campaigns 1a				
rant	ь	Membership dues 1b				
A G	С	Fundraising events 1c				
Siffs lar,	d	Related organizations 1d				
ii.	e	Government grants (contributions) 1e 58,851,729				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and 1f 3,235,686 similar amounts not included above				
ig #	g	Noncash contributions included in lines 2 652 241				
ontr nd (		1a-1f \$	62,087,415			
ة ت	"	<b>P</b>	02,007,113			
돌	2a	CONTRACTS Business Code 900099	160,501	160,501		
ξ. Α.	b	FEES FOR SERVICE 900099	500	500		
<b>≅</b>	c					
e Ķ	d					
Program Service Revenue	e					
ogra	f	All other program service revenue				
Ĕ	g	Total. Add lines 2a-2f	161,001			
	3	Investment income (including dividends, interest, and other similar amounts)	8,098			8,098
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	(I) Real (II) Personal Gross rents				
	b	Less rental expenses				
	C	Rental income or (loss)				
	d	Net rental income or (loss) ▶  (i) Securities (ii) Other				
	7a	Gross amount from sales of assets other than inventory				
	ь	Less cost or other basis and sales expenses				
	C	Gain or (loss)				
	d 8a	Net gain or (loss)				
Other Revenue		events (not including  \$ of contributions reported on line 1c)				
r Re		See Part IV, line 18 a				
)the	ь	Less direct expenses <b>b</b>				
O		Net income or (loss) from fundraising events ▶				
	9a	Gross income from gaming activities See Part IV, line 19				
	ь	Less direct expenses b				
	С	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances .				
	ь	Less cost of goods sold b				
	l	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a					
	b					
	C	All other revenue				
	d e	All other revenue				
	12	<b>7</b> .1.1				
	**	<b>Total revenue.</b> See Instructions ▶	62,256,514	161.001	0	8.098

# 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	Section 50:	1(c)(3)	and 501(c)(4	) organizations	must comple	te all columns	All other or	aanızatıons	must comi	plete column	(A)
--	-------------	---------	--------------	-----------------	-------------	----------------	--------------	-------------	-----------	--------------	-----

	✓	cins raicix			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	11,039,907	11,039,907		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	4,560,908	4,560,908		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,174,223		1,174,223	
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	19,260,076	15,061,384	4,198,353	339
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	472,192	392,774	79,409	9
9	Other employee benefits	1,050,621	804,153	246,450	18
10	Payroll taxes				
		898,219	665,093	233,111	15
11	Fees for services (non-employees)				
а	Management				
Ь	Legal	176,413	110,093	66,320	
С	Accounting	132,968	23,711	109,257	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	1,041		1,041	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	9,650,928	8,897,860	747,068	6,000
12	Advertising and promotion	50,922	29,774	21,148	
13	Office expenses	807,513	648,999	158,514	
14	Information technology	785,620	204,570	581,050	
15	Royalties				_
16	Occupancy	1,951,803	1,177,357	774,446	
17	Travel	2,235,818	2,077,449	158,264	105
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	426,066	300,278	125,788	
20	Interest	6,135		6,135	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	177,477		177,477	
23	Insurance	343,984	87,490	256,494	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	INDIRECT COSTS	0	9,233,862	-9,235,924	2,062
b	DONATED GOODS	2,652,241	2,650,309	1,932	
c	TRAINING	2,036,622	2,018,269	18,353	
d	EQUIPMENT	1,087,374	979,277	108,097	
e	All other expenses	1,560,832	1,336,159	223,715	958
25	Total functional expenses. Add lines 1 through 24e	62,539,903	62,299,676	230,721	9,506
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)				

Day	7 7 C	Polones Cheek					rage <b>LL</b>
Par	t X	Balance Sheet Check if Schedule O contains a response or note to any lin	e in this	S Part X			
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing			1,261,135	1	550,289
	2	Savings and temporary cash investments			8,053,607	2	6,288,594
	3	Pledges and grants receivable, net			2,529,884	3	3,763,381
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former offic					
		key employees, and highest compensated employees Co Schedule L	omplete	Part II of			
sts	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(contributing employers and sponsoring organizations of soluntary employees' beneficiary organizations (see institute of Schedule L	c)(3)(B section	), and 501(c)(9)		5	
Assets						6	
Ä	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			426,227	9	423,501
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,772,454			
	ь	Less accumulated depreciation	10b	1,342,116	607,785	<b>10</b> c	430,338
	11	Investments—publicly traded securities			57,956	11	56,276
	12	Investments—other securities See Part IV, line 11 $$ .				12	
	13	Investments—program-related See Part IV, line 11 .				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			5,505,250	15	2,018,458
	16	Total assets.Add lines 1 through 15 (must equal line 34)			18,441,844	16	13,530,837
	17	Accounts payable and accrued expenses			5,215,073	17	4,238,884
	18	Grants payable			1,022,153	18	1,428,515
	19	Deferred revenue			2,474,902	19	453,997
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV o	f Sched	ule D		21	
bilities	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and dis					
豆		persons Complete Part II of Schedule L				22	
Lia	23	Secured mortgages and notes payable to unrelated third	parties		82,674	23	76,495
	24	Unsecured notes and loans payable to unrelated third pai	rties .			24	
	25	Other liabilities (including federal income tax, payables t and other liabilities not included on lines 17-24) Complete Part X of Schedule D	o relate	d third parties,			
					8,388,896	25	6,465,301
	26	Total liabilities. Add lines 17 through 25			17,183,698	26	12,663,192
ses		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	re ▶ 「、	and complete			
ank	27	Unrestricted net assets			610,515	27	301,684
- Sa	28	Temporarily restricted net assets	• •		647,631	28	565,961
<u> </u>	29	•			047,031	29	303,301
Ē	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), che complete lines 30 through 34.	ieck nei	e ► and			
ets	30	Capital stock or trust principal, or current funds				30	
455	31	Paid-in or capital surplus, or land, building or equipment				31	
et 1	32	Retained earnings, endowment, accumulated income, or o	other fui	nds		32	
ž	33	Total net assets or fund balances			1,258,146	33	867,645
	34	Total liabilities and net assets/fund balances			18,441,844	34	13,530,837

Cash ✓ Accrual COther

Both consolidated and separate basis

Check if Schedule O contains a response or note to any line in this Part XII . . . . . . .

If the organization changed its method of accounting from a prior year or checked "Other," explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

column (B))

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

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

**b** Were the organization's financial statements audited by an independent accountant?

basis, consolidated basis, or both

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate Separate basis

✓ Consolidated basis c 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

Single Audit Act and OMB Circular A-133?

Schedule O

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b

Yes

Yes

Yes

Yes

Yes Form 990 (2015)

2a

2b

2c

3a

No

Νo

# **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 13-6183605

Name: COUNTERPART INTERNATIONAL INC

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

(Code ) (Expenses \$ 382,737 including grants of \$ ) (Revenue \$ 147,963 )
SOCIAL SECTOR ACCELERATOR PROGRAMS AND HUMANITARIAN ASSISTANCE COUNTERPART PROVIDED LOGISTICS FOR
ORGANIZATIONS AND VOLUNTEER NETWORKS' HUMANITARIAN EFFORTS ACTIVITIES UNDER THIS PROGRAM SERVICE AREA
ENDED IN FY2016

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

SCHEDULE A

(Form 990 or

990EZ)

Part I

1

2 3 Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

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

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

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

A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

2015 Open to Public

Inspection

OMB No 1545-0047

DLN: 93493129017707

13-6183605

**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of the organization COUNTERPART INTERNATIONAL INC

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

7	~	An organization that n described in <b>section 1</b>				rom a governi	mental unit or from the g	eneral public
8	$\vdash$	A community trust des				rt II )		
9	<u></u>	receipts from activitie from gross investmen	es related to it t income and e 30, 1975 S	ts exempt functions—s unrelated business ta see <b>section 509(a)(2).</b>	subject to cert xable income ( (Complete Par	ain exceptions less section 5 t III )	tributions, membership s, and (2) no more than 3 s11 tax) from businesse ion 509(a)(4).	331/3% of its support
11	<u> </u>	one or more publicly s the box in lines 11a th	upported orga irough 11d tha	inizations described in at describes the type o	section 509(a of supporting o	a)(1) or sectio rganization ar	inctions of, or to carry o in 509(a)(2) See <b>sectio</b> nd complete lines 11e, 1	<b>n 509(a)(3).</b> Check 1f, and 11g
а	Г	supported organization organization	n(s) the power t complete Pa	to regularly appoint o	r elect a major <b>B.</b>	ity of the dire	organization(s), typical ctors or trustees of the	supporting
b	Γ	management of the su must complete Part IV	pporting orgai	nization vested in the s and C.	same persons	that control o	ported organization(s), b r manage the supported	organization(s) <b>You</b>
C		supported organization	n(s) (see instr	uctions) <b>You must co</b>	mplete Part I\	/, Sections A,		,
a	ļ		ated The orga	anızatıon generally mu	st satisfy a dis	tribution requ	n with its supported org irrement and an attentiv	
e							t is a Type I, Type II, T	ype III functionally
	F	integrated, or Type III						
f	Ente	r the number of support Provide the following ii						
g		Frovide the following in	mormation ab	out the supported orga	inizacion(s)			
Nar	ne of s	(i) supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv Is the orga listed in your docum	anızatıon governing	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
					Yes	No		
						+	+	
Tota	ıl							
For F	aperw	vork Reduction Act Noti	ce, see the In	structions for Form 99	90 or 990EZ.	Cat No 1:		990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Page 2 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 (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 71,057,746 78,273,591 79,833,242 64,620,661 61,981,984 355,767,224 membership fees received (Do not include any unusual grants ) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 71,057,746 78,273,591 79,833,242 64,620,661 61,981,984 355,767,224 Total. Add lines 1 through 3 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	<b>Public support.</b> Subtract line 5 from line 4						355,767,224
S	ection B. Total Support						
(or	Calendar year fiscal year beginning in) ▶	(a)2011	<b>(b)</b> 2012	(c)2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
7	A mounts from line 4	71,057,746	78,273,591	79,833,242	64,620,661	61,981,984	355,767,224
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	98,183	27,247	8,712	14,206	8,098	156,446
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 VI)	414,635	31,800	123,347	6,118		575,900
11	<b>Total support.</b> Add lines 7 through 10						356,499,570
12	Gross receipts from related activi	ties, etc (see inst	tructions)			12	226,959
13	First five years.If the Form 990 is	for the organizati	on's first, second	, thırd, fourth, or f	fifth tax year as a	section 501(c)(3	3) organization,

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 99 790 % Public support percentage for 2014 Schedule A, Part II, line 14 15 99 760 % 16a 33 1/3% support test - 2015. 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-2014. 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 - 2015. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□

b 10%-facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Section C. Computation of Public Support Percentage

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

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

Se	ction A. Public Support						
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
•	iscal year beginning in) ▶	(-)	(-)	(0)_00	(-)	(-)	(1)
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 <b>Total.</b> Add lines 1 through 5						
6	Amounts included on lines 1, 2,						
/a	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 Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
٥	from line 6)						
Se	ction B. Total Support		•		•		•
	Calendar year						7.5.
(or f	iscal year beginning in) ▶	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
9	Amounts from line 6						
0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
b	and income from similar sources Unrelated business taxable						
U	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
L1	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						
	VI)						
L3	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
L4	First five years.If the Form 990 is	cor the organizati	n's first, second	, third, fourth, or	I fifth tax vear as a	section 501(c	)(3) organization
	check this box and <b>stop here</b>		,	,,,	,		<b>▶</b> □
Se	ction C. Computation of Pub	lic Support P	ercentage				-
15	Public support percentage for 2015			13 column (f))		45	
		•		15, column (1))		15	
L6	Public support percentage from 20		<u> </u>			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
L7	Investment income percentage for	<b>2015</b> (line 10c, c	olumn (f) dıvıded	by line 13, colun	nn (f))	17	
18	Investment income percentage from	n <b>2014</b> Schedule	A, Part III, line	17		18	
L9a	33 1/3% support tests—2015.If the				l line 15 is more t		nd line 17 is not
-	more than 33 1/3%, check this box	=					<b>▶</b> □
b	33 1/3% support tests—2014.If the					-	•
_	18 is not more than 33 1/3%, check	-					
20	Private foundation If the organizat						

## Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
	Averally of the community of community of community of community of the community of community o		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?  If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section	2		
	509(a)(1) or (2)			<u> </u>
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	<b>3</b> c		
4a	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use  Was any supported organization not organized in the United States ("foreign supported organization")?			l
	If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations			
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)$ ?  If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes			l
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in	5b		
c	the organization's organizing document? <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	J.		
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?  If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	<b>9</b> c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	<b>10</b> b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11</b> a		
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c		

Part IV	Supporting	Organizations	(continued)

		- P P		9 9		(
Section	R	Tyne	T	Supporting	Orgai	nizations

Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?  If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
Se	ection C. Type II Supporting Organizations			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?  If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	Yes	No
Se	ection D. All Type III Supporting Organizations			
	<u> </u>		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization?  If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?  If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
<u> </u>	ection E. Type III Functionally-Integrated Supporting Organizations			
1 1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see  The organization satisfied the Activities Test Complete line 2 below	instru	ictions)	
C	The organization supported a governmental entity Describe in Part VI how you supported a government ei instructions)	ntity (s	see	
2	,		Yes	No
ā	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive?  If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
Ł	Do Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in?  If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i>	3a		
t	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Suppor	ting O	rganizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tr	ust on N	ov 20,1970 <b>See inst</b>	ructions. All other
	Type III non-functionally integrated supporting organizations must complete S	ections	A through E	Г
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		, , ,
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	A verage monthly value of securities	<b>1</b> a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	<b>1</b> c		
d	Total (add lines 1a, 1b, and 1c)	<b>1</b> d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	quired)		
6 Other distributions (describe in Part VI) See instru	ictions		
· · · · · · · · · · · · · · · · · · ·	20010115		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		T	T
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015			
a			
b			
<u>c</u>			
d From 2013			
e From 2014			
f Total of lines 3a through e  g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
<b>c</b> Excess from 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
			(F 000 000 F7) /2.01 F

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**SCHEDULE D** 

# Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493129017707

Department of the Treasury Internal Revenue Service

(Form 990)

Inspection **Employer identification number** Name of the organization COUNTERPART INTERNATIONAL INC 13-6183605 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶\_ Number of states where property subject to conservation easement is located ▶\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) (B)(I) and section 170(h)(4)(B)(II)? ☐ No 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

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

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
  - 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) Revenue included on Form 990, Part VIII, line 1
  - (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

Par	t III	Organizations Maintaining (continued)	Collections of A	Art, His	storical	Trea	sures, or (	Other Simil	ar Ass	ets
3		the organization's acquisition, accition items (check all that apply)	ession, and other red	ords, c	heck any	of the	following that	are a significa	ant use o	fits
а		Public exhibition		d	┌ Lo	an or	exchange pro	grams		
b	Γ :	Scholarly research		e	□ 0 · 1	ther				
c		Preservation for future generations								
4	Provid Part X	de a description of the organization'	s collections and ex	plaın ho	w they fur	ther th	ne organizatio	n's exempt pu	rpose in	
5		g the year, did the organization soli s to be sold to raise funds rather th							☐ Yes	☐ No
Pai	rt IV				000 D-	-t T) /	l 0			5 000
		Complete if the organization a Part X, line 21.	answered "Yes" or	ı Form	990, Par	τιν,	line 9, or re	ported an a	mount c	on Form 990,
1a		organization an agent, trustee, cus led on Form 990, Part X?	todian or other inter	mediary	/ for contr	ibutio	ns or other as		┌ Yes	∏ No
b	If"	Yes," explain the arrangement in Pa	art XIII and complet	e the fo	llowing tal	ble			A mour	nt
c		inning balance					10	:		
d	_	ditions during the year					10	ı		
е		tributions during the year					16	:		
f		ling balance								
<b>2</b> a		ie organization include an amount o	n Form 990, Part X,	lıne 21,	for escro	worc	ــــــ ustodıal accou	ınt lıabılıty?	 Yes	No
ь									•	· _
	rt V	s," explain the arrangement in Part <b>Endowment Funds.</b> Comple								· · · · · · ·
- 6	ILV	Endowment Funds: Comple	(a)Current year		nor year		Two years back			e)Four years back
1a	Begir	ning of year balance	(C)Camena y Can	(-).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- (-,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(2)		,,, ,
b		ributions								
c	Net II losse	nvestment earnings, gains, and s								
d	Grant	s or scholarships								
e		r expenditures for facilities rograms								
f	• A dmi	nistrative expenses								
g	End o	of year balance								
2		te the estimated percentage of the	current vear end bal	ance (lu	ne 1a. col	umn (a	a)) held as	l		
a		designated or quasi-endowment <b>&gt;</b>				(	-,,			
b		anent endowment								
С		orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c	should equal 100%							
3a		nere endowment funds not in the pos ization by	ssession of the orgai	nızatıon	that are h	neld ar	nd administere	d for the		Yes No
	_	related organizations							3a(i)	
		lated organizations							3a(ii)	
b	If"Ye	s" on 3a(II), are the related organiz	ations listed as requ	ired on	Schedule	R?.			. 3b	
4	Desci	ribe in Part XIII the intended uses o		endown	nent funds					
Pai	rt VI	Land, Buildings, and Equip Complete if the organization a		Form C	OO Dart	TV/ li	no 112 Coo	Form 900 F	art V I	ıno 10
		Description of property	answered les to		(a) Cost or other	basıs	(b) Cost or other b	Accun	nulated	(d)Book value
					(ınvestme	nt)	(other)			
				•  -						
		gs		· · - -				020	102.525	252.255
		rold improvements		·  -			532, 1,031,		182,636 958,913	350,303 73,032
				∵ .⊢			207,		200,567	7,003

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

430,338

	O (Form 990) 2015				Page 3
Part VII	Investments—Other Securities. See Form 990, Part X, line 12.	Complete if the org	anization answered 'Ye	es' on Form S	990, Part IV, line 11b.
	<ul><li>(a) Description of security or categing (including name of security)</li></ul>	ory	<b>(b)</b> Book value		Method of valuation end-of-year market value
	al derivatives				
(2)Closely (3)O ther	r-held equity interests				
				+	
				+	
	mn (b) must equal Form 990, Part X, col (B) line 12 ,  Investments—Program Related				
	Complete if the organization answer	red 'Yes' on Form 9			
	(a) Description of investment		(b) Book value		1ethod of valuation nd-of-year market value
	mn (b) must equal Form 990, Part X, col (B) line 13 )				
Total. (Colu Part IX	Other Assets. Complete if the organize		n Form 990, Part IV, line	11d See Form	990, Part X, line 15 <b>(b)</b> Book value
Part IX (1) DEPOS	Other Assets. Complete if the organize (a) Desires	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organization (a) De	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	(b) Book value
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organize (a) Description SITS STRIBUTED COMMODITIES	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254 419,845
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organize (a) Description SITS STRIBUTED COMMODITIES	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254 419,845
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organize (a) Description SITS STRIBUTED COMMODITIES	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254 419,845
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organize (a) Description SITS STRIBUTED COMMODITIES	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254 419,845
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organize (a) Description SITS STRIBUTED COMMODITIES	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254 419,845
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organize (a) Description SITS STRIBUTED COMMODITIES	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254 419,845
Part IX (1) DEPOS (2) UNDIS	Other Assets. Complete if the organize (a) Description SITS STRIBUTED COMMODITIES	ation answered 'Yes' o	n Form 990, Part IV, line	11d See Form	<b>(b)</b> Book value 186,254 419,845
(1) DEPOS (2) UNDIS (3) SUB-R	Other Assets. Complete if the organize (a) Desirs STRIBUTED COMMODITIES ECIPIENT AND OTHER ADVANCES	ation answered 'Yes' o			(b) Book value  186,254 419,845 1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R	Other Assets. Complete if the organize  (a) Description  STRIBUTED COMMODITIES  ECIPIENT AND OTHER ADVANCES   umn (b) must equal Form 990, Part X, col (B) Interpretation  Other Liabilities. Complete if the conservations of the conservation of the	ne 15 ) organization answer			(b) Book value  186,254  419,845  1,412,359
(1) DEPOS (2) UNDIS (3) SUB-R	Other Assets. Complete if the organize  (a) Description  SITS  STRIBUTED COMMODITIES  ECIPIENT AND OTHER ADVANCES   wmn (b) must equal Form 990, Part X, col (B) Interpretation  Other Liabilities. Complete if the complete in the complete of the complete of the complete in the complete i	ation answered 'Yes' o			(b) Book value  186,254 419,845 1,412,359
(1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colt Part X  1.	Other Assets. Complete if the organize  (a) Description  STRIBUTED COMMODITIES  ECIPIENT AND OTHER ADVANCES   umn (b) must equal Form 990, Part X, col (B) Interpretation  Other Liabilities. Complete if the conservations of the conservation of the	ne 15 ) organization answer			(b) Book value  186,254 419,845 1,412,359
(1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colt Part X  1.	Other Assets. Complete if the organize  (a) Description of liability	ne 15 ) organization answer	ed 'Yes' on Form 990,		(b) Book value  186,254 419,845 1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal Inc.	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal Inc.	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal Inc.	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal Inc.	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal Inc.	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal Inc.	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal inco	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colt Part X  1.  Federal inc	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Part IX (1) DEPOS (2) UNDIS (3) SUB-R  Total. (Colo Part X  1.  Federal inco	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359
Total. (Cold Part X  1.  Federal Inc.  REFUNDA  DEFERRED	Other Assets. Complete if the organize  (a) Description of liability  Other Liabilities. Complete if the organize of the organ	ne 15 ) organization answer  (b) Book val	ed 'Yes' on Form 990,		(b) Book value  186,254  419,845  1,412,359

Schedule D (Form 990) 2015

1

2

b

d

е

c

Part XIII

information

PART X, LINE 2

3

63,821,908

1,565,394

62,256,514

62,539,903

1

2e

3

4c

-1,681 1,567,075

4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII ) 4b		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	62,256,514
Part	<b>XII</b> Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s pei	Return.
1	Total expenses and losses per audited financial statements	1	64,107,738
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments 2b	]	
c	Other losses	]	
d	Other (Describe in Part XIII )	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	1,567,835
3	Subtract line <b>2e</b> from line <b>1</b>	3	62,539,903
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )	1	

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

Explanation

DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEARS ENDED SEPTEMBER 30, 2016 AND 2015, COUNTERPART HAS DOCUMENTED

ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR

2a

2b

**2**c

2d

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments

Donated services and use of facilities Recoveries of prior year grants . . .

Other (Describe in Part XIII)

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

**Supplemental Information** 

Subtract line 2e from line 1 .

Schedule D (Form 990) 2015	Page <b>5</b>					
Part XIII Supplemental Information (continued)						
Return Reference	Explanation					

efile GRAPHIC print - DO N	OT PROCESS	As Filed Da	ta -	DLN	: 93493129017707
SCHEDULE F (Form 990)	atement of	Activities Outside the United States			OMB No 1545-0047
Department of the Treasury	if the organizatio Part IV, line ► Attach t le F (Form 990) a	2015  Open to Public Inspection			
Name of the organization COUNTERPART INTERNATIONAL	. INC			Employer ide 13-6183605	ntification number
<b>General Informat</b> Complete if the organic			he United States. orm 990, Part IV, line	14b.	
<ol> <li>For grantmakers. Does the and other assistance, the gused to award the grants of the grants of the grantmakers. Describe assistance outside the Unit Activities per Region (The following the grantmakers).</li> </ol>	grantees' eligibil or assistance? e in Part V the or ted States	ity for the grai	nts or assistance, and	the selection criteria	√ Yes  No
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	T	(e) If activity listed in (d) is program service, describe specific type of	
(1) See Add'l Data		region	regiony		
(2)					
(3)					
(4)					
(5)					
3a Sub-total b Total from continuation sheet to Part I	s 7 22				11,284,613 22,393,417
c Totals (add lines 3a and 3b)  For Paperwork Reduction Act Notice, s	29			No 50082W <b>Sch</b> e	33,678,030 edule F (Form 990) 2015

	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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
( 5)								
( 6)								
(7)								
(8)								
( 9)								
( 10)								
( 11)								
( 12)								
( 13)								
( 14)								
( 15)								
( 16)								
( 10)								
2								

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

141

U

Schedule F (Form 990) 2015 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 (b) Region (c) Number of (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of assistance recipients cash grant disbursement of non-cash valuation non-cash assistance (book, FMV, assistance appraisal, other) (1) (2) (3) (8) (9)

(4) (5) (6) (7) (10)

(11) (12) (13) (14) (15) (16)

(17) (18)

Schedule F (Form 990) 2015

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 Yes √ No (see Instructions for Form 8865) 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, do not file with Form 990)

Yes

Νo

### Part V Supplemental Information

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

#### 990 Schedule F. Supplemental Information

Return Reference	Explanation
PART I, LINE 2	IN-COUNTRY OFFICES ARE ESTABLISHED IN EACH LOCATION OF OPERATION AND STAFFED BY COUNTERPAR T PERSONNEL INCLUDING DEDICATED FINANCE STAFF FIELD FINANCIAL REPORTS ARE SUBMITTED ON A MONTHLY BASIS TO HEADQUARTERS, WHERE THEY ARE REVIEWED AND PROCESSED INTO A CENTRALIZED FI NANCIAL SYSTEM HEADQUARTERS FINANCE DEPARTMENT PROVIDES SUPPORT AND OVERSEES AND MONITORS ALL FOREIGN COUNTRY FINANCIAL TRANSACTIONS FOR ALL PROJECTS, PROVIDES UPDATED FINANCIAL R EPORTING INFORMATION TO THE FIELD AND TO DONORS, AND ENSURES THAT DONOR FUNDS ARE SPENT IN ACCORDANCE WITH DONOR REGULATIONS AND WITH COUNTERPART FINANCIAL POLICIES AND PROCEDURES FIELD AUDITS ARE PERIODICALLY CONDUCTED BY HEADQUARTERS INTERNAL AUDITOR TO ENSURE CONTIN UED COMPLIANCE WITH FINANCIAL REQUIREMENTS AND PROVIDE TRAINING WHEN REQUIRED IN ADDITION , FEDERAL AWARD AND COMPLIANCE INFORMATION IS INCORPORATED IN THE SUB-AGREEMENT (E.G., MAN DATORY STANDARD PROVISIONS, OTHER REGULATIONS, QUARTERLY FINANCIAL REPORTING REQUIREMENTS AND TEMPLATE, AUDIT REQUIREMENTS) SUBRECIPIENT ACTIVITIES ARE MONITORED BY CPI PROGRAM MA NAGERS AND THROUGH THE SUBRECIPIENT MONITORING PLAN, WHICH IS REFRESHED ANNUALLY

### **Additional Data**

EAST ASIA AND THE

PACIFIC

Software ID: Software Version:

**EIN:** 13-6183605

Name: COUNTERPART INTERNATIONAL INC

GOVERNMENT AND

CIVIL SOCIETY STRENGTHENING 1,217,245

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	4	55	PROGRAM SERVICE ACTIVITIES	LIVELIHOOD/ENVIRONMENTAL SUSTAINABILITY AND ECONOMIC DEVELOPMENT/GOVERNANCE AND CIVILSOCIETY STRENGTHENING	4,440,149
CENTRAL AMERICA AND THE CARIBBEAN	0		GRANTS TO RECIPIENTS		916,077

LOCATED IN THE

23 PROGRAM SERVICE

ACTIVITIES

REGION

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program service, for region describe specific type of agents in type) (i.e., fundraising, region service(s) in region region program services, grants to recipients located in the region) **FAST ASIA AND THE** GRANTS TO 382,912 PACIFIC RECIPIENTS LOCATED IN THE REGION 3,810,890

RECIPIENTS LOCATED

IN THE REGION

166,347

MIDDLE EAST AND NORTH AFRICA	1		ACTIVITIES	GOVERNMENT AND CIVIL SOCIETY STRENGTHENING	3
MIDDLE EAST AND	0	0	GRANTS TO		

Form 990 Schedule F Part I - Activities Outside The United States

NORTH AFRICA

(a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total (d) Activities offices in the employees or conducted in region is a program service, expenditures for describe specific type of region agents in (by type) (i.e., region service(s) in region region fundraising, program services, grants to recipients located in the region) RUSSIA AND 2 PROGRAM SERVICE GOVERNMENT AND 245,193 NEIGHBORING STATES la ctivities CIVIL SOCIETY STRENGTHENING IGRANTS TO 105,800 RUSSIA AND **NEIGHBORING STATES** RECIPIENTS LOCATED IN THE REGION 4 PROGRAM SERVICE LIVELIHOOD/ENVIRONMENTAL 532,698 SOUTH AMERICA **ACTIVITIES** SUSTAINABILITY AND IECO NO MIC DEVELOPMENT/GOVERNANCE

AND CIVILSOCIETY
STRENGTHENING

Form 990 Schedule F Part I - Activities Outside The United States

(b) Number of (e) If activity listed in (f) Total expenditures (a) Region (c) Number of (d) Activities offices in the employees or conducted in region (by (d) is a program service, for region type) (i e , fundraising, agents in describe specific type of region service(s) in region region program services, grants to recipients located in the region) SOUTH AMERICA GRANTS TO 879,738 RECIPIENTS LOCATED IN THE REGION

RECIPIENTS LOCATED IN THE REGION

,603,082

995,100

			IN THE REGION		
SOUTH ASIA	1		ACTIVITIES	GOVERNMENT AND CIVIL SOCIETY STRENGTHENING	5,
SOUTH ASIA	0	0	GRANTS TO		

Form 990 Schedule F Part I - Activities Outside The United States

0

(b) Number of (c) Number of (a) Region (d) Activities (e) If activity listed in (d) (f) Total expenditures offices in the employees or conducted in region is a program service, for region describe specific type of agents in (by type) (ie, region fundraising, program service(s) in region region services, grants to recipients located in the region) SUB-SAHARAN AFRICA 234 PROGRAM SERVICE LIVELIHOOD/ENVIRONMENTAL 13,267,865 21 ACTIVITIES SUSTAINABILITY AND **FCONOMIC** DEVELOPMENT/GOVERNANCE AND CIVILSOCIETY STRENGTHENING, NUTRITION, HEALTH AND ACCESS TO EDUCATION

1,114,934

0 GRANTS TO

REGION

RECIPIENTS LOCATED IN THE

Form 990 Schedule F Part I - Activities Outside The United States

SUB-SAHARAN AFRICA

(a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash organization and EIN(if cash grant cash disbursement (book, FMV, assistance assistance applicable) appraisal, other) 6,171 BANK PAYMENT CENTRAL AMERICA CITIZEN IAND THE **PARTICIPATION** CARIBBEAN FOR RESPONSIVE GOVERNANCE CENTRAL AMERICA CITIZEN 19,215 BANK PAYMENT AND THE PARTICIPATION

26,623 BANK PAYMENT

(I) Method of

		FOR RESPONSIVE GOVERNANCE				
	CARIBBEAN	CITIZEN PARTICIPATION FOR RESPONSIVE GOVERNANCE	24,391	BANK PAYMENT		

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

CENTRAL AMERICA CITIZEN

**PARTICIPATION** 

FOR RESPONSIVE GOVERNANCE

IAND THE

CARIBBEAN

(a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash organization and EIN(If cash grant cash disbursement (book, FMV, assistance assistance applicable) appraisal, other) CENTRAL AMERICA CITIZEN 34,937 BANK PAYMENT IAND THE **PARTICIPATION** CARIBBEAN FOR RESPONSIVE GOVERNANCE CENTRAL AMERICA CITIZEN 37,161 BANK PAYMENT AND THE **PARTICIPATION** 

(I) Method of

		GOVERNANCE				
	CENTRAL AMERICA AND THE	CITIZEN PARTICIPATION	46,978	BANK PAYMENT		
		FOR RESPONSIVE GOVERNANCE				

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

(b) IRS code

GOVERNANCE

		FOR RESPONSIVE GOVERNANCE				
	CENTRALAMERICA	CITIZEN	47,361	BANK PAYMENT		
	AND THE	PARTICIPATION				
	CARIBBEAN	FOR RESPONSIVE				

(b) IRS code (I) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(If cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) CENTRAL AMERICA CITIZEN 49.506 BANK PAYMENT IAND THE PARTICIPATION CARIBBEAN FOR RESPONSIVE GOVERNANCE CENTRAL AMERICA CITIZEN 57,262 BANK PAYMENT AND THE PARTICIPATION CARIBBEAN FOR RESPONSIVE

	COMERNANCE			i
	GOVERNANCE			1
CENTRALAMERICA	CITIZEN	128,167	BANKPAYMENT	
ANDTHE	PARTICIPATION			l
CARIBBEAN	FOR RESPONSIVE			ı
	GOVERNANCE			l

FOOD FOR

PROGRESS

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

CENTRAL AMERICA

IAND THE

CARIBBEAN

10,117 BANK PAYMENT

(b) IRS code (1) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash organization and EIN(If cash grant cash disbursement (book, FMV, assistance assistance applicable) appraisal, other) CENTRAL AMERICA FOOD FOR 7.765 BANK PAYMENT PROGRESS IAND THE CARIBBEAN CENTRAL AMERICA FOOD FOR 10.097 BANK PAYMENT ANDTHE PROGRESS CARIBBEAN CENTRAL AMERICA FOOD FOR 10,087 BANK PAYMENT AND THE PROGRESS CARIBBEAN

10,149 BANK PAYMENT

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

CENTRAL AMERICA

IAND THE

CARIBBEAN

FOOD FOR

PROGRESS

(b) IRS code (1) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash organization and EIN(If cash grant cash disbursement (book, FMV, assistance assistance applicable) appraisal, other) CENTRAL AMERICA FOOD FOR 10,137 BANK PAYMENT PROGRESS IAND THE CARIBBEAN CENTRAL AMERICA FOOD FOR 10.095 BANK PAYMENT ANDTHE PROGRESS CARIBBEAN 7,855 BANK PAYMENT CENTRAL AMERICA FOOD FOR AND THE PROGRESS CARIBBEAN

10,118 BANK PAYMENT

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

CENTRAL AMERICA

IAND THE

CARIBBEAN

FOOD FOR

PROGRESS

(a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash cash grant cash disbursement (book, FMV, organization and EIN(if assistance assistance applicable) appraisal, other) CENTRAL AMERICA IFOOD FOR 9.852 BANK PAYMENT PROGRESS IAND THE ICARIBBEAN. CENTRAL AMERICA FOOD FOR 175,413 BANK PAYMENT A NID THE Innochece

	CARIBBEAN	PROGRESS		
	CENTRALAMERICA	FOOD FOR	10,142	BANKPAYI
	ANDTHE	PROGRESS		
	CARIBBEAN			

FOOD FOR

PROGRESS

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

CENTRAL AMERICA

IAND THE

CARIBBEAN

(b) IRS code

MENT

10.131 BANK PAYMENT

(I) Method of

(b) IRS code (I) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash cash disbursement and EIN(if cash grant (book, FMV, organization assistance assistance applicable) appraisal, other) FOOD FOR 10,023 BANK PAYMENT CENTRAL AMERICA AND THE PROGRESS CARIBBEAN CENTRAL AMERICA HELP COASTAL 27,248 BANK PAYMENT IAND THE COMMUNITIES CARIBBEAN MANAGE NATURAL RESOURCES FOR SUSTAINABILITY AND IMPROVE LIVELIHOODS CENTRAL AMERICA ISTRENGTHENING 60.510 BANK PAYMENT IAND THE COASTAL CARIBBEAN RESILIENCY DR LEAST ASIA AND TO CONTRIBUTE 25.113 BANK PAYMENT THE PACIFIC TO A SUSTAINABLE AND INTEGRATED

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

IFGAL AID FRAMEWORK AND SERVICES AND IMPROVED GOVERNANCE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (I) Method of (a) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (d) Purpose of grant (c) Region cash non-cash organization and EIN(If cash grant cash disbursement (book, FMV, assistance assistance applicable) appraisal, other) 14,278 BANK PAYMENT EAST ASIA AND TO ENGAGE THE PACIFIC ACTIVE PARTICIPATION BY COMMUNITY IN ACTIVITIES THAT PROMOTE LOCAL GOVERNANCE EAST ASIA AND PRODUCE A SHORT 9.881 BANK PAYMENT THE PACIFIC FILM TO SUPPORT WITH AN OBJECTIVE TO PROMOTE INCLUSIVE PARTICIPATION OF WOMEN IN THE DEMOCRATIC PROCESSOF ELECTIONS EAST ASIA AND STRENGTHENING 142,547 BANK PAYMENT THE PACIFIC LOCAL GOVERNANCE THROUGH TRAINING OF SUCO COUNCIL MEMBERS EAST ASIA AND TO BUILD HUMAN 38,508 BANK PAYMENT THE PACIFIC AND INSTITUONAL CAPACITY TO

IMPROVE PUBLIC ACCESS TO INFORMATION IN

BAUCAU

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (I) Method of (a) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (d) Purpose of grant (c) Region non-cash cash cash grant cash disbursement organization and EIN(if (book, FMV, assistance assistance applicable) appraisal, other) EAST ASIA AND TO CONTRIBUTE 14.987 BANK PAYMENT THE PACIFIC TO A SUSTAINABLE AND INTEGRATED LEGAL AID FRAMEWORKAND SERVICES AND IMPROVED GOVERNANCE EAST ASIA AND TO CONTRIBUTE 21,621 BANK PAYMENT THE PACIFIC TO A SUSTAINABLE AND INTEGRATED LEGAL AID FRAMEWORK AND SERVICES AND IMPROVED GOVERNANCE EAST ASIA AND TO CONTRIBUTE 21,570 BANK PAYMENT THE PACIFIC TO A SUSTAINABLE AND INTEGRATED LEGAL AID FRAMEWORK AND SERVICES AND IMPROVED GOVERNANCE EAST ASIA AND TO ENGAGE 12,000 BANK PAYMENT THE PACIFIC ACTIVE PARTICIPATION BY COMMUNITY IN ACTIVITIES THAT PROMOTE LOCAL

GOVERNANCE

(b) IRS code (I) Method of (g) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (c) Region (d) Purpose of grant non-cash cash and EIN(If cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) EAST ASIA AND TO ENCOURAGE 8.203 BANK PAYMENT THE PACIFIC HUMANA'S PARTICIPATION IN IELECTION EAST ASIA AND TO CONTRIBUTE 7,329 BANK PAYMENT THE PACIFIC TO A SUSTAINABLE AND INTEGRATED LEGAL AID FRAMEWORK AND SERVICES AND IMPROVED

54,711 BANK PAYMENT

		GOVERNANCE				
	THE PACIFIC	ENCOURAGE WOMEN'S ENGAGEMENT IN THE ELECTORAL PROCESS THROUGH	6,080	BANK PAYMENT		

PERFORMANCE

CIVIL SOCIETY

INNOVATION INITIATIVE

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

EAST ASIA AND

THE PACIFIC

(a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash organization and EIN(If cash grant cash disbursement (book, FMV, assistance assistance applicable) appraisal, other) MIDDLE EAST AND CIVIL SOCIETY 17.309 BANK PAYMENT NORTH AFRICA ISTRENGTHENING PROJECT (CSSP) -IMOROCCO. MIDDLE EAST AND CIVIL SOCIETY 14,237 BANK PAYMENT

(a) A mount of non-

(i) Method of

(h) Description of

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

MIDDLE EAST AND

NORTH AFRICA

CIVIL SOCIETY

STRENGTHENING PROJECT (CSSP) -MOROCCO

(b) IRS code

NORTH AFRICA	STRENGTHENING PROJECT (CSSP) - MOROCCO				
MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	17,404	BANK PAYMENT		
	PROJECT (CSSP) - MOROCCO				

18,543 BANK PAYMENT

(a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash organization and EIN(If cash grant cash disbursement (book, FMV, assistance assistance applicable) appraisal, other) MIDDLE EAST AND CIVIL SOCIETY 12.589 BANK PAYMENT NORTH AFRICA ISTRENGTHENING PROJECT (CSSP) -IMOROCCO. MIDDLE EAST AND CIVIL SOCIETY 8,029 BANK PAYMENT

(a) A mount of non-

(i) Method of

(h) Description of

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

MIDDLE EAST AND

NORTH AFRICA

CIVIL SOCIETY

STRENGTHENING PROJECT (CSSP) -MOROCCO

(b) IRS code

NORTH AFRICA	STRENGTHENING PROJECT (CSSP) - MOROCCO				
MIDDLE EAST AN NORTH AFRICA	D CIVIL SOCIETY STRENGTHENING PROJECT (CSSP) - MOROCCO	13,510	BANK PAYMENT		

10,926 BANK PAYMENT

(a) Name of (e) A mount of (f) Manner of section valuation (d) Purpose of grant (c) Region cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) MIDDLE EAST AND CIVIL SOCIETY 17.878 BANK PAYMENT NORTH AFRICA ISTRENGTHENING PROJECT (CSSP) -IMOROCCO MIDDLE EAST AND CIVIL SOCIETY 10,135 BANK PAYMENT

17,200 BANK PAYMENT

(g) A mount of non-

(i) Method of

(h) Description of

		STRENGTHENING PROJECT (CSSP) - MOROCCO				
	MIDDLE EAST AND		7,586	BANK PAYMENT		
	NORTH AFRICA	INNOVATION				

INITIATIVE

CIVIL SOCIETY

INNOVATION INITIATIVE

(b) IRS code

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

MIDDLE EAST AND

NORTH AFRICA

(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (d) Purpose of grant (c) Region non-cash cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) RUSSIA AND THE CIVIL SOCIETY 105.800 BANK PAYMENT INEWLY INNOVATION

188,296 BANK PAYMENT

258.529 BANK PAYMENT

(a) A mount of non-

(I) Method of

	INDEPENDENT STATES	INITIATIVE				
		CIVIL SOCIETY ASSISTANCE	137,338	BANK PAYMENT		

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

SOUTH AMERICA

SOUTH AMERICA

CIVIL SOCIETY

CIVIL SOCIETY

ASSISTANCE

ASSISTANCE

(a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) ISOUTH AMERICA CIVIL SOCIETY 120.614 BANK PAYMENT INNOVATION INITIATIVE SOUTH AMERICA YOUTH AND 112,978 BANK PAYMENT

24.978 BANK PAYMENT

(a) A mount of non-

(I) Method of

(h) Description of

		CITIZEN'S PARTICIPATION				
	SOUTH AMERICA	YOUTH AND	35,080	BANKPAYMENT		
		CITIZEN'S				
I	1	DADTICIDATION	l		i	

	SOUTH AMERICA	YOUTH AND
		CITIZEN'S
		PARTICIPATION
	SOUTH AMERICA	YOUTH AND

(b) IRS code

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

CITIZEN'S **IPARTICIPATION** 

(b) IRS code (i) Method of (g) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (c) Region (d) Purpose of grant cash non-cash cash grant cash disbursement organization and EIN(if (book, FMV, assistance assistance applicable) appraisal, other) SOUTH ASIA IMPROVE LOCAL 78,784 BANK PAYMENT PARTNERSHIP AND LEADERSHIP FOR SUSTAINABLE DEVELOPMENT SOUTH ASIA IMPROVE LOCAL 70.712 BANK PAYMENT PARTNERSHIP AND LEADERSHIP FOR SUSTAINABLE DEVELOPMENT SOUTH ASIA 115,576 BANK PAYMENT IIMPROVE LOCAL PARTNERSHIPAND LEADERSHIP FOR SUSTAINABLE DEVELOPMENT

129,937 BANK PAYMENT

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

SOUTH ASIA

IMPROVE LOCAL

PARTNERSHIP AND LEADERSHIP FOR SUSTAINABLE DEVELOPMENT

(a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) ISOUTH ASIA IIMPROVE LOCAL 37.502 BANK PAYMENT PARTNERSHIP AND LEADERSHIP FOR SUSTAINABLE DEVELOPMENT SOUTH ASIA AFGHAN CIVIC 16,187 BANK PAYMENT **ENGAGEMENT** PROGRAM (ACEP)

24,290 BANK PAYMENT

16,947 BANK PAYMENT

(I) Method of

		_

(b) IRS code

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

SOUTH ASIA

SOUTH ASIA

AFGHAN CIVIC

AFGHAN CIVIC IENGAGEMENT PROGRAM (ACEP)

IENGAGEMENT PROGRAM (ACEP)

(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 24,563 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) SOUTH ASIA AFGHAN CIVIC 39,528 BANK PAYMENT

(a) A mount of non-

(1) Method of

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

ISOUTH ASIA

AFGHAN CIVIC

IENGAGEMENT PROGRAM (ACEP)

(b) IRS code

	E	ENGAGEMENT PROGRAM (ACEP)				
SOUT		AFGHAN CIVIC	31,724	BANK PAYMENT		
	ĮE	ENGAGEMENT				
	P	PROGRAM (ACEP)				

18,485 BANK PAYMENT

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 15,939 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) COUTH ASIA A ECHAN CIVIC 25 154 BANK DAVMENT

(1) Method of

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

ISOUTH ASIA

AFGHAN CIVIC

ENGAGEMENT PROGRAM (ACEP)

(b) IRS code

	ENGAGEMENT PROGRAM (ACEP)	23,134	DANKFAIMENT		
	AFGHAN CIVIC ENGAGEMENT	10,602	BANK PAYMENT		
	PROGRAM (ACEP)				ĺ

5.379 BANK PAYMENT

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 7.189 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) 5.057 BANK PAYMENT SOUTH ASIA AFGHAN CIVIC

7.645 BANK PAYMENT

(1) Method of

	ENGAGEMENT PROGRAM (ACEP)	,,,,,,			
 SOUTH ASIA	AFGHAN CIVIC ENGAGEMENT	7,565	BANK PAYMENT		
	PROGRAM (ACEP)				

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

ISOUTH ASIA

AFGHAN CIVIC

ENGAGEMENT PROGRAM (ACEP)

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 15.570 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) COUTH ASIA A ECHAN CIVIC 12 496 BANK DAVMENT

(1) Method of

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

ISOUTH ASIA

AFGHAN CIVIC

ENGAGEMENT PROGRAM (ACEP)

(b) IRS code

	ENGAGEMENT PROGRAM (ACEP)	12,490	DANKFATHENT		
	AFGHAN CIVIC ENGAGEMENT	9,919	BANK PAYMENT		
	PROGRAM (ACEP)				ĺ

34,067

BANK PAYMENT

(a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 9.721 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) COUTH ASIA A ECHAN CIVIC 10 500 BANK DAVMENT

(g) A mount of non-

(1) Method of

(h) Description of

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

ISOUTH ASIA

AFGHAN CIVIC

ENGAGEMENT PROGRAM (ACEP)

(b) IRS code

	ENGAGEMENT PROGRAM (ACEP)	10,300	DANK PATHENT		
	AFGHAN CIVIC ENGAGEMENT PROGRAM (ACEP)	14,311	BANK PAYMENT		

12.170 BANK PAYMENT

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 9.084 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) COUTH ACTA A ECHAN CIVIC 14 142 DANK DAVMENT

(1) Method of

		ENGAGEMENT PROGRAM (ACEP)	14,143	DANKPATMENT		
	SOUTH ASIA	AFGHAN CIVIC ENGAGEMENT	26,092	BANK PAYMENT		

		ENGAGEMENT PROGRAM (ACEP)	20,032	5711111		
	SOUTH ASIA	AFGHAN CIVIC	9,560	BANK PAYMENT		

	ENGAGEMENT PROGRAM (ACEP)				
	AFGHAN CIVIC ENGAGEMENT	9,560	BANK PAYMENT		

PROGRAM (ACEP)

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

(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 7.731 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) ISOUTH ASIA A FGHAN CIVIC 5 8 19 BANK PAYMENT

(a) A mount of non-

(1) Method of

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

ISOUTH ASIA

AFGHAN CIVIC

IENGAGEMENT PROGRAM (ACEP)

(b) IRS code

	ENGAGEMENT PROGRAM (ACEP)	3,017	DANKTATHENT		
	AFGHAN CIVIC ENGAGEMENT	9,864	BANK PAYMENT		
	PROGRAM (ACEP)				

14,563 BANK PAYMENT

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 9.145 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) A FGHAN CIVIC 10 426 BANK PAYMENT SOUTH ASIA

(1) Method of

SOUTH ASIA	ENGAGEMENT PROGRAM (ACEP)	10,420	DANKTATHENT		
SOUTH ASIA	AFGHAN CIVIC ENGAGEMENT PROGRAM (ACEP)	10,146	BANK PAYMENT		

		AFGHAN CIVIC ENGAGEMENT PROGRAM (ACEP)	10,146	BANK PAYMENT		
	SOUTH ASIA	AFGHAN CIVIC	7.324	BANK PAYMENT		

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IENGAGEMENT PROGRAM (ACEP)

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) 6.154 BANK PAYMENT SOUTH ASIA AFGHAN CIVIC IENGAGEMENT PROGRAM (ACEP) ISOUTH ASIA A FGHAN CIVIC 10 397 BANK PAYMENT

(1) Method of

	ENGAGEMENT PROGRAM (ACEP)	10,337	DANK I ATTIENT		
	AFGHAN CIVIC ENGAGEMENT	6,749	BANK PAYMENT		

		I KO GKATT (ACET)				
	SOUTH ASIA	AFGHAN CIVIC	6,749	BANK PAYMENT		
		ENGAGEMENT				
		PROGRAM (ACEP)				

	COUTUACIA	A FOLLANI GIVITG	12 202	DANK DAYMENT		
		PROGRAM (ACEP)				
		ENGAGEMENT				
	1300111 A31A	ATOTIAN CIVIC	0,/43	DANKFAINLINI		

		ENGAGEMENT  PROGRAM (ACEP)				
	SOUTH ASIA	AFGHAN CIVIC	12,292	BANK PAYMENT		

PROGRAM (ACEP)

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

		PROGRAM (ACEP)				
	SOUTH ASIA	AFGHAN CIVIC	12,292	BANK PAYMENT		
		IENGAGEMENT				

(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA AFGHAN CIVIC 15.747 BANK PAYMENT IENGAGEMENT PROGRAM (ACEP) ISOUTH ASIA A FGHAN CIVIC 13 797 BANK PAYMENT

13.611 BANK PAYMENT

(a) A mount of non-

(1) Method of

	ENGAGEMENT PROGRAM (ACEP)	13,737	BANKTATPIENT		
	AFGHAN CIVIC ENGAGEMENT PROGRAM (ACEP)	10,010	BANK PAYMENT		

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

SOUTH ASIA

AFGHAN CIVIC

IENGAGEMENT PROGRAM (ACEP)

(a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(If cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SOUTH ASIA CIVIL SOCIETY 44.619 BANK PAYMENT INNOVATION INITIATIVE SUB-SAHARAN CIVIL SOCIETY 24,359 BANK PAYMENT AFRICA DEVELOPMENT AND YOUTH **IPARTICIPATION** SUB-SAHARAN CIVIL SOCIETY 24,192 BANK PAYMENT AFRICA DEVELOPMENT

253,618 BANK PAYMENT

(I) Method of

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-

(b) IRS code

IAND YOUTH IPARTICIPATION . CIVIL SOCIETY DEVELOPMENT

> IAND YOUTH PARTICIPATION

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

SUB-SAHARAN

AFRICA

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (i) Method of (q) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (c) Region (d) Purpose of grant cash non-cash and EIN(If cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) CIVIL SOCIETY 9,894 BANK PAYMENT SUB-SAHARAN AFRICA DEVELOPMENT AND YOUTH PARTICIPATION SUB-SAHARAN CIVIL SOCIETY 24,970 BANK PAYMENT AFRICA DEVELOPMENT AND YOUTH PARTICIPATION SUB-SAHARAN SUPPORT FOR 12,731 BANK PAYMENT AFRICA COMMUNICATION AS A PEACE BUILDING TOOL AND THE PROMOTION OF PEACEFUL COEXISTENCE AND SOCIAL COHESION ISUPPORT FOR 9,715 BANK PAYMENT SUB-SAHARAN AFRICA YOUTH-LED SOCIO-ECONOMIC INITIATIVES (STRENGTHENING THE SOCIO-ECONOMIC EMPOWERMENT OF

AT-RISK YOUTH)

Form 990 Sched	ule F Part II	- Grants or Entit	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SUPPORT FOR THE DEVELOPMENT OF LOCAL AND REGIONAL PARTNERSHIPS	22,428	BANK PAYMENT			
		SUB-SAHARAN AFRICA	SUPPORT FOR COMMUNICATION AS A PEACE BUILDING TOOL, SUPPORT FOR THE PROMOTION OF PEACEFUL COEXISTENCE AND SOCIAL COHESION, SUPPORT FOR THE PROMOTION OF RESPONSIBLE LEADERSHIP AND LOCAL GOOD GOVERNANCE	33,392	BANK PAYMENT			
		SUB-SAHARAN AFRICA	SUPPORT FOR COMMUNICATION AS A PEACE BUILDING TOOL, SUPPORT FOR THE PROMOTION OF PEACEFUL COEXISTENCE AND SOCIAL COHESION	43,705	BANK PAYMENT			
		SUB-SAHARAN AFRICA	SUPPORT FOR YOUTH-LED SOCIO-ECONOMIC INITIATIVES (STRENGTHENING THE SOCIO- ECONOMIC EMPOWERMENT OF AT-RISK YOUTH), SUPPORT FOR THE PROMOTION OF RESPONSIBLE LEADERSHIP AND LOCAL GOOD GOVERNANCE	44,758	BANK PAYMENT			

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (c) Region (d) Purpose of grant cash non-cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) SUB-SAHARAN TO IMPROVE AND 16,103 BANK PAYMENT AFRICA SUSTAIN THE QUALITY OF LIFE FOR PEOPLE LIVING WITH HIV AND AIDS IN BLANTYRE RURAL SUB-SAHARAN 22,939 BANK PAYMENT TO IMPROVE AND AFRICA SUSTAIN THE QUALITY OF LIFE FOR PEOPLE LIVING WITH HIV AND AIDS IN LILONGWE RURAL SUB-SAHARAN TO IMPROVE AND 99,831 BANK PAYMENT AFRICA SUSTAIN THE QUALITY OF LIFE FOR PEOPLE LIVING WITH HIV AND AIDS IN BLANTYRE RURAL SUB-SAHARAN 57,267 BANK PAYMENT THE OBJECTIVE OF AFRICA THIS GRANT IS TO IMPROVE QUALITY OF LIFE AMONG PEOPLE LIVING WITH HIV THROUGH IMPROVED TREATMENT ADHERENCE, CARE AND SUPPORT SERVICES AND REDUCED NEW HIV INFECTION IN NSANJE

(b) IRS code (I) Method of (h) Description of (g) A mount of non-(a) Name of section (e) A mount of (f) Manner of valuation (d) Purpose of grant (c) Region cash non-cash and EIN(If cash disbursement organization cash grant (book, FMV, assistance assistance applicable) appraisal, other) SUB-SAHARAN TO IMPROVE AND 33,297 BANK PAYMENT AFRICA SUSTAIN THE OUALITY OF LIFE FOR PEOPLE LIVING WITH HIV AND AIDS IN BLANTYRE RURAL SUB-SAHARAN TO IMPROVE AND 25,342 BANK PAYMENT AFRICA SUSTAIN THE QUALITY OF LIFE FOR PEOPLE LIVING WITH HIV AND AIDS IN BLANTYRE RURAL

	AFRICA	TO IMPROVE AND SUSTAIN THE QUALITY OF LIFE FOR PEOPLE LIVING WITH HIV AND AIDS IN BLANTYRE RURAL	24,534	BANK PAYMENT		
	AFRICA	FOSTERING ACCOUNTABILITY AND TRANSPARENCY IN	,	BANK PAYMENT		

ZAMBIA PROJECT IMPLEMENTATION

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

(a) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (c) Region (d) Purpose of grant cash non-cash and EIN(If cash disbursement organization cash grant (book, FMV, assistance assistance applicable) appraisal, other) SUB-SAHARAN FOSTERING 21.770 BANK PAYMENT AFRICA **ACCOUNTABILITY** AND TRANSPARENCY IN ZAMBIA PROJECT IMPLEMENTATION 22,988 BANK PAYMENT ISUB-SAHARAN FOSTERING AFRICA ACCOUNTABILITY AND TRANSPARENCY IN ZAMBIA PROJECT IMPLEMENTATION 29,498 BANK PAYMENT SUB-SAHARAN FOSTERING AFRICA ACCOUNTABILITY AND

36,184 BANK PAYMENT

(i) Method of

ISUB-SAHARAN AFRICA

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

(b) IRS code

TRANSPARENCY IN ZAMBIA PROJECT IMPLEMENTATION FOSTERING

ACCOUNTABILITY

TRANSPARENCY IN ZAMBIA PROJECT IMPLEMENTATION

AND

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (I) Method of (a) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (d) Purpose of grant (c) Region cash non-cash and EIN(If cash disbursement (book, FMV, organization cash grant assistance assistance applicable) appraisal, other) SUB-SAHARAN FOSTERING 29,083 BANK PAYMENT AFRICA ACCOUNTABILITY AND TRANSPARENCY IN ZAMBIA PROJECT IMPLEMENTATION SUB-SAHARAN PROMOTING 18,998 BANK PAYMENT AFRICA CONGOLESE CITIZENS' INFORMED VOTING AND ACTIVE AND PEACEFUL PARTICIPATION IN ELECTIONS SUB-SAHARAN PROMOTING 34,413 BANK PAYMENT AFRICA CONGOLESE CITIZENS' INFORMED VOTING AND ACTIVE AND PEACEFUL PARTICIPATION IN ELECTIONS SUB-SAHARAN PROMOTING 13,449 BANK PAYMENT AFRICA CONGOLESE CITIZENS' INFORMED VOTING AND ACTIVE AND PEACEFUL PARTICIPATION IN

ELECTIONS

(b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of section (e) A mount of (f) Manner of valuation (c) Region (d) Purpose of grant cash non-cash and EIN(If cash disbursement organization cash grant (book, FMV, assistance assistance applicable) appraisal, other) SUB-SAHARAN PROMOTING 16.413 BANK PAYMENT AFRICA CONGOLESE CITIZENS' INFORMED VOTING AND ACTIVE AND PEACEFUL PARTICIPATION IN ELECTIONS ISUB-SAHARAN PROMOTING 16,757 BANK PAYMENT AFRICA CONGOLESE CITIZENS' INFORMED VOTING AND ACTIVE AND PEACEFUL PARTICIPATION IN ELECTIONS 59,923 BANK PAYMENT

5,586 BANK PAYMENT

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

SUB-SAHARAN

CENTRAL AMERICA

AFRICA

AND THE

CARIBBEAN

CIVIL SOCIETY

INNOVATION INITIATIVE

FOOD FOR

PROGRESS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (I) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) ISOUTH ASIA **IWOMEN** 7.686 BANK PAYMENT **IEMPOWERMENT** IAND YOUTH ACTIVISM GRANTS IA N D INTERNATIONAL IWOMEN'S DAY

IGRANTS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -Schedule I (Form 990) Department of the

Treasury

Internal Revenue Service Name of the organization

COUNTERPART INTERNATIONAL INC

## **Grants and Other Assistance to Organizations,** Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

2015

DLN: 93493129017707

Open to Public Inspection

Employer identification number

						13-6183605	
Part I General Informatio	n on Grants an	d Assistance				·	
<ol> <li>Does the organization maintain the selection criteria used to aw</li> <li>Describe in Part IV the organization</li> </ol>	ard the grants or a	ssistance?				stance, and	✓ Yes No
Part II Grants and Other Assista that received more than \$		_		plete if the organization	answered "Yes" on F	orm 990, Part IV, line 2:	l , for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
	+						
2 Enter total number of section 50	)1(c)(3) and gover	nment organizations lis	sted in the line 1 table .				9
3 Enter total number of other orga	nizations listed in t	he line 1 table				<b>▶</b>	0
For Paperwork Reduction Act Notice, see	the Instructions for	Form 990.		Cat No 50055P		Schedu	le I (Form 990) 2015

## Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Explanation Return Reference PART I, LINE 2 GRANTS PROVIDED TO ORGANIZATION'S WITHIN THE UNITED STATES ARE REVIEWED AND PROCESSED INTO A CENTRALIZED FINANCIAL SYSTEM HEADQUARTERS FINANCE DEPARTMENT PROVIDES SUPPORT AND OVERSEES AND MONITORS ALL FINANCIAL TRANSACTIONS FOR ALL PROJECTS, PROVIDES UPDATED FINANCIAL REPORTING INFORMATION TO THE FIELD AND TO DONORS, AND ENSURES THAT DONOR FUNDS ARE SPENT IN ACCORDANCE WITH DONOR REGULATIONS AND WITH COUNTERPART FINANCIAL POLICIES

AND PROCEDURES DESK AUDITS ARE PERIODICALLY CONDUCTED BY HEADQUARTERS INTERNAL AUDITOR TO ENSURE CONTINUED. COMPLIANCE WITH FINANCIAL REQUIREMENTS AND PROVIDE TRAINING WHEN REQUIRED IN ADDITION, FEDERAL AWARD AND COMPLIANCE INFORMATION IS INCORPORATED IN THE SUB-AGREEMENT (E.G., MANDATORY STANDARD PROVISIONS, OTHER REGULATIONS, QUARTERLY FINANCIAL REPORTING REQUIREMENTS AND TEMPLATE, AUDIT REQUIREMENTS) SUBRECIPIENT ACTIVITIES ARE MONITORED BY CPI PROGRAM MANAGERS AND THROUGH THE SUBRECIPIENT MONITORING PLAN, WHICH IS REFRESHED ANNUALLY

Software ID: Software Version:

**EIN:** 13-6183605

Name: COUNTERPART INTERNATIONAL INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IFES 2011 CRYSTAL DR 10TH FLOOR ARLINGTON,VA 22202	52-1527835	501(C)(3)	94,888				- CIVIL SOCIETY FOR ACCOUNTABLE GOVERNANCE AND CITIZEN SECURITY-PARTICIPACIAN CIVICA-GUATEMALA-SUPPORT FOR PROFESSIONAL AND INSTITUTIONAL CAPACITY ENHANCEMENT (SPICE)
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW 1126 16TH ST NW 400 WASHINGTON, DC 20036	52-1818273	501(C)(3)	483,181				- CIVIL SOCIETY STRENGTHENING PROJECT (CSSP)- MOROCCO - AFGHAN CIVIC ENGAGEMENT PROGRAM (ACEP)- SUPPORT FOR PROFESSIONAL AND INSTITUTIONAL CAPACITY ENHANCEMENT (SPICE) - CITIZEN PARTICIPATION FOR RESPONSIVE GOVERNANCE
HIRAM COLLEGE 11715 GARFIELD RD HIRAM,OH 44234	34-0714670	501(C)(3)	10,170				HELP COASTAL COMMUNITIES MANAGE NATURAL RESOURCES FOR SUSTAINABILITY AND IMPROVE LIVELIHOODS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) UNIVERSITY OF MIAMI 59-0624458 501(C)(3) 7,987 HELP COASTAL COMMUNITIES 4600 RICKENBACKER CAUSEWAY MANAGE NATURAL RESOURCES FOR MIAMI, FL 331491098 SUSTAINABILITY AND IMPROVE LIVELIHOODS 501(C)(3) 4,990,068 CIVIL SOCIETY FOR **IREX** 22-3087809 1275 K ST NW SUITE 600 ACCOUNTABLE WASHINGTON, DC 20005 GOVERNANCE AND CITIZEN SECURITY-PARTICIPACIAN CIVICA-GUATEMALA-PROMOTE CONGOLESE CITIZENS' INFORMED VOTING AND ACTIVE AND PEACEFUL PARTICIPATION IN ELECTIONS- TO BUILD THE SKILLS OF YOUNG AFRICAN LEADERS TO IMPROVE THE ACCOUNTABILITY AND TRANSPARENCY OF GOVERNMENT, START AND GROW BUSINESSES, AND SERVE THEIR COMMUNITIES SEARCH FOR COMMON 52-1257425 501(C)(3) 26,275 PEACE BUILDING GROUND ACTIVITIES, 1601 CONNECTICUT LIVELIHOOD **ACTIVITIES AND AVENUE NW** ORGANIZATIONAL WASHINGTON, DC 20009

DEVELOPMENT

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) HELLEN KELLER 13-5562162 501(C)(3) 46,627 IMPROVE FOOD INTERNATIONAL SECURITY, REDUCE 352 PARK AVENUE 12TH THE INCIDENCE OF FLOOR HUNGER, IMPROVE NEW YORK, NY 10010 LITERACY, AND IMPROVETHE HEALTH AND TION OF RY SCHOOL

(e) A mount of non- (f) Method of valuation

(g) Description of

(h) Purpose of grant

					IL EALIH
					NUTRITI
					PRIMARY
					CHILDRE
AGA KHAN FOUNDATION	52-1231983	501(C)(3)	938,156		AFGHAN

1825 K STREET NW SULI

(d) A mount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

REN NCIVIC 901

ENGAGEMENT PROGRAM (ACEP) WASHINGTON.DC 20006

94-3027961 501(C)(3) 4,442,555 AFGHAN CIVIC

INTERNEWS 876 7TH STREET ENGAGEMENT

ARCATA, CA 95521 PROGRAM (ACEP) efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Compensation Information

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

**Compensated Employees** 

OMB No 1545-0047

DLN: 93493129017707

2015 Open to Public

Department of the Treasury

Schedule J (Form 990)

> ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Internal Revenue Service **Employer identification number** Name of the organization COUNTERPART INTERNATIONAL INC 13-6183605 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on 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) 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 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 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? **4**a Nο 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo 4c Participate in, or receive payment from, an equity-based compensation arrangement? Νo 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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Νo Any related organization? 5b Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo Any related organization? 6h Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on 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 Yes Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Selledales (Form 550) 2015					r age 🕳			
Part III Officers, Directors,	Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.							
ınstructions, on row (II) Do not list ar	tion must be reported on Schedule J, report compensation from the ony individuals that are not listed on Form 990, Part VII for each listed individual must equal the total amount of Form 990, F	.,	-	·				
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in			

Page 2

Schedule J (Form 990) 2015

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation in
	B	(ii)	(ıiı)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base (1) compensation	Bonus & incentive	Other reportable	compensation			as deferred on prior
	(1) compensation	compensation	compensation				Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

Schedule J (Form 990) 2015	Page <b>3</b>					
Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation					
	Explanation HOUSING ALLOWANCES ARE PROVIDED FOR EXPATRIATE EMPLOYEES AND INCLUDED IN THE EMPLOYEES' TAXABLE COMPENSATION					

Schedule J (Form 990) 2015

#### Software ID: Software Version:

**EIN:** 13-6183605

Name: COUNTERPART INTERNATIONAL INC

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1JOAN PARKER CEO & SECRETARY	(1)	275,217	30,000	0	15,325	8,405	328,947	(
	(11)	0	0	0	0	-0	- 0	C
1DEREK HODKEY CHIEF OPERATIONG OFFICER	(1)	207,951	25,000	0	12,900	13,016	258,867	C
	(11)	0	0	0	0	-	- 0	(
2THOMAS MAGNANI CHIEF FINANCIAL OFFICER	(1)	183,522	15,000	0	10,925	9,914	219,361	C
	(11)	0	0	0	0	-	-	C
3SIBEL BERZEG VICE PRESIDENT	(1)	173,640	10,000	0	10,400	3,191	197,231	C
	(11)	0	0	0	0			(
4ANN SHIPMAN VICE PRESIDENT	(1)	160,458	0	0	9,600	8,288	178,346	C
	(11)	0	0	0	0			(
5CHRISTOPHER BARNES CHIEF OF PARTY (END	(1)	180,469	0	0	6,561	8,219	195,249	C
11/15)	(11)	0	0	0	0			(
6SARAWATTEE REEKOYE DEPUTY CHIEF OF PARTY	(1)	172,147	0	0	6,535	252	178,934	C
(END 9/15)	(11)	0	0	0	0			(
7ALEX SARDAR VICE PRESIDENT (END	(1)	160,276	5,000	0	9,525	5,838	180,639	C
01/16)	(11)	0	0	0	0			(
8STEVE WISMAN CHIEF OF PARTY	(1)	154,843	5,208	0	7,389	0	167,440	(
	(11)	0	0	0	0			(
9MICHAEL KUNZ SR DIRECTOR	(1)	155,947	0	0	9,332	3,480	168,759	(
SIN DINECTOR	(11)	0	0	0	0			(
						0	0	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE M** 

DLN: 93493129017707

## **Noncash Contributions**

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

2015

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

27 Other ► (\_\_\_ 28 Other ▶ (\_

(Form 990)

► Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

**Employer identification number** Name of the organization COUNTERPART INTERNATIONAL INC. 13-6183605 Types of Property Part I (a) (b) (c) (d) Check Number of contributions Noncash contribution Method of determining ١f or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g Art—Works of art . . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods . . . . . . Cars and other vehicles . . Boats and planes . . . Intellectual property . . . Securities-Publicly traded . 10 Securities—Closely held stock Securities—Partnership, LLC, or trust interests . . . . Securities-Miscellaneous . . Qualified conservation contribution—Historic structures . . . . **14** Qualified conservation contribution—Other . . 15 Real estate—Residential . 16 Real estate—Commercial . Real estate—Other . . 18 Collectibles . . . . Food inventory . . . Х 2,650,309 FMV 19 20 Drugs and medical supplies . **21** Taxidermy . . . . . 22 Historical artifacts . . . . Scientific specimens . . 24 Archeological artifacts . . . 1,932 FMV **25** Other ▶ ( Х 1 SOFTWARE) **26** Other ▶ (

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

No

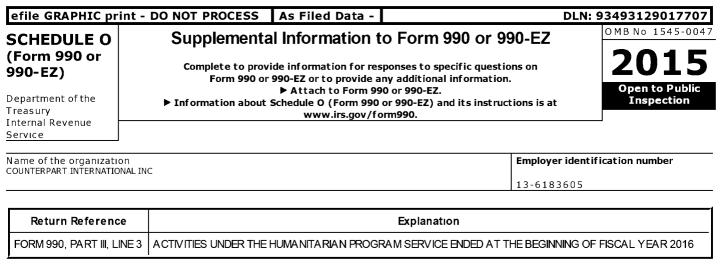
Yes

THE NUMBER OF CONTRIBUTIONS IS REPORTED IN THIS COLUMN

Schedule M (Form 990) (2015)

### Return Reference Explanation

PART I, COLUMN (B)



PART III, OCI MM MM TH DI GG	COVERAGE OF CIVIC EDUCATION AND CIVIC ENGAGEMENT ACTIVITIES, BY MOVING AWAY FROM THE GENERAL DRGANIZATIONAL DEVELOPMENT OF THE CSOS TO THEIR THEMATIC CAPACITY BUILDING IN AREAS RELATED TO COMMUNITY MOBILIZATION, CIVIC EDUCATION, CIVIC ENGAGEMENT, POLITICAL REFORM, POLICY AND ADVOCACY, MONITORING GOVERNMENT COMMITMENTS AND PERFORMANCE TO THIS END, COUNTERPART FACILITATED DIALOGUES THAT CREATED OPPORTUNITIES FOR CITIZENS AND CSOS TO ENGAGE IN LOCAL AND PROVINCIAL ADVOCACY AND JOINT DECISION-MAKING IN ORDER TO MORE EFFECTIVELY INFLUENCE NATIONAL POLICY ACEP CONTINUED TO AWARD GOVERNMENT MONITORING AND POLICY ADVOCACY GRANTS, WHICH PROMOTE GOVERNMENT ACCOUNTABILITY AND TRANSPARENCY BY ENGAGING CSOS IN MONITORING GOVERNMENT BUDGETS AND SERVICE DELIVERY TO EXPOSE CORRUPT PRACTICES, REPORT ON GOVERNMENT REFORM PLEDGES, AND CONDUCT EVIDENCE-BASED POLICY ADVOCACY CAMPAIGNS ACEP PROVIDED REGULAR TECHNICAL ASSISTANCE TO THE PARLIAMENTARY TECHNICAL WORKING GROUPS ON 1) THE PROVINCIAL COUNCIL LAW, 2) THE ANTI-CORRUPTION LAW, AND 3) THE FAMILY AND THE ELIMINATION OF VIOLENCE AGAINST WOMEN (EVAW) LAWS, WHICH HAS RESULTED IN ENHANCED ENGAGEMENT WITH THE PARLIAMENT AND OTHER GOVERNMENT BODIES COUNTERPART CONTINUED TO WORK WITH AN ADVOCACY GROUP ON NATIONAL BUDGET,
	TO INCREASE THE MONITORING ROLLE OF CSOS IN BUILDEET DEVELOPMENT AND DESCUTION TO BROADEN THE POLITICAL ARTICIPATION OF YOUTH, ACTIVISM GRANTS IN ADDITION, THIS YEAR, ACEP SELECTED AND TRAINED 34 ADDITIONAL THIS YEAR. ACE
E C W SI IN	SUPPORTED THE PARTICIPATORY DEVELOPMENT OF COMMUNAL ACTION PLANS IN THESE AREAS, AND ESTABLISHING ENTITIES FOR PARITY, EQUALITY OF OPPORTUNITY, AND GENDER APPROACH, HELPING THESE COMMUNES TO MEET THE CONSTITUTIONAL REQUIREMENTS FOR ESTABLISHING LOCAL PARTICIPATORY BODIES, AND PROVIDING CITIZENS WITH A WAY TO ENGAGE WITH LOCAL AUTHORITIES THROUGH THE WORK OF COUNTERPART'S SUBPARTNER ICNL, THE PROGRAM SUCCEEDED IN INFLUENCING THE CONTENT OF THREE IMPORTANT LAWS FOR MOROCCAN CIVIL SOCIETY ACCESS TO NFORMATION, RIGHT TO PRESENT PETITIONS, AND RIGHT TO PRESENT MOTIONS CSSP SUPPORTED CIVIL SOCIETY COALITIONS IN DRAFTING AND SUBMITTING RECOMMENDATIONS ON THESE LAWS TO THE PARLIAMENT, RESULTING IN THE NCORPORATION OF 13 OUT OF THE 40 SUGGESTED IMPROVEMENTS INTO THE FINAL TEXTS OF THE LAWS

INSURPORT OF SUMMERS OUR SOCIETY FEDOTRS THE DUE SOCIETY PEDIC CHIEFS THE ORDER SUMMERS PEDIC ADMINISTRY OF THE SOCIETY PEDIC OF PROTECTION AND PROCESURES THAT WERE INTRODUCED TO THEM CRIMS CORP CYCLE OR OF A TRAINING THEM RELIGIOUS OF THEM AND PROCESURES THAT WERE INTRODUCED TO THEM CRIMS CORP CYCLE OR OF A TRAINING THEM RELIGIOUS OF THEM AND PROCESURES THAT WERE INTRODUCED TO THEM CRIMS CORP CYCLE OR OF A TRAINING THEM RELIGIOUS OF THEM AND PROCESSOR AND SOCIETY AND ADMINISTRY OF THE COMMENT OF THE CORP CRIMS CORP CYCLE OR OF THE PROCESSOR OF THE RESERVENCE AND STORY OF THE PROCESSOR OF THE P
COUNTERPART TO LEGALLY REGISTER IN THE COUNTRY, WHICH WAS NOT A RESULT OF ANY PERFORMANCE ISSUES BUT

Return Reference	Explanation
	NUMBOCH 2016. COUNTERPART I WAS A WARDED THE \$10.5 MLLON. USAID FLANDED "THE PARCEPIA C VICA PARA 30A GOVERNA O PROGRAM IN MOZAMIDUE. THE RIPROSE OF THE PROGRAM IS TO STRENGTHEN THE IRRATOR OW CO. ACCIDIOS AND ON PROVEY ACCOUNTED THE PRACTOR OW CO. ACCIDIOS AND ON PROVEY ACCOUNTED THE PRACTOR OW CO. ACCIDIOS AND ACCIDIOS AND ACCIDIOS. AND ACCIDIOS AND ACCIDIOS AND ACCIDIOS. ACCIDIOS AND ACCIDIOS AND ACCIDIOS. ACCIDIOS AND ACCIDIOS. ACCIDIOS AND ACCIDIOS AND ACCIDIOS. ACCIDIOS ACCIDIOS ACCIDIOS ACCIDIOS ACCIDIOS ACCIDIOS ACCIDIOS. ACCIDIOS ACCIDIOS. ACCIDIOS ACC
	ADVOCATE FOR TRANSPARENCY AND ACCOUNTABILITY OF PUBLIC INSTITUTIONS, AND ENHANCE PUBLIC INSTITUTION CAPACITY TO ADDRESS GAPS IN THE ENABLING ENVIRONMENT FOR TRANSPARENCY AND ACCOUNTABILITY DURING THIS PERIOD, COUNTERPART HAS AWARDED 17 SUB-GRANTS TO LOCAL CSOS TOTALING \$1,520,000 GRANT TOPICS RANGE FROM TRAININGS, RESEARCH AND ADVOCACY, PUBLIC INFORMATION, AND NATIONAL GOVERNMENT OVERSIGHT IN ADDITION, COUNTERPART LED THE NORTHERN TRIANGLE INITIATIVE AT THE OPEN GOVERNMENT PARTNERSHIP (OGP) LATIN AMERICA REGIONAL MEETING IN URUGUAY AS A FOLLOW UP TO REGIONAL NETWORK INITIATIVE, COUNTERPART HOSTED A NORTHERN TRIANGLE MEETING IN HONDURAS WITH GOVERNMENT AND CIVIL SOCIETY REPRESENTATIVES FROM HONDURAS, GUATEMALA, AND EL SALVADOR TO EXCHANGE EXPERIENCES AND LESSONS LEARNED FOR THE DESIGN AND FOLLOW-UP OF THE OGP PLAN, ALLIANCE FOR PROSPERING FUNDS, AND FIGHT AGAINST CORRUPTION FURTHERMORE, COUNTERPART
	CONTINUED TO IMPLEMENT ITS ORGANIZATIONAL DEVELOPMENT (OD) WORK, FINALIZING OD ASSESSMENTS FOR 10 CSOS

PART III, LINE 4A  TO INCREASE TRANSPARENCY AND ACCOUNTABILITY AT THE NATIONAL AND MUNICIPAL LEVELS, FOSTER DIVERSE PARTICIPATION AND ENGAGEMENT, AND INCREASE THE ABILITY OF CSOS TO OPERATE COHESIVELY AND EFFECTIVELY IN 2016, COUNTERPART SUPPORTED ITS PARTINERS TO TRAIN MORE THAN 800 INDIVIDUALS AND ASSIST MORE THAN 200 CSOS, SOCIAL ORGANIZATIONS, AND GOVERNMENT A GENCIES WITH COUNTERPARTS SUPPORT, THE LOCAL PARTINERS CARRIED OUT A NATIONWIDE DIALOGUE SERIES AMONG DIVERSE CITIZENS, EXECUTED LOCAL DEVELOPMENT PROJECTS O IMPLEMENTED BY CSO AND MUNICIPAL LEADERS, PRODUCED FIVE PUBLIC POLICY DOCUMENTS TO BE DISSEMINATED TO CANDIDATES OF ECUADOR'S 2017 NATIONAL ELECTIONS, AND PROVIDED TECHNICAL AND FINANCIAL SUPPORT TO 12 LOCAL CSOS CARRYING OUT ADVOCACY INITIATIVES SURROUNDING LEBTI, WOMEN, AND YOUTH ISSUES COUNTERPART ALSO PROVIDED TECHNICAL ASSISTANCE IN ADVOCACY AND STRATEGIC PLANNING AND FINANCIAL SUSTAINABILITY TO ITS THREE PARTINERS TO BUILD THEIR CAPACITIES TO REALIZE THER ORGANIZATIONAL OBJECTIVES, EFFECT MEANINGFUL CHANGE, AND SUSTAIN THEIR ACTIVITIES BEYOND THE CIVIL SOCIETY ASSISTANCE PROGRAM IN GUATEMALA, COUNTERPART BEGAN THE IMPLEMENTATION OF THE USAID-FUNDED PARTICIPACI N C VICA PROJECT THE FIVE-YEAR, \$25 MILLION-DOLLAR PROJECT INTENDS TO STRENGTHEN AND DEVELOP THE INSTITUTIONAL CAPACITY OF CIVIL SOCIETY ORGANIZATIONS (CSOS) IN QUATEMALA TO PLAY A MORE EFFECTIVE ROLE IN ADDRESSING ACCOUNTABLE GOVERNANC AND CORRUPTION ISSUES THIS YEAR, 82 CSOS AND FIVE GOVERNMENT AGENCIES RECEIVED TRAININGS AND TECHNICAL ASSISTANCE (TA) - OF THESE CSOS, 12 ARE ENGAGED IN ADVOCACY INTERVENTIONS THE PROJECT ALSO ASSISTED 1,4 INDIVIDUALS THROUGH FORUMS, CONSULTATION SESSIONS AND WORKSHOPS AND CONDUCTED AN ANALYSIS OF GUATEMALA'S CURRENT INSTITUTIONAL, POLITICAL AND SOCIAL CONTEXT FURTHERMORE. PARTICIPACI N C VICA PLAYEL AN INSTRUMENTAL ROLE IN FORGING THE CSO NETWORK FOR OPEN GOVERNMENT, A COALITION OF SIX CSOS FOCUSED ( ADVANCING THE OPEN GOVERNMENT PARTINERSHIP (OOP) INITIATIVE IN GUATEMALA THIS SIGNIFICANT A CHIEV PRE	Return Reference	Explanation
EMPHASIS ON YOUTH AND WOMEN IN 2016, COUNTERPART PROVIDED KEY SUPPORT TO TWO PARTINER CSOS AS THEY EDUCATED AND MOBILIZED VOTERS AND GOT OUT THE VOTE LEADING UP TO THE LOCAL GOVERNMENT ELECTIONS HELD MARCH 2016, THE FIRST LOCAL ELECTIONS IN GUY ANA IN OVER 20 YEARS IN FEBRUARY AND MARCH, 213 VOTER EDUCATION EVENTS WERE CONDUCTED, INCLUDING ONE-ON-ONE BINGA GEMENTS, GROUP SESSIONS, AND "EDUTAINMENT" (EDUCATIONAL-ENTERTAINMENT) A CITVITIES, WHILE LOCAL PARTINERS LED A PUBLIC OUTREACH CAMPAIR THAT RELEASED 305 BROADCASTS THROUGH NEW AND TRADITIONAL MEDIA UNDER OBJECTIVE 2 OF THE PROGRAM, TW LOCAL PARTINERS LED EFFORTS TO BUILD SOCIAL COHESION IN 10 COMMUNITIES IN GUY ANA, BRINGING COMMUNITY MEMBERS TOGETHER FOR SKILLS TRAINING, CAPACITY BUILDING SESSIONS, COMMUNITY DIALOGUES ON KEY ISSUES, AN ULTIMATELY IMPLEMENTING A COMMUNITY-LED LOCAL DEVELOPMENT PROJECT, AS WELL AS TRAINING NEWLY ELECTED LOCAL GOVERNMENT OFFICIALS ON THEIR ROLE IN BUILDING SOCIAL COHESION AMONG THEIR CONSTITUENTS OVER THE COURSE OF THE YOP PROGRAM, COUNTERPART AND ITS PARTINERS HAVE BUILT TELLATIONSHIPS WITH KEY GOVERNMENT ENTITIES, PARTICULARLY THE MINISTRY OF COMMUNITIES, BUSURING THE SUSTAINABILITY OF THE YOP INITIATIVES AND RESULTS BEY OND THE LIFE OF THE PROGRAM COUNTERPART WAS A SUB-RECIPIENT TO A LOCAL ORGANIZATION, MISSIK ARMENIA, ON THE "SUPPORT TO SOCIAL SECTOR REFORM IN ARMENIA" (SSSRA) PROGRAM IN THE FRAMEWORK OF THIS PROGRAM COUNTERPART PROVIDED EXPERTISES IN THE INSTITUTIONAL STENSTHENIST HENDENIST FOR THE PROGRAM WAS AND PARTICULARLY TO MISSION ARMENIA AS THE LEAD IMPLEMENTER, TO DEEPEN THEIR INSTITUTIONAL, ADMINISTRATIVE AND PROFESSIONAL CAPACITIES THE PROGRAM CONCLUDED IN JUNE 2016 ONCO, THE MAIN ACHIEVED EXPERTISE IN THE INSTITUTIONAL DID INGO FO THE MAIN ACHIEVED THE PROGRAM WAS PORMADING PROCESS OF SOCIAL SECTOR REFORMS IN A ZERBALIAN, COUNTERPART WORKS ON IMPROVING THE STATUS OF PROMETISE THE PROGRAM CONCLUDED IN JUNE 2016 ONCO, THE PROGRAM WOMENS IN FLUENCE AND PARTICIPATION AND DEVELOPING CSO CAPACITY COUNTERPART WORKS O	FORM 990, PART III,	PARTICIPATION AND ENGAGEMENT, AND INCREASE THE ABILITY OF CSOS TO OPERATE COHESINELY AND EFFECTIVELY IN 200 2016, COUNTERPART SUPPORT TO THE AND END MOVIDUALIS AND ASSIST MORE THAN 200 OCSOS. SOCIAL ORGANIZATIONS, AND GOVERNMENT AGENCIES WITH COUNTERPARTS SUPPORT. THE LOCAL PARTNERS CAPRED OUT AN ANDOMODE DIAL COUNTERPARTS SUPPORT. THE LOCAL PARTNERS CAPRED OUT AN ANDOMODE DIAL COUNTERPARTS SUPPORT. THE LOCAL PARTNERS CAPRED OUT AN ANDOMODE DIAL COUNTERPARTS SUPPORT. THE LOCAL PARTNERS CAPRED OUT AND AND AND END COUNTERPARTS OF COUNTERPARTS OF CANDIDATES OF COUNTERPARTS OF COUNTERPARTS OF COUNTERPARTS OF CANDIDATES OF COUNTERPARTS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE ORGANIZATION MADE SIGNIFICANT CHANGES TO THE BYLAWS THAT INCLUDED THE FOLLOWING I CHANGED THE MAXIMUM NUMBER OF DIRECTORS WHO CAN SERVE ON THE BOARD DURING THE YEAR FROM FIFTEEN (15) TO EIGHTEEN (18) II A NOTICE OF BOARD MEETING WILL BE DISTRIBUTED TO EACH DIRECTOR SEVEN (7) DAYS IN ADVANCE OF EACH REGULAR MEETING III CHANGED THE NUMBER OF MEMBERS ELECTED TO SERVING ON THE GOVERNANCE AND NOMINATING COMMITTEE TO TWO (2) FROM THREE (3) IV UPDATED THE POWER AND DUTIES OF THE CHAIR OF THE BOARD TO ALLOW THE CHAIR TO ACT AS AN AGENT OF COUNTERPART INTERNATIONAL THE CHAIR IS ALLOWED TO SIGN ON BEHALF OF THE ORGANIZATION IF A SIGNATURE IS REQUIRED THE CHAIR OF THE BOARD ALSO CHAIRS THE EXECUTIVE COMMITTEE AND MAY SIT EX-OFFICIO MEMBER ON ALL COMMITTEES V THE AUDIT COMMITTEE NOW CONSISTS OF AT LEAST TWO (2) BOARD MEMBERS REDUCED FROM THREE(3) THE AUDIT COMMITTEE IS NOW RESPONSIBLE FOR REVIEWING THE FORM 990 PRIOR TO HAVING IT REVIEWED BY THE BOARD VI A NEW SECTION HAS BEEN ADDED TO EXPLAIN THE RESPONSIBILITIES AND REQUIREMENTS OF THE COMMITTEES OF WHOLLY-OWNED SUBSIDIARIES VII A NEW ARTICLE HAS BEEN ADDED TO THE BYLAWS REGARDING THE COUNTERPART OFFICES OUTSIDE THE UNITED STATES THE ARTICLE DETAILS THE PROCEDURES AND APPROVAL PROCESS FOR HOW AN OFFICE IN A FOREIGN COUNTRY IS ESTABLISHED OR CLOSED

Return Reference	Explanation
FORM 990, PART	THE FORM 990 WAS COMPLETED BY AN INDEPENDENT CPA FIRM AND REVIEWED BY THE CHIEF FINANCIAL OFFICER
VI, SECTION B,	(CFO) THE DRAFT WAS PRESENTED TO THE C-SUITE AND THE AUDIT COMMITTEE FOR REVIEW ANY
LINE 11	QUESTIONS/CHANGES WERE COMMUNICATED BY THE C-SUITE AND AUDIT COMMITTEE TO THE CPA FIRM THE FINAL
	DRAFT OF THE FORM 990 WAS SUBMITTED TO THE BOARD OF DIRECTORS FOR APPROVAL BEFORE IT WAS SIGNED BY
	THE CFO AND FILED WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO SIGN AN ANNUAL SELF-DISCLOSURE OF CONFLICTS OF INTEREST STATEMENT FURTHERMORE, OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO NOTIFY THE CEO WITHIN 30 DAYS OF THE DISCOVERY OF A REAL OR POTENTIAL CONFLICT OF INTEREST SUCH CONFLICTS OF INTEREST MAY INCLUDE PROCUREMENT, HIRING, OR ANY OTHER AREA OF ORGANIZATIONAL INTEREST THE CEO (AND CHAIRMAN OF THE BOARD IN CASES OF DIRECTOR CONFLICTS OF INTEREST) DETERMINES THE APPROPRIATE ACTION FOR THOSE OFFICERS, DIRECTORS, OR KEY EMPLOYEES WITH A CONFLICT OF INTEREST, THIS, AT A MINIMUM, INCLUDES RECUSAL FROM PARTICIPATION IN THE CONSIDERATION OF THE PROPOSED TRANSACTION IN SOME CASES A CONFLICT OF INTEREST MAY BE DEEMED SO SEVERE AS TO REQUIRE THAT THE INDIVIDUAL IN QUESTION RESIGNS FROM HIS/HER ROLE WITH COUNTERPART INTERNATIONAL

Return Reference	Explanation	
		ı
FORM 990,	THE CEO'S SALARY IS DETERMINED BY THE BOARD THE BOARD OF DIRECTORS IS RESPONSIBLE FOR THE ESTABLISHING	ı
PART VI,	THE COMPENSATION FOR THE CEO THE COMPENSATION IS DETERMINED BASED ON INDUSTRY REVIEW OF COMPARABLE	l
SECTION B,	DATA FROM SIMILARLY SIZED ORGANIZATION, IN THE SAME SECTOR OF ACTIVITIES, IN THE SAME GEOGRAPHIC	ĺ
LINE 15	LOCATION AND OF SIMILAR SIZED OPERATIONAL BUDGETS COMPENSATION REVIEWS OF THE CEO ARE BASED ON	l
	INDUSTRY AVERAGES, COUNTERPART'S FINANCIAL POSITION AND ANNUAL PERFORMANCE EVALUATION BY THE BOARD	l
	INCLUDING THE ADMINISTRATION OF PERIODIC 360 ASSESSMENTS EACH SENIOR OFFICER'S SALARY IS DETERMINED BY	l
	THE CEO, WHO, IN TURN, BASES HIS/HER DECISION UPON EXTERNAL THIRD PARTY SURVEYS AND ASSESSMENTS THE	l
	LAST COMPENSATION REVIEW WAS DONE IN APRIL 2016	ĺ

Return Reference	Explanation
FORM 990, PART VI,	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL
SECTION C, LINE 19	STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	CONSULTANTS PROGRAM SERVICE EXPENSES 2,427,226 MANAGEMENT AND GENERAL EXPENSES 516,210 FUNDRAISING EXPENSES 4,145 TOTAL EXPENSES 2,947,581 BENEFIT SERVICES PROGRAM SERVICE EXPENSES 52,133 MANAGEMENT AND GENERAL EXPENSES 11,087 FUNDRAISING EXPENSES 89 TOTAL EXPENSES 63,309 TRANSLATION SERVICES PROGRAM SERVICE EXPENSES 58,862 MANAGEMENT AND GENERAL EXPENSES 12,518 FUNDRAISING EXPENSES 101 TOTAL EXPENSES 71,481 SECURITY SERVICES PROGRAM SERVICE EXPENSES 947,262 MANAGEMENT AND GENERAL EXPENSES 201,459 FUNDRAISING EXPENSES 1,618 TOTAL EXPENSES 1,150,339 RISK MANAGEMENT PROGRAM SERVICE EXPENSES 27,245 MANAGEMENT AND GENERAL EXPENSES 5,794 FUNDRAISING EXPENSES 47 TOTAL EXPENSES 33,086 SUB-PARTNERS PROGRAM SERVICE EXPENSES 5,385,132 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 5.385,132

Return Reference	Explanation
FORM 990, PART XI, LINE 9	REFUND OF CONTRIBUTION -105,431

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# **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

Open to Public Inspection

Department of the Treasury

**SCHEDULE R** 

(Form 990)

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.qov/form990.

Internal Revenue Service Name of the organization Employer identification number

COUNTERPART INTERNATIONAL INC		acite i lactori nambor					
Part I Identification of Disposarded Entities Co	molete if the erganization	a answered "Ves" or	n Form 000 Da	rt IV line 22	505		
Part I Identification of Disregarded Entities Co  (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	<b>(f)</b> Direct controlling entity		
(1) SOCIAL SECTOR ACCELERATOR 2345 CRYSTAL DRIVE STE 301 ARLINGTON, VA 22202	INTERNATIONAL DEVELOPMENT	VA	679,352	803,196	COUNTERPART INTERNATIONAL I	√C	
Part II Identification of Related Tax-Exempt Orgor more related tax-exempt organizations duri		the organization an	iswered "Yes" (	on Form 990, Pa	irt IV, line 34 because it	had one	9
(a)  Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code secti	Public charity sta (if section 501(c)	atus (f) Direct controlling (3)) entity	Section (b) cont	g) on 512 (13) crolled tity?
(1)COUNTERPART FOUNDATION 2345 CRYSTAL DRIVE STE 301  ARLINGTON, VA 22202	INTERNATIONAL DEVELOPMENT	VA	501(C)(4)		COUNTERPART INTERNATIONAL INC	Yes	No
26-1838817							
							_
							_
							<u> </u>
						+	_

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	part	ral or aging ner?	<b>(k)</b> Percentage ownership
				",			Yes	No		Yes	No	
	-										<u> </u>	
											$\vdash$	
					•							

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

(a) Name, address, and EIN of related organization	<b>(b)</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	<b>(h)</b> Percentage ownership	(i) Section (b)(1 contro entit	i 512 l3) illed
(1)ENVIROVENTURES INC 2345 CRYSTAL DR STE 301 ARLINGTON, VA 22202 52-2322149	PRIVATE DEBT/EQUITY FUND	DE	COUNTERPART INTERNATIONAL INC	С			100 000 %	Yes Yes	No

chedule k (Form 990) 2015					Рад	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answ	ered "Yes" on 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					Yes	No
<b>1</b> During the tax year, did the orgranization engage in any of the following transactions with one or more i	related organizations li	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>1</b> b		No
<b>c</b> Gift, grant, or capital contribution from related organization(s)				<b>1</b> c		No
<b>d</b> Loans or loan guarantees to or for related organization(s)				<b>1</b> d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				<b>1</b> g		No
<b>h</b> Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)				1k		No
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)				1m		No
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No
$oldsymbol{q}$ Reimbursement paid by related organization(s) for expenses				<b>1</b> q		No
r Other transfer of cash or property to related organization(s)				1r		No
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)				<b>1</b> s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complet				S		
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining ai	mount II	nvolved	

#### Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												l I	
						_							

