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Form **990**

Department of the Treasury

DLN: 93493203001709

2016

OMB No 1545-0047

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

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 gov/form990.

Open to Public

Interna	l Revei	nue Service	P Information about	Tomi 550 and its instructions is at i	www ins g	1007101111330		Inspection
A F	or the	2016 c	ı alendar year, or tax year begini	ning 07-01-2016 , and ending 0	6-30-201	7		
B Che	ck if ap	oplicable	C Name of organization PLAN INTERNATIONAL INC			D Employ	er identif	fication number
		change	TEM INTERNATIONAL INC			51-016	9168	
	me cha tial ret	-	Doing business as					
Fin Detur		ninated				E Telephor	ne numher	-
		l return	Number and street (or P O box if ma 228 EAST 45TH STREET 15TH FLOOR		n/suite	·		
□Ар	olicatio	on pending	City or town, state or province, coun	rv. and ZIP or foreign postal code		(917) 3	98-0018	
			NEW YORK, NY 10017	,,		G Gross re	ceipts \$ 6	20,186,140
			F Name and address of principal	officer	H(a)	Is this a group re	turn for	
			ANNE-BIRGITTE ALBRECTSEN Dukes Court Woking			subordinates?		□Yes ☑ No
			GU BH		H(b)	Are all subordinations and a subordination of the s	tes	☐ Yes ☐No
T Ta	(-even	npt status	UK		_	If "No," attach a	list (see	instructions)
		'		nsert no)	7 H(c)	Group exemption	number	•
) W	ebsit	e:► ww	w plan-international org					
K Form	n of or	ganization	✓ Corporation ☐ Trust ☐ Associ	nation Other •	L Year	of formation 1937	M State	of legal domicile NY
K TOIT	1 01 01	gamzadon	En corporation En must En Assoc	Strie P				
Pa	rt I	Sum		-				
			scribe the organization's mission or nal development and humanitarian	most significant activities relief work to enable children who a	re at risk o	of poverty to achiev	e their p	otential
)Ce	_	THE THE CO	Tar action memoral and manifest and	Teller Work to chaple chilaren who a	re de mon e	n poverty to deme	e then p	- Contract
Ē	-							
Governance	,	Check thi	is how • I if the organization disc	continued its operations or disposed	of more th	an 25% of its net a	ccetc	
				g body (Part VI, line 1a)			3	11
Activities &	4	Number o	of independent voting members of	the governing body (Part VI, line 1b))		4	11
Œ	5	Total nun	nber of individuals employed in cal	endar year 2016 (Part V, line 2a) .			5	283
₹	6	Total nun	nber of volunteers (estimate if nec	essary)			6	75,654
ĕ	7a	Total unr	elated business revenue from Part	VIII, column (C), line 12			7a	0
	b	Net unrel	ated business taxable income from	Form 990-T, line 34			7b	
						Prior Year		Current Year
<u>a</u> i			ions and grants (Part VIII, line 1h)			593,070,	659	618,340,700
Ravenue		-	, ,					0
č			ent income (Part VIII, column (A), I	· · ·		668,	_	678,310
			venue (Part VIII, column (A), lines	•	_,	760, 594,500,		1,167,130
				t equal Part VIII, column (A), line 12	2)			620,186,140
			nd similar amounts paid (Part IX, c	, ,,	-	243,035,	589	255,807,725
		•	•	lumn (A), line 4) nefits (Part IX, column (A), lines 5–1	ω ⊢	174,376,	250	174 557 174
Ses				nn (A), line 11e)	°' -	490,		174,557,124 425,215
Expenses			raising expenses (Part IX, column (D), lir	• • • •		150,	-	723,213
ă			penses (Part IX, column (A), lines :	· <u>· · · · · · · · · · · · · · · · · · </u>		184,514,	688	182,328,472
			enses Add lines 13–17 (must equa	•		602,417,	_	613,118,536
			·	m line 12		-7,916,	771	7,067,604
\$ &					Ве	ginning of Current Y	'ear	End of Year
Net Assets or Fund Balances	20	T-+-!	ata (Dant V. Inna 16)			226.054	C74	252 254 241
Ass HBa			ets (Part X, line 16)			236,951,	_	252,356,261
ž,š			ulities (Part X, line 26) cs or fund balances Subtract line 2		·	62,653, 174,298,	_	64,374,076 187,982,185
	22 1 11	_	ature Block	1110111 111111 20		174,290,	071	107,902,103
Under	pena	alties of p	erjury, I declare that I have exami	ned this return, including accompany				
knowl any k	edge	and belie	f, it is true, correct, and complete	Declaration of preparer (other than	officer) is l	based on all inform	ation of	which preparer has
ally K	TOVVIC	l.						
		******	* ure of officer			2019-05-02 Date		
Sign		Signati	ure of officer			Date		
Here	;		BIRGITTE ALBRECTSEN CHIEF EXECUTING r print name and title	/E OFFICER				
		17	rint/Type preparer's name	Preparer's signature	Date		PTIN	
Paid			OBERT A PERILLO	ROBERT A PERILLO	Pare	Check 📙 ıf	. 1 TIA	
Paid Prei		r F	irm's name DYL & PERILLO INC	I		self-employed Firm's EIN ►		
	On	₹ " -	irm's address ▶ 446 BROADWAY			Phone no (401)	453-2020	
		· y	PROVIDENCE, RI 0290	9				
Mav t	he IR	S discuss	this return with the preparer show	n above? (see instructions)			V	res 🗆 No

Form	990 (2016)					Page 2
Par	Statem	ent of Program Serv	ice Accomplis	hments		
	Check if S	Schedule O contains a res	sponse or note to	any line in this Part III		🗹
1	Briefly describe	the organization's missior	า			
Inde	endent developm	nent and humanitarian org	ganization that str	ives		
2	Did the organiza	ition undertake any signif	icant program ser	vices during the year w	hich were not listed on	_
	the prior Form 9	90 or 990-EZ?				☐ Yes ☑ No
	If "Yes," describe	e these new services on S	Schedule O			
3	Did the organiza	ition cease conducting, or	make significant	changes in how it cond	ucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe	e these changes on Scheo	dule O			
4	Section 501(c)(3		itions are required	to report the amount	largest program services, as measu of grants and allocations to others, th	
4a	(Code) (Expenses \$	140,476,261	ıncludıng grants of \$) (Revenue \$)
	See Additional Date	a				
4b	(Code) (Expenses \$	85,179,510	ıncludıng grants of \$) (Revenue \$)
	See Additional Date	a				
4c	(Code) (Expenses \$	82,139,395	ıncludıng grants of \$) (Revenue \$)
	See Additional Date	a				
	(Code) (Expenses \$	249,787,972	ıncludıng grants of \$) (Revenue \$)
	See Schedule O					
4d	Other program s	services (Describe in Sche	edule O)			
	(Expenses \$	249,787,972 ır	ncluding grants of	\$) (Revenue \$)
4e	Total program	service expenses ▶	557,583,1	38		

Page 3

No

Nο

No

Nο

Nο

No

Nο

No

No

Nο

No

Nο

No

Form **990** (2016)

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

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18

19

4 Yes 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? 5 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? 6

Did the organization receive or hold a conservation easement, including easements to preserve open space. the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

7 8 9

Did the organization maintain collections of works of art, historical treasures, or other similar assets? 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 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🛸

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

29

Part IV Checklist of Required Schedules (continued) Yes 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a Nο b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Nο 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 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 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,"

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

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

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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, Part

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

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

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

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

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

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

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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

Yes 23 24a 24b

22

24c

24d

25a

25b

26

27

28a

28b

28c

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35a

35h

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37

Yes

Yes

Yes

Yes

Form 990 (2016)

Page 4

Nο

Νo

Nο

orm	990 (2016)			Page
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			✓
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 17 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 10			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	BL , BR , BM , CO , DR , EC , ES , GT , HA , HO , NU , PA , PE , EG , ET , JO , KE , MI , MZ , RW , OD , SU , TZ , UG , ZA , ZI , BN , UV , CM , CT , GH , GV , PU , LI , ML , NG ,		, , , ,	
5a	SG, SL, TO, BG, CB, CH, TT, IN, ID, LA, NP, PK, RP Wild Yeth, engenidate on an apartt, heb farp rophibote out to the hebit far Tilang Micron at any time during the tax year?	5a		No
b	BRE ANSTRUCTIONS BARTY INDURED BARTY OF FORMULE OF BARTY OF FORMULE BARTY	5b		No
_	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50		
·	If res, to fine 3a of 3b, did the organization merofin 6000-1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
		7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
22	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
_	If "Yes," has it filed a Form 720 to report these payments ? If "No," provide an explanation in Schedule O	14b		l

	990 (2016)			Page 6
Part	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	•	nse to li	
Sa	Check if Schedule O contains a response or note to any line in this Part VI			✓
36	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 11			
	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 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	Yes	
6	Did the organization have members or stockholders?	6	Yes	
	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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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 Revenu	e Code		NI -
10-	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	No
	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?	10a	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	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	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	164		
So	ction C. Disclosure	16b		<u> </u>
<u> </u>	List the States with which a copy of this Form 990 is required to be filed			
	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			
19	Own website Another's website Upon request Other (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			
20	State the name, address, and telephone number of the person who possesses the organization's books and records MANDY STEWARD CO PLAN INTERNATIONAL 305 East 47th Street FI New York, NY 10017 (917) 398-0018			

organization and any related organizations

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

- year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation $\,$ Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- 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 director organization, more than \$10,000 of reportable control 											
List persons in the following order individual trus compensated employees, and former such perso		rs, ınstı	itutio	nal t	rust	ees,	offic	ers, key employees	s, highest		
\square Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	any (current officer, dire	ctor, or trustee		
(A) Name and Title	(B) Average hours per week (list any hours	pers	an on on is	e bo both	t che x, u n an	eck m Inless office ustee	er	compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) JOSHUA LISWOOD	6 00	×		х				0	0	0	
(2) GUNVOR KRONMAN Vice Chair	3 00	×						0	0	0	
(3) WERNER BAUCH Treasurer	3 00	х						0	0	0	
(4) MAYU AVILA Director	2 00	x						0	0	0	
(5) GUNTER HAAG Director	2 00	×						0	0	0	
(6) GERALD HUESTON Director	2 00	×						0	0	0	
(7) DOROTA KEVERIAN Director	2 00	х						0	0	0	
(8) SONALI KHAN Director	2 00	×						0	0	0	
	2 00							i e		i	

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(9) ANNE SKIPPER

(10) IMERU TAMERAT YIGEZU

(11) CARLOS APARICIO

Chief Executive Officer

Chief Program Officer

(14) PAMELA INNES

(15) TARA CAMM

Chief Legal Officer

(16) ROLAND ANGERER

Regional Director-East Africa

Regional Director-Americas

(17) MATTHEW DONALD CARLSON

(13) JONATHAN MITCHELL

Director of People and Culture

......

(12) ANNE-BIRGITTE ALBRECTSEN

...........

Director

Director

0

0

0

0

152,328

185.298

99,000

0

0

0

0

0

255,170

211,699

158.219

173,771

10,836

24.547

BP 131

NG

Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (E) (F)

	Name and Title	Average hours per week (list any hours	than o	one b	ox, ι an of	ot che unle: fficer	neck mo ess pers er and a tee)	son	compensation from the organization (W-	Reportable compensation from related organizations	Estir amount compe fror	mated t of other ensation m the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	- 2/1099-MISC)	(W- 2/1099- MISC)	rela	ation and ated izations
(18) COR	RINA VILLACORTA	48				X			179,182			
Regional	Director-Americas	······································	<u> </u>	Щ.	\perp	<u> </u>	<u> </u> '	\perp	<u> </u>		\bot	
(19) HEN	NRICUS DIJESSELBLOEM	48					l x		171,836	ĺ		18,907
Operation	ils Support Manager	<u> </u>	ļ	\perp	\perp	\perp	<u> </u>	Щ.	<u> </u>			
`	NIEL MCCORMICK Support Mgr -Strategic Prog	48	ļ <u> </u>				×		136,047			14,700
·	IN MCDONAGH	48					×		151,068		T	4,685
Country	Director-manand	 '	ļ	—	 	+	<u> </u>	₩				
(22) SHA	ABNAM SHAHNAZ	l 48 [/]	1				l x		176,592	1		
Ploj Dil-	-Advancing Adolescent Health		<u> </u>	\perp	\perp	\perp	<u> </u>	<u> </u>	=,			
(23) AGU	JIMA TANKOANO	48	1				x		166,456	1		-300
Chief of F	Party	<u></u> ,	<u> </u>		\perp	\perp	'	\perp	100,130			
(24) MAR	RK PIERCE	48	4				'	X	183,447	1		24,019
Regional	Director-Asia	···	<u> </u>	<u> </u>	\perp	1	ļ'	<u></u>	103,447		 	
		<u> </u>	<u> </u>	<u> </u>	\perp	\perp	ļ'	\perp				
	· ·	1 '	1				,			1		
1b Sub	b-Total			—	_		>					
c Tot	tal from continuation sheets to Part \	VII, Section A					▶ _					
	tal (add lines 1b and 1c)						•		1,601,254			896,253
2 To	otal number of individuals (including but f reportable compensation from the orga	t not limited to t				√е) \	who re	ceiv	ed more than \$100,	,000		_
						—		—			Yes	No
	old the organization list any former office ne 1a? <i>If "Yes," complete Schedule J for</i>	•	•				ee, or h	_	•		3 Yes	110
	or any individual listed on line 1a, is the organization and related organizations gre									<u> </u>	100	+
	ndividual					•	•	•		[,	4 Yes	
5 D	Old any person listed on line 1a receive of	or accrue compe				y un	related	d org	ganızatıon or ındıvıd	Jual for		

services rendered to the organization 2 If "Yes," complete Schedule 1 for such person .

Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A)

(B) Description of services (C) Name and business address Compensation

ITC Global Networking Solutions Programme Management

799,711

614,629

850 Cranberry Woods 2240

Cranberry, PA 16066 Pricewaterhouse Programme Management

Coopers LLP 1 Hays Lane London SE RD

Programme Management

Tech Mahindra Ltd Programme Management

347,275 Infocity Unit 12 Survey 64 Madhapur IN 332,985 The Task Force for Global Health Ciudad de Guatemala GT Alher Abdelbh Programme Monitoring

133,126 Tıllaberı 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization \blacktriangleright 18 Form **990** (2016)

Part '	VI:	II Statement of	f Revenue						
		Check if Schedul	le O contains a	a respo	onse or note to any	line in this Part VIII			<u> </u>
						(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from
							function revenue	revenue	tax under sections 512-514
s s	18	Federated campaig	ıns	1a				•	
Contributions, Giffs, Grants and Other Similar Amounts		b Membership dues		1 b					
<u>.</u> 6.	'	c Fundraising events		1c					
iffs ar A		d Related organization		1d	607,810,234				
3, G m::		e Government grants (c		1e	1,980,563				
ig is	1	f All other contributions and similar amounts n	i, gifts, grants, not included	1f	8,549,903				
but	١.	above 9 Noncash contribution	one included						
ng G	'		ons included	66,9	008,462				
S G	h	Total.Add lines 1a-1	1f		•	618,340,700			
ue					Business	s Code			
Service Revenue	2a -			-					
2 <u>₹</u>	b	,		_					
r vic	С								
32	d								
Program	f	All other program se							
Prog		Total.Add lines 2a-2			>				
		Investment income (i			nterest, and other	1			T
	5	similar amounts) .			•	458,896			458,896
		Income from investm Royalties	ent of tax-exe		ond proceeds	-			
		inoyanies i i i	(ı) Real		(II) Personal				+
	6a	Gross rents							
	H	Less rental expenses				_			
	_	'							
	C	Rental income or (loss)							
	d	Net rental income o	or (loss)			_			
			(ı) Securit	ies	(II) Other				
	7a	Gross amount from sales of			219,41	4			
		assets other than inventory							
	b	Less cost or				\dashv			
		other basis and sales expenses							
		Gain or (loss)			219,41	⊣			
		Net gain or (loss)			•	219,414			219,414
<u>a</u>	Ua			of					
enr		contributions reporte See Part IV, line 18	ed on line 1c)	а					
Rev	ь	Less direct expense		ь		-			
Other Revenue	c	: Net income or (loss)	from fundrais	ing ev	ents	_			
Oth	9a	i Gross income from g See Part IV, line 19		es					
		,		а	}				
		Less direct expense		b					
		: Net income or (loss) aGross sales of invent		activit	ies . •	_			
	10.	returns and allowand	ces						
				a		_			
		Less cost of goods		b					
	_	Net income or (loss) Miscellaneous		invent	Business Code				
	11	•aOther Income			90009	9 1,167,130			1,167,130
	b	,							
	c	:							
									1
		All other revenue							
		Total. Add lines 11a			•	1,167,130			1
	12	! Total revenue. See	Instructions	• •	• • • •	620,186,140			1,845,440
									Form 990 (2016)

Forr	m 990 (2016)				Page 10
	Int IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	ınızatıons must comp	olete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		скраново	general expenses	
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, line 15 and 16	255,807,725	255,807,725		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,447,628	1,348,628	99,000	0
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	161,884,298	157,211,856	192,643	4,479,799
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	688,594	655,675	0	32,919
9	Other employee benefits	10,250,505	9,795,584	0	454,921
10	Payroll taxes	286,099	277,982	0	8,117
11	Fees for services (non-employees)				
ä	a Management	32,251,252	0	32,251,252	0
ı	D Legal	712,608	681,127	20,666	10,815
(C Accounting	2,016,343	1,029,725	958,131	28,487
(d Lobbying	217,092	217,092	0	0
•	e Professional fundraising services See Part IV, line 17	425,215			425,215
1	Investment management fees				
ģ	GOther (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	17,782,881	17,385,139	397,742	0
12	Advertising and promotion	2,459,268	1,674,363	3,276	781,629
13	Office expenses	33,819,080	31,199,419	2,422,041	197,620
14	Information technology	6,865,178	6,799,266	0	65,912
15	Royalties				
16	Occupancy	18,292,907	18,258,299	0	34,608
17	Travel	48,866,342	47,504,380	947,154	414,808
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	5,831,986	5,831,986	0	0
	Interest	701,310	663,204	36,407	1,699
21	Payments to affiliates	7,729,708	588	7,729,120	0
22	Depreciation, depletion, and amortization	1,428,200	1,420,373	0	7,827
23	Insurance	1,086,282	1,074,501	0	11,781
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a Memberships & Subscriptions	736,187	666,862	53,166	16,159
	b Exchange Gains/Losses	1,531,848	-1,920,636	3,428,881	23,603
	c				
	d d				
	e All other expenses				
	Total functional expenses. Add lines 1 through 24e	613,118,536	557,583,138	48,539,479	6,995,919
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form **990** (2016)

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Form 990 (2016)

11

12

13 14

15

16

17

18

19

20

21

Assets or 30

Net

31

32

33

34

Investments—publicly traded securities .

Intangible assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities

Grants payable . . .

Deferred revenue . . .

Total net assets or fund balances

Total liabilities and net assets/fund balances

Investments—other securities See Part IV, line 11 . Investments—program-related See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Other assets See Part IV, line 11

	(A) Beginning of year		(B) End of year
1 Cash-non-interest-bearing	85,428,883	1	81,585,304
2 Savings and temporary cash investments	94,329,527	2	90,841,819
3 Pledges and grants receivable, net		3	
4 Accounts receivable, net	533,084	4	-878,869
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	

	5	Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L				5	
S	6	Loans and other receivables from other disqualisection 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	n 4958 Itions c	(c)(3)(B), and of section 501(c)(9)		6	
et	7	Notes and loans receivable, net		7			
SS	8	Inventories for sale or use		1,126,407	8	1,450,618	
A	9	Prepaid expenses and deferred charges	26,909,935	9	31,694,526		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	34,018,287			
	ь	Less accumulated depreciation	3,988,280	10 c	3,388,536		

29.789

44.244.538

252,356,261

34,944,619

187,982,185

252.356.261

Form **990** (2016)

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21

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33

34

174,298,671

236.951.674

45.985

24.589.573

236.951.674

19,701,093

Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties, 42.951.910 25 29.429.457 25 and other liabilities not included on lines 17-24) Complete Part X of Schedule D 62,653,003 26 Total liabilities. Add lines 17 through 25 . 26 64,374,076 Fund Balances Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 54.319.254 27 27,420,770 28 119,979,417 28 160,561,415 Temporarily restricted net assets 29 Permanently restricted net assets 29

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

Separate basis

Audit Act and OMB Circular A-133?

Consolidated basis ☐ Both consolidated and separate 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?

2c

3a

3b

Yes

Yes

Yes Form 990 (2016)

Additional Data

Software ID: 16000371

Software Version: **EIN:** 51-0169168

Name: PLAN INTERNATIONAL INC

Form 990 (2016)

Form 990, Part III, Line 4a:

PROTECTION AND ASSISTANCE IN EMERGENCY SITUATIONS ACTIVITIES INCLUDE RISK REDUCTION TRAINING AND RELIEF ACTIVITIES SUCH AS THE DISTRIBUTION OF FOOD AND WATER, THE PROVISION OF SHELTER AND SANITATION FACILITIES, AS WELL AS HEALTH AND PSYCHOLOGICAL SUPPORT FOR CHILDREN WHO ARE VICTIMS OF DISASTER DURING THE YEAR ENDED JUNE 30, 2017 PLAN INTERNATIONAL, INC (PLAN) CARRIED OUT 89 DISASTER RESPONSES GLOBALLY

HEALTHY START IN LIFE PLAN SUPPORTS A RANGE OF ACTIVITIES AIMED AT REDUCING NEONATAL AND MATERNAL MORTALITY AND INCREASING CHILD SURVIVAL AND THE HEALTHY DEVELOPMENT OF CHILDREN THIS INCLUDES BUILDING AND EQUIPPING PRE-SCHOOL CENTRES AND CLINICS AND THE PROMOTION OF UNIVERSAL BIRTH REGISTRATION. THE TRAINING OF HEALTH WORKERS AND THE PREVENTION OF EARLY CHILDHOOD ILLNESSES. DURING THE YEAR ENDED JUNE 30, 2017 PLAN REACHED

Form 990, Part III, Line 4b:

12,540,813 GIRLS, BOYS, WOMEN AND MEN THROUGH ITS HEALTHY START PROGRAMS

Form 990, Part III, Line 4c: OUALITY EDUCATION PLAN SEEKS TO PROMOTE FREE EQUAL ACCESS TO QUALITY EDUCATION AND LIFE- SKILLS TRAINING TO HELP CHILDREN AND YOUNG PEOPLE REACH THEIR FULL POTENTIAL THIS IS DONE THROUGH ACTIVITIES SUCH AS THE BUILDING AND EQUIPPING OF CLASSROOMS, TEACHER TRAINING AND ADVOCATING FOR EDUCATION POLICY IMPROVEMENT. DURING THE YEAR ENDED JUNE 30, 2017 PLAN REACHED 7,959,579 GIRLS, BOYS, WOMEN & MEN THROUGH ITS EDUCATION.

PROGRAMS

efile	e GR/	APHIC pri	t - DO NO	T PROCESS	As Filed Data -			DLN: 93	3493203001709
	m 990	OULE A		nplete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 990	rganization of trust. D-EZ.	Ort r a section	2016
		the Treasury	► Inf	ormation abo	ut Schedule A (Form www.irs.a	990 or 990-EZ) ov/form990.	and its instru	uctions is at	Open to Public Inspection
Nam	e of th	nie Service h e organiza ATIONAL INC	ion		<u></u>			Employer identification	
PLAIN I	INTERIN	ATIONAL INC						51-0169168	
Pa					us (All organization			See instructions.	
1 1	rganiz				e it is (For lines 1 throssociation of churches	_		\(A)(i)	
2		•)(A)(I).	
3					(1)(A)(ii). (Attach Sch	,		, v	
4			•	•	vice organization described in consumption with				stor the beenstalle
-	Ш		and state _		ed in conjunction with	a nospital descrit	Jed III Section	170(b)(1)(A)(iii). Er	tter the hospital's
5			tion operate iv). (Compl		it of a college or unive	rsity owned or op	erated by a gov	vernmental unit describ	ped in section 170
6	П			•	r governmental unit de	scribed in sectio	n 170(b)(1)(A)(v).	
7				rmally receives (vi). (Complete		s support from a	governmental (unit or from the genera	al public described in
8		A communi	y trust desc	rıbed ın sectio ı	n 170(b)(1)(A)(vi)	(Complete Part II)		
9					escribed in 170(b)(1) iee instructions Enter			with a land-grant colle college or university	ege or university or a
10		from activit	es related to income and	o its exempt fur unrelated busir	nctions—subject to cer	tain exceptions, a	nd (2) no more	ns, membership fees, a than 331/3% of its su sses acquired by the o	oport from gross
11		•			d exclusively to test fo	r public safety Se	ee section 509	9(a)(4).	
12	✓	more public	ly supported	l organizations		09(a)(1) or sec	tion 509(a)(2	s of, or to carry out th 2). See section 509(a s 12e. 12f. and 12g	
а	✓	Type I. A so	upporting or n(s) the pow	ganızatıon oper	rated, supervised, or co appoint or elect a majo	ontrolled by its su	pported organi	zation(s), typically by of the supporting orgai	
b		Type II. A manageme	supporting on t of the sup	organization sup	pervised or controlled i ation vested in the sar			organization(s), by hav ge the supported orgai	
С		Type III fo	ınctionally	integrated. A				nd functionally integra	ted with, its
d		functionally	ıntegrated	The organization		fy a distribution r		ith its supported organ d an attentiveness requ	
e		Check this	oox if the org	ganızatıon recei	•	nation from the IR	S that it is a Ty	ype I, Type II, Type III	functionally
f -				d organizations				2	1
(i)N		de the follow f supported o			upported organization((iii) Type of	s) (iv	·1	(v)	(vi)
(1)14	ame o	т заррогее с	n ganizacion	(II)EIN	organization (described on lines 1- 10 above (see instructions))	Is the organiza	ition listed in	Amount of monetary support (see instructions)	Amount of other support (see instructions)
						Yes	No	1	
See	Addıtıc	onal Data Tal	le						
Total	1		21					607,810,234	
Total		work Reduc			 nstructions for	Cat No 11285	F	Schedule A (Form 99	

Sch	edule A (Form 990 or 990-EZ) 2016						Page 2
P	art II Support Schedule for	Organizations	Described in S	ections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A	\)(vi)
	(Complete only if you ch						ıfy under Part
	III. If the organization fa	ails to qualify un	der the tests lis	ted below, plea	se complete Par	t III.)	
	Section A. Public Support	1	1	ı	1		
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grant ") Tax revenues levied for the						
2	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						0
_	line 4 Section B. Total Support						
_	Calendar year	1					(0)
	(or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						0
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI)						
11							
12	10 Gross receipts from related activities,	etc (see instruction	ons)			12	
	First five years. If the Form 990 is fo			und facuntly an fifth	h tay yaar aa a aa		In particular
13		=					_
	check this box and stop here is check this box and stop here				<u> </u>		
	Public support percentage for 2016 (lir	• •	_	(6 \)		1	
	Public support percentage for 2015 (iii			column (1))		14	0 %
	33 1/3% support test—2016. If the			on line 12 and lin	a	15	hov
162					16 14 15 33 1/3 /0 0	i more, check this	▶ □
b	and stop here. The organization quali 33 1/3% support test—2015. If th				and line 15 is 33 t	1/3% or more che	
L	box and stop here. The organization				and mic 15 is 55 i	1/3 /0 OF MOTE, CHE	►
17-	10%-facts-and-circumstances test				ne 13 16a or 16b	and line 14	P L
1/6	is 10% or more, and if the organization						
	in Part VI how the organization meets						
	organization						▶ □
b	10%-facts-and-circumstances tes						
	15 is 10% or more, and if the organize Explain in Part VI how the organization						
	•	m meets the Tact	s-anu-chicumstand	es lest the orga	amzadon qualines	as a publicly	. □
	supported organization Private foundation. If the organization	on did not check a	hoy on line 13 1	6a 16h 17a or 1	17h check this box	x and see	▶□
18	-	on did not check a	DOX ON THE 13, 1	oa, 100, 17a, 01 1	L/D, CHECK HIIS DO	and see	⊾⊓
	instructions				Cohod	la A (Earm 990 a	₩ 000 E7\ 2016

-	Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	qualify under t	the tests listed	below, please co	omplete Part II.)	
S	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not						
2	include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						

5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c.		1	1	1		1

b	received from other than disqualified persons that exceed the greater of	ı						
	\$5,000 or 1% of the amount on line 13 for the year	1						
c	Add lines 7a and 7b	·						
8	Public support. (Subtract line 7c							
	from line 6)							
Se	ection B. Total Support							
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6	(a)2012	(b) 2013	(c) 2014	(d)2015	(e) 201	.6	(f)Total
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources							
ь	Unrelated business taxable income							
	(less section 511 taxes) from							
	businesses acquired after June 30,							
С	1975 Add lines 10a and 10b							
11	Net income from unrelated business	<u> </u>						
	activities not included in line 10b,							
	whether or not the business is							
12	regularly carried on Other income Do not include gain or							
1 - 2	loss from the sale of capital assets							
	(Explain in Part VI)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is fo	r the organization	n's first, second. tl	ı ıırd, fourth, or fıft	th tax year as a sec	tion 501(c)(3) or	rganization,
	check this box and stop here	-	,		,	,	, , ,	▶ □
Se	ection C. Computation of Public	Support Perce	entage					
15	Public support percentage for 2016 (lin			column (f))		15		0
16	Public support percentage from 2015 S	schedule A, Part I	II, line 15			16		
	ection D. Computation of Investi	ment Income	Percentage			1 =- 1		
17	Investment income percentage for 201			line 13, column (1	f))	17		0
18	Investment income percentage from 2	015 Schedule A,	Part III, line 17			18		
	331/3% support tests—2016. If the			on line 14, and lii	ne 15 is more than		and lin	e 17 is not
	more than 33 1/2% check this box and i							▶ □

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Schedule A (Form 990 or 990-EZ) 2016

1

10a

answer line 10b below

Section A. All Supporting Organizations Yes No

Page 4

Yes

Yes

No

No

No

No

No

No

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Yes

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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)

2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

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 Part VI when and how the organization made the determination

За 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

3с checked 12a or 12b in Part I, answer (b) and (c) below 4a organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported 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 organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

Yes Yes (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 5a amendment to the organizing document)

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

No 5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

organization's supported organizations? If "Yes," provide detail in Part VI. 6 No

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

7 substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7 No Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," 8

complete Part I of Schedule L (Form 990 or 990-EZ) 8

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 Part VI.

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Pa	art IV Supporting Organizations (continued)				
	oupporting organizations (community)		Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?			-110	
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the				
a	governing body of a supported organization?				
ь	A family member of a person described in (a) above?	11b		No	
	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	11c		No	
_					
S	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 Part VI 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	Yes		
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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting				
	organization	2		No	
	Castian C. Tuna II Sumparting Organizations				
3	ection C. Type II Supporting Organizations		V	NI-	
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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)		Yes	No	
		1			
S	ection D. All Type III Supporting Organizations				
			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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 Part VI 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 Part VI the role the organization's supported organizations played in this regard	3			
		3			
S	Section E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)			
	a The organization satisfied the Activities Test Complete line 2 below	•			
	b The organization is the parent of each of its supported organizations. Complete line 3 below				
	c	ınstru	ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a 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 Part VI identify those supported organizations and explain 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			
	b 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 Part VI 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.	20			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	За			
	the supported organizations? <i>Provide details in Part VI</i> .				
	b 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			

-	Add lifles 1 till odgif 5			
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	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount 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		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount 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)		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	6 Multiply line 5 by 035		
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	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

e Excess from 2016. . . .

Part VI	Supplemental Information.
	Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
90 Sched	ule A, Supplemental Information

990 Schedule A, Supplemental Information				
Return Reference	Explanation			
Pt IV Sec A Ln 2	The foreign organizations are charitable organizations in their respective countries and w ould not be considered Private Foundations were they organized in the United States becaus e they would be considered publicly supported organizations under Internal Revenue Code Se ction $170(b)(1)(A)(vi)$			

990 Schedule A, Supplemental Information				
Return Reference	Explanation			
Pt IV Sec A Ln 4b				

990 Schedule A, Supplemental Information				
Return Reference	Explanation			
Pt IV Sec A Ln 4c	A budget for grant amounts to Plan International, Inc (Plan) member National Organization s may be included in the budget proposal to the Members' Assembly each year and the Member s' Assembly approves the overall budget for Plan However, the decision on the overall ann ual budget amount to propose is made by the Plan Board and individual grants within this a re proposed by Plan management Plan management or the Plan Board also decides on the rele ase of grants to Plan member National Organizations No one National Organization controls Plan			

Schedule A, Supplemental Information					
Return Reference	Explanation				
er Addl Info	PUBLIC CHARITY STATUS - ADDITIONAL INFORMATION				

990 Schedule A, Supplemental Information			
Return Reference	Explanation		
Other Addl Info	As noted in Part I, Plan is a Type I supporting organization. In addition, Plan also qualifies as an organization that normally receives a substantial part of its direct and indirect support from a governmental unit and from the general public as described in IRC section 170(b)(1)(A)(vi) As a result, Plan qualifies for the first Special Rule as noted on Schedule B, Schedule of Contributors		

990 Scheaule A, Supplemen	90 Schedule A, Supplemental Information									
Return Reference	Explanation									
Pt I Ln 12g	All of the organizations listed on line G are non-profit charitable fundraising organizations one operating in their home countries. Funds obtained by these National Organizations are distributed by Plan International, Inc. to support children, families and communities thro ugh Plan International, Inc. 's field offices in 50 countries. Plan International USA, Inc. is the only affiliated entity incorporated and operating in the United States and is exem pt from taxation under Internal Revenue Code Section 501(c)(3) and receives a substantial part of its support from the general public.									

Schedule A (Form 990 or 990-F7) 2016

Additional Data

Software ID: 16000371

Software Version:

EIN: 51-0169168

Name: PLAN INTERNATIONAL INC

Form 990, Sch A, Part I, Line 12g - Provide the following information about the supported organization(s).

orm 990, Sch A, Part I, Line 12g - Provide the following information about the supported organization(s).										
(i)Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv Is the org. Isted in governing o	anızatıon n your	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
			Yes	No						
(A) Plan Int'l USA Inc	135661832	7	Yes		35,923,747	0				
(A) Plan Int'l USA Inc	135661832	7	Yes		35,923,747	0				
(A) Plan Int'l Australia	000000000	7	Yes		35,283,955	0				
(A) Plan Int'l Australia	000000000	7	Yes		35,283,955	0				
(B) Plan Belgium	000000000	7	Yes		11,601,074	0				
(B) Plan Belgium	000000000	7	Yes		11,601,074	0				
(C) Plan Int'l Canada	000000000	7	Yes		126,688,777	0				
(C) Plan Int'l Canada	000000000	7	Yes		126,688,777	0				
(D) Plan Suomı Saatıo	000000000	7	Yes		10,959,967	0				
(D) Plan Suomı Saatıo	000000000	7	Yes		10,959,967	0				
(E) Plan Int'l France	000000000	7	Yes		10,421,731	0				
(E) Plan Int'l France	000000000	7	Yes		10,421,731	0				
(F) Plan Int'l Dtschlnd EV	000000000	7	Yes		128,213,295	0				
(F) Plan Int'l Dtschlnd EV	000000000	7	Yes		128,213,295	0				
(G) Plan Japan	000000000	7	Yes		20,011,223	0				
(G) Plan Japan	000000000	7	Yes		20,011,223	0				
(H) Stichting Plan Ndrind	000000000	7	Yes		30,441,440	0				
(H) Stichting Plan Ndrind	000000000	7	Yes		30,441,440	0				
(I) Plan Norge	000000000	7	Yes		40,779,419	0				
(I) Plan Norge	000000000	7	Yes		40,779,419	0				
(J) Plan Int'l de Espana	000000000	7	Yes		23,421,208	0				
(J) Plan Int'l de Espana	000000000	7	Yes		23,421,208	0				
(K) Plan Int'l Sverige	000000000	7	Yes		39,972,503	0				
(K) Plan Int'l Sverige	000000000	7	Yes		39,972,503	0				
(L) Plan Int'l UK	000000000	7	Yes		56,896,919	0				
(L) Plan Int'l UK	000000000	7	Yes		56,896,919	0				
(M) Plan Denmark	000000000	7	Yes		6,767,366	0				
(M) Plan Denmark	000000000	7	Yes		6,767,366	0				
(N) Plan Ireland	000000000	7	Yes		10,768,888	0				
(N) Plan Ireland	000000000	7	Yes		10,768,888	0				
<u> </u>	1	1	1	1						

(i)Name of supported organization (ii)EIN (iii) (iv) (v) (vi) Type of organization Amount of other Is the organization Amount of monetary (described on lines listed in your support (see support (see 1- 9 above (see governing document? instructions) instructions) instructions)) No Yes (P) Plan Korea 000000000 7 9,952,085 Yes (P) Plan Korea 000000000 9,952,085 7 Yes

Form 990, Sch A, Part I, Line 12g - Provide the following information about the supported organization(s).

· ·		·			_
(A) Plan Switzerland	000000000	7	Yes	3,519,507	0
(A) Plan Switzerland	000000000	7	Yes	3,519,507	0
(B) Plan Hong Kong	00000000	7	Yes	6,187,130	0

0

0

(A) Plan Switzerland	000000000	7	Yes	3,519,507	0
(B) Plan Hong Kong	00000000	7	Yes	6,187,130	0
(B) Plan Hong Kong	00000000	7	Yes	6,187,130	0
(C) Plan India	000000000	7	Yes	0	0
(C) Plan India	000000000	7	Yes	0	0

(B) Hall Holly Kong	000000000	/	ies	0,167,130	U
(C) Plan India	000000000	7	Yes	0	0
(C) Plan India	000000000	7	Yes	0	0
(D) Plan Italia Onlus	000000000	7	Yes	0	0
(D) Plan Italia Onlus	000000000	7	Yes	0	0

(C) Plan Indıa	000000000	7	Yes	0	0
(D) Plan Italia Onlus	000000000	7	Yes	0	0
(D) Plan Italia Onlus	000000000	7	Yes	0	0
(E) Eundacion Plan (Columbia)	00000000	7	Voc	0	

Yes

(D) Plan Italia Onlus	000000000	7	Yes	0	
(D) Plan Italia Onlus	000000000	7	Yes	0	
(E) Fundacion Plan (Columbia)	000000000	7	Yes	0	

7

000000000

(E) Fundacion Plan (Columbia)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

DLN: 93493203001709

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

3

5

SCHEDULE C (Form 990 or 990-

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** PLAN INTERNATIONAL INC. 51-0169168 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-

Grassroots ceiling amount
(150% of line 2d, column (e))

Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2016

Grassroots nontaxable amount

Pt II-B Line 1 Pt II-B Line 1

Pt II-B Line 1

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes Nο **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Yes Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Yes Media advertisements? Yes 26,570 Mailings to members, legislators, or the public? Nο Publications, or published or broadcast statements? Yes 28,399 Grants to other organizations for lobbying purposes? Yes 77,472 Yes Direct contact with legislators, their staffs, government officials, or a legislative body? 41,590 h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Yes 43,061 Other activities? Nο Total Add lines 1c through 1i 217,092 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Nο b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6). No 1 Were substantially all (90% or more) dues received nondeductible by members? 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year С Total 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information Return Reference Explanation Pt II-B Line 1 Bangladesh Pt II-B Line 1 Domestic Violence Act 2010

Decree 8-2015 of the National Congress of the Republic of Guatemala

Child Marriage Restraint Act 2017

Guatemala

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

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

As Filed Data -

DLN: 93493203001709

OMB No 1545-0047

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.

Open to Public Inspection

Internal Revenue Service

Department of the Treasury

(Form 990)

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

	ne of the organization I INTERNATIONAL INC		Employer id	entification n	lumber
			51-0169168		
Pai	Organizations Maintaining Donor Complete if the organization answere	Advised Funds or Other Similar Fund "Yes" on Form 990, Part IV, line 6.	ds or Accounts.		
		(a) Donor advised funds	(b)Funds an	nd other accour	nts
	Total number at end of year				
!	Aggregate value of contributions to (during year)				
1	Aggregate value of grants from (during year)				
	Aggregate value at end of year				
i	Did the organization inform all donors and donor funds are the organization's property, subject to		or advised		es 🗆 No
,	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?			□ Ye	es 🗌 No
Par	t III Conservation Easements. Complet	e if the organization answered "Yes" on	Form 990, Part IV	/, line 7.	
	Purpose(s) of conservation easements held by the	e organization (check all that apply)			
	Preservation of land for public use (e g , rec	reation or education)	of an historically imp	ortant land are	ea
	Protection of natural habitat	☐ Preservation	of a certified historic	: structure	
	Preservation of open space				
!	Complete lines 2a through 2d if the organization easement on the last day of the tax year	neld a qualified conservation contribution in th		ation at the End of	the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easemen	ts	2b		
С	Number of conservation easements on a certified	historic structure included in (a)	2c		
d	Number of conservation easements included in (c structure listed in the National Register	acquired after 8/17/06, and not on a historic	2d		
1	Number of conservation easements modified, trantax year ▶	nsferred, released, extinguished, or terminate	d by the organization	n during the	
ļ	Number of states where property subject to conse	ervation easement is located >			
i	Does the organization have a written policy regar and enforcement of the conservation easements is		dling of violations,	☐ Yes	□ No
,	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing conservation eas		the year
1	Amount of expenses incurred in monitoring, inspect	ecting, handling of violations, and enforcing co	onservation easemen	its during the y	/ear
	Does each conservation easement reported on lin and section $170(h)(4)(B)(II)$?	e 2(d) above satisfy the requirements of sect	ion 170(h)(4)(B)(i)	☐ Yes	□ No
l	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text	of the footnote to the organization's financial	expense statement, statements that des	and	
art		tions of Art, Historical Treasures, or	Other Similar A	ssets.	
.a	Complete if the organization answere If the organization elected, as permitted under SI art, historical treasures, or other similar assets he	AS 116 (ASC 958), not to report in its revenu			orks of
b	provide, in Part XIII, the text of the footnote to it If the organization elected, as permitted under Si			e sheet works	of art,
	historical treasures, or other similar assets held following amounts relating to these items	or public exhibition, education, or research in	furtherance of public	: service, provi	ide the
(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, following amounts required to be reported under		r financial gain, prov	ide the	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$_		
b	Assets included in Form 990, Part X		▶ \$		

Cat No 52283D

Schedule D (Form 990) 2016

Par	t IIII	Organizations Ma	aintaining Col	ections of	Art, Histo	rical T	reas	ures, or	Other	Similar As	sets (continued	1)
3		the organization's acq (check all that apply)	uisition, accessior	n, and other re	ecords, chec	k any of	f the fo	ollowing th	nat are a	sıgnıfıcant u	se of its	s collectio	n
а		Public exhibition			c		Loar	or excha	nge prog	ırams			
b		Scholarly research			€		Othe	er					
С		Preservation for future	e generations										
4	Provide Part	de a description of the	organızatıon's coll	ections and ex	xplain how	they furt	her th	e organiza	ation's e	xempt purpos	se in		
5	Durin	g the year, did the orga s to be sold to raise fur								nılar	☐ Ye	es 🗆	No
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			on Form 9	90, Pari	t IV, I	ıne 9, or	reporte	ed an amou	nt on I	Form 99	0, Part
1a		e organization an agent ded on Form 990, Part)		an or other int	ermediary 1	or contr	butior	ns or othe	r assets	not	☐ Ye	es 🗌	No
ь	If "Y∈	es," explain the arrange	ement in Part XIII	and complete	the follow	ng table				Ar	mount		
c	Begin	ning balance							1c				
d	Addıt	ions during the year							1d				
е	Dıstrı	butions during the year	r						1e				
f	Endın	ig balance							1f				
2 a		ne organization include	an amount on Fo	rm 990, Part >	K. line 21, f	or escro	w or cu	ustodial ad	ccount lia	ability?	□ Ye		No.
b	If "Ye	es," explain the arrange	ement in Part XIII	Check here if	the explan	atıon ha	s beer	provided	l ın Part :	XIII			
Pa	rt V	Endowment Fund	ds. Complete ıf	the organiza	ation answ	ered "Y	′es" o	n Form 9	990, Pai	t IV, line 1	0.		
				(a)Current y	ear (b	Prior yea	ar	(c)Two ye	ars back	(d)Three yea	rs back	(e)Four y	ears back
1a	Beginn	ing of year balance .											
		outions									\longrightarrow		
С	Net inv	estment earnings, gair	ns, and losses										
d	Grants	or scholarships	•										
е		expenditures for facilitie ograms	es										
f	Admını	strative expenses .											
g	End of	year balance											
2	Provid	de the estimated perce	ntage of the curre	nt year end b	alance (line	1g, colu	ımn (a)) held as	5				
а	Board	d designated or quasi-e	ndowment 🟲										
b	Perm	anent endowment 🕨											
С	Temp	orarily restricted endov	wment ►										
	The p	ercentages on lines 2a	, 2b, and 2c shoul	ld equal 100%)								
3a		here endowment funds nization by	not in the posses	sion of the org	janization t	nat are h	neld ar	nd adminis	stered fo	r the		Ye	s No
	(i) ur	nrelated organizations										a(i)	
b		elated organizations .es" on 3a(ii), are the rel		s listed as req	 uıred on So	hedule f	٠.	• •				a(ii) 3b	
4	Descr	ribe in Part XIII the inte	ended uses of the	organization's	endowmer	nt funds						•	
Pa	rt VI	Land, Buildings,											
	_	Complete if the or											1
	Descri	ption of property	(a) Cost or oth (investme		b) Cost or oth	ier basis (other)	(c)Accu	imulated d	epreciation		(d)Book v	alue
1a	Land												
b	Buildin	gs				1,0	74,202			977,739			96,463
c	Leaseh	old improvements											
		nent				32,9	44,085			29,652,012			3,292,073
	Other		L					10();					
rota	u. Add	lines 1a through 1e (Co	olumn (d) must ed	uai Form 990	. Part X. co	iumn (B). line	10(c)).		▶			3.388.53

Part VII Investments—Other Securities. Complete if the organ	ızatıon answe	ered 'Yes' on Form 9	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value		hod of valuation -of-year market value
(1)Financial derivatives	value	Cost of end	-or-year market value
(2)Closely-held equity interests	-		
(A)			
(B)			
(C)			
(D)			_
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Complete if the orga	punization answ	vered 'Ves' on Form	QQQ Part IV line 11c
See Form 990, Part X, line 13.			
· · ·) Book value		thod of valuation -of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Yes' on	Form 990, Part	: IV, line 11d See Form	m 990, Part X, line 15
(a) Description (1) Inter Plan Balances			(b) Book value 44,244,538
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Tatal (Caluma (b) must sound form 2000 Part V and (B) line 15.)			AA 244 529
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered	'Yes' on For	n 990, Part IV, line	44,244,538 11e or 11f.
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Boo	ok value	
(1) Federal Income taxes			
Accrued Statutory Severence Pay		29,429,457	
Inter Plan Balances (3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		
- Sear (Solution (b) mass equal Folio 350, Fait A, tol (b) line 25)	. I	20 420 4E7	
2. Liability for uncertain tax positions In Part XIII, provide the text of the foot organization's liability for uncertain tax positions under FIN 48 (ASC 740) Che	=		_

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1

2

b

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C 5

Part XIII

Part XII

Schedule D (Form 990) 2016

Page 4

Amounts i Investmen b Other (De:

Donated services and use of facilities .

Prior year adjustments . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Other losses .

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
Subtract line 2e from line 1
Amounts included on Form 990, Part VIII, line 12, bu
Investment expenses not included on Form 990, Part
Other (Describe in Part XIII)
Add lines 4a and 4b

Total expenses and losses per audited financial statements . Amounts included on line 1 but not on Form 990, Part IX, line 25

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

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

ut not on line 1 t VIII, line 7b .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

> 4a 4b

> > 2a

2b

2c

2d

2a

2b 2c

2d

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

4c

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2e	
3	
4c	
5	

2e

3

3	Subtract line 2e from line 1 .	3				
4	Amounts included on Form 990, F					
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b				4c	
5	Total expenses Add lines 3 and 4	5				
Par	t XIII Supplemental Info	ormation				
		art II, lines 3, 5, and 9, Part III, lines 1a and 4 nes 2d and 4b, and Part XII, lines 2d and 4b			de any	addıtıonal ınformatıon
Return Reference Explanation						
ee A	dditional Data Table					
			,			

Schedule D (Form 990) 2015

Page 5	Schedule D (Form 990) 2015
inued)	Part XIII Supplemental Information (co
Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

Software ID: 16000371 **Software Version:**

EIN: 51-0169168

Name: PLAN INTERNATIONAL INC

Supplemental Information

Return Reference	Explanation
	Federal Income Taxes A favourable determination letter has been obtained by the Internal Revenue Service which exempts Plan International, Inc. from federal income taxes under Int ernal Revenue Code Section 501(c)(3). Accordingly no tax charges arise on Plan Internation al, Inc.'s change in net assets. Additionally, the organization did not generate any unrel ated business income during the year ended June 30, 2017.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493203001709 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ► Attach to Form 990. ► See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number PLAN INTERNATIONAL INC. 51-0169168 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the region (by type) (e.g., program service, describe for and investments employees, agents, fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region to recipients located in the region region) See Add'l Data 368 8,491 613,118,536 3a Sub-total b Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 368 8,491 613,118,536 Cat No 50082W For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2016

See Add'l Data					
	i				

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

Enter total number of other organizations or entities. Schedule F (Form 990) 2016

Schedule F (Form 990) 2016							Page 3
				ed States. Complete if	the organization an	nswered "Yes" to Form 99	90, Part IV, line 16.
Part III can be ((a) Type of grant or assistance	duplicated if addition (b) Region	(c) Number of recipients		(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 3320 and 3320-A)	\square Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		_
	5713)	✓ Yes	∐No

Schedule F (F	hedule F (Form 990) 2016 Page 5					
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accommodate amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accommethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this pany additional information (see instructions).						
Return Reference	Explanation					
Pt I Line 2	Payments are subject to an agreement, memorandum of understanding or contract between Plan and the third party. The program is often broken into discrete projects and activities planned over time. Funding would be released in tranches with each tranche being conditional on satisfactory progress of the program activity and a satisfactory accounting for the funds already advanced. Local program staff will work with implementing partners throughout the project's life and finance department staff and operational management.					

management will visit to review progress periodically. Larger projects will be visited by senior operational and financial management. from the country offices Additionally, the country's own internal control teams may audit projects and Plan's Global Assurance team might also audit projects. Projects that are funded by grants received from third party donors will also be subject to scrutiny via reporting specified by the donor. Such reporting is typically quarterly and such projects may also be subject to external audit on behalf of the donor Finally. Plan's external auditors review project spending as part of the annual financial statement audit process

Additional Data

Central America

East Asia and Pacific

Software ID: 16000371

Software Version:

EIN: 51-0169168

Name: PLAN INTERNATIONAL INC

General Support

998,498

88,115,171

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

64

(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	38	1,021	Program Services	General Support	51,912,462

0 Fundraising

1,318 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Fast Asia and Pacific 0 | Fundraising 483.744 Middle East 209 Program Services General Support 11,144,884 13 Middle Fast 0 | Fundraising 75,677

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 32.286.670 South America 794 Program Services General Support 55 South America 0 |Fundraising 3,087,308 South Asia 1.061 Program Services General Support 52,767,284 60

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) South Asia 0 | Fundraising 151.156 Sub-Saharan Africa 4,065 Program Services General Support 320,476,837 135 Sub-Saharan Africa 0 | Fundraising 1,249,947

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 879.066 Europe 23 Program Services General Support Europe 0 |Fundraising 949,589 Europe 0 Operational General Support 48,540,243

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Central SEE lAmerica East Asia and ATTACHED Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description l(b) IRS code l (f) Manner of (q) Amount of valuation |(d) Purpose of | (e) Amount of | (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement appraisal, assistance applicable) assistance other) **IPDF** Europe Middle East IFILE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) South America FOR South Asia **IFURTHER**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (e) Amount of (a) Name of (d) Purpose of section (c) Region (book, FMV, cash non-cash and EIN(ıf organization grant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) Sub-Saharan INFORMATION Africa

SCHEDULE G

Supplemental Information Regarding

Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

2016

DLN: 93493203001709 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ.

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

ame of the organization LAN INTERNATIONAL INC						Employer ide	entification number
LAN INTERNATIONAL INC						51-0169168	
	tivities. Complete ers are not required		_	on answered "Yes" on s part.	Form 990,	Part IV, line 1	.7.
Indicate whether the orga	ınızatıon raısed funds	through a	any of the	following activities Che	ck all that a	oply	
a Mail solicitations				e 🗹 Solicitation of n	on-governm	ent grants	
b Internet and email sol	icitations			f 🗹 Solicitation of g	overnment <u>c</u>	ırants	
c Phone solicitations				g	ing events		
d In-person solicitations	:						
Did the organization have or key employees listed in	Form 990, Part VII)	or entity	ın connec	tion with professional fui	ndraising ser	vices? 🗹 🗸	es 🗆 No
b If "Yes," list the ten higher to be compensated at least			fundraisei	rs) pursuant to agreeme	nts under wh	iich the fundrais	er is
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrai custo cont) Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(or ref	(v) Amount paid to (or retained by) fundraiser listed in col (i) (vi) Amo (or ret organ	
	Promotional	Yes	No				
Google	Fromotional		No			156,626	-156,626
Repense	Promotional		No			71,184	-71,184
3 Fg TV Prod Rua Ministro	Promotional		No			57,314	-57,314
	Promotional		No			47,721	-47,721
Accenture 30 Fenchurch St	Consulting		No			24,339	-24,339
Tierra Vida-Calle 26 B N 5	Consulting		No			19,643	-19,643
Actual Sales-Av Brıgadeıro	Promotional		No			19,280	-19,280
Trilha Tecnologia-Rua	Call Centre		No			13,654	-13,654
TELECORPORACION SALVADORENA	Promotional		No			8,019	-8,019
Imagen Sa De Cv-Calle	Promotional		No			7,435	-7,435
otal	•	•	•			425,215	-425,215
3 List all states in which the o licensing	rganızatıon ıs registei	red or lice	ensed to s	olicit contributions or ha	s been notifi	ed it is exempt f	rom registration or

	edule G (Form 990 or 990-EZ) 2016				Page 2
Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising egross receipts greater than \$	event contributions and			
	gross receipts greater than \$	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col (a) through
Revenue		(event type)	(event type)	(total number)	col (c))
	1 Gross receipts				
	2 Less Contributions				
	4 Cash prizes				
S	5 Noncash prizes				
JSe	6 Rent/facility costs				
Expenses	7 Food and beverages				
១	8 Entertainment				
Direct	9 Other direct expenses				
_	10 Direct expense summary Add lines 4	through 9 in column (d)		•	
	11 Net income summary Subtract line 10) from line 3, column (d)		•	
Pai	Gaming. Complete if the org on Form 990-EZ, line 6a.		es" on Form 990, Part 1	IV, line 19, or reported	i more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Expenses	2 Cash prizes				
ង័	3 Noncash prizes				
ect	4 Rent/facility costs				
<u>ā</u>	5 Other direct expenses				
		☐ Yes%	☐ Yes %	☐ Yes %	
	6 Volunteer labor	□ No	□ No	□ No	
	7 Direct expense summary Add lines 2	through 5 in column (d)			
	8 Net gaming income summary Subtrac	t line 7 from line 1, colun	nn (d)	•	
9 a b	Enter the state(s) in which the organizat Is the organization licensed to conduct g If "No," explain	aming activities in each o	f these states?		☐ Yes ☐ No
10a b	If "Yes," explain	censes revoked, suspende	ed or terminated during the	e tax year?	☐ Yes ☐ No

Sche	dule G (Form 990 or 990-EZ) 2016						F	Page 3
11	Does the organization conduct gaming	activities with nonmer	mbers?			□Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gamin		t or a member of a p	partnership or other entity		_	□No	
13	Indicate the percentage of gaming act	vity conducted in						
а	The organization's facility				13a			%
b	An outside facility				13b			%
14	Enter the name and address of the per	son who prepares the	organization's gami	ng/special events books and r	ecords			
	Name							
	Address ►							
15a	Does the organization have a contract revenue?	with a third party from	n whom the organiza	ation receives gaming		Yes	□No	
b	b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$							
С	If "Yes," enter name and address of th	e third party						
	Name •							
	Address ▶							
16	Gaming manager information							
	Name ► Gaming manager compensation ► \$							
	Description of services provided							
	☐ Director/officer	☐ Employee		Independent contractor				
17	Mandatory distributions							
а	Is the organization required under state retain the state gaming license?	e law to make charitab	ble distributions fron	n the gaming proceeds to		□Yes	□No	
b	Enter the amount of distributions requ			xempt organizations or spent				
	in the organization's own exempt activ							
Pai	rt IV Supplemental Information III, lines 9, 9b, 10b, 15b, 1 information (see instruction	5c, 16, and 17b, as						
	Return Reference			Explanation				
Line	In addition to being paid \$24,339 for services, Accenture was reimbursed for expenses totalling \$2, These expenses were provided independently on Accenture's invoice				,213			

DLN: 93493203001709

OMB No 1545-0047

2015

Open to Public Inspection

Schedule J (Form 990)

Compensation Information

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

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

Department of the Internal Revenue

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

Name of the organization PLAN INTERNATIONAL INC

Treasury

Service

Employer identification number

			51-0169168			
Pa	rt I Questions Regarding Compensation					
					Yes	No
1 a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to					
	─ First-class or charter travel	Ľ	Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence					
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	□ Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement or provision of all of the expenses desc		. , , , ,	1b	Yes	
2	Did the organization require substantiation prior to rein directors, trustees, officers, including the CEO/Execut		, , , , , , , , , , , , , , , , , , ,	2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that used by a related organization to establish compensat	t appl	y Do not check any boxes for methods f the CEO/Executive Director, but explain in Part III			
	☐ Compensation committee	Ľ				
	☐ Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	Γ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Pa or a related organization	art V I	II, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymer	nt?	4a		No
b	Participate in, or receive payment from, a supplementa	al nor	nqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-base	ed co	ompensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ons m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the revenues of	ine 1	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ine 1	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," des			7		No
8	Were any amounts reported on Form 990, Part VII, pa					_
	subject to the initial contract exception described in R					
	ın Part III			8		Νo
9	If "Yes" on line 8, did the organization also follow the resection 53 $4958-6(c)$?	rebutt	table presumption procedure described in Regulations	9		

Schedule J (Form 990) 2015							Page 2
Part II Officers, Director	s, Trustees, Key Er	mployees, and Hig	hest Compensate	ed Employees. Use	duplicate copies i	f additional space is	needed.
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual							
(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	Base (1) 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

See Additional Data Table

Schedule J (Form 990) 2015

Cahadula 1 (Farm 000) 201 F

rage 5				
Part IIII Supplemental Inform	nation			
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			

Schedule 1 (Form 990) 2015

Schedule J (Form 990) 2015

Additional Data

Software ID: Software Version:

EIN: 51-0169168 Name: PLAN INTERNATIONAL INC.

Part III, Supplemental Information

Explanation Plan International, Inc. provides reimbursement of costs and expenses in accordance with its various written policies relating to the conditions of employment of staff

Return Reference Pt I Line 1b

Part III, Supplemental Information Return Reference Explanation Pt I Line 1b

Part III, Supplemental Information					
Return Reference	Explanation				

These policies provide inter-alia for the provision of accomodation for international expatriate staff

Pt I Line 1b

Part III, Supplemental Information					
Return Reference	Explanation				
Other	Anne-Birgitte Albrecsten, Jonathan Mitchell and Tara Camm are not citizens nor residents of the United States and the services they provide to the organization were not performed in the United States As a result, their compensation is not subject to U S taxation and has been shown in column D as "non-taxable benefits" This compensation, however, is subject to income tax in the United Kingdom				

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (F) To

(A) Name and Title		(B) Breakdown of (i) Base Compensation	W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 Anne-Birgitte Albrectsen	(I) (II)	99,000					99,000	
						255,170	255,170	
1JONATHAN MITCHELL	(I) (II)						211,699	
2PAMELA INNES	(I) (II)					158,219		
3TARA CAMM	(1)					-	-	
	(11)					- - 173,771	173,771	
4ROLAND ANGERER	(1)	139,196		13,132	10,836		163,164	
	(11)					-	_	
5 MATTHEW DONALD CARLSON	(I) (II)	94,939		90,359	24,547		209,845	
6CORINA VILLACORTA	(I) (II)	124,795		54,387			179,182	
7HENRICUS DIJESSELBLOEM	(I) (II)	96,137		75,699	18,907		190,743	
8DANIEL MCCORMICK	(1)	80,176		55,871	14,700		150,747	
	(11)					-	-	
9JOHN MCDONAGH	(I) (II)	93,693		57,375	4,685		155,753	
10SHABNAM SHAHNAZ	(I) (II)	169,922		6,670			176,592	
11AGUIMA TANKOANO	(I) (II)	153,324		13,132	-300		166,156	
12MARK PIERCE	(I) (II)	79,547		103,900	24,019		207,466	
							<u> </u>	

DLN: 93493203001709 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** PLAN INTERNATIONAL INC 51-0169168 Types of Property (b) (d) (a) (c) Check If Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line Art-Works of art . . Art—Historical treasures 3 Art—Fractional interests Χ 67,275 Fair Market Value 4 Books and publications Clothing and household 266,946 Fair Market Value Χ aoods Х 6 Cars and other vehicles 108,579 Fair Market Value Boats and planes . . 8 Intellectual property . . Securities-Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . Real estate—Other . . 17 Collectibles Χ 187 53,735,689 Fair Market Value **19** Food inventory . Х 2,805,969 Fair Market Value 20 Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts . . 23 Scientific specimens . . Archeological artifacts . . 25 Other ▶ (9,613,148 Fair Market Value bedding/bed nets) 26 Other ▶ (38,489 Fair Market Value tents & shelter) 8 264,752 Fair Market Value 27 Other ► (tools/toys & equipment) **28** Other ▶ (7,615 Fair Market Value cameras & personal 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 No 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 No **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a No b If "Yes," describe in Part II 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 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J Schedule M (Form 990) (2016)

Schedule M (Fori	Page 2						
	Supplemental Info						
	Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Po						
	I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Retur	Return Reference Explanation						
Pt I col(b)		In all cases, Column B represents the number of contributions and not the number of items contributed					
		Schedule M (Form 990) (2016)					

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		93493203001709		
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury	Complete to pro Form 990 o ▶ Information about	vide information for or 990-EZ or to prov ▶ Attach to Form : Schedule O (Form	Information to Form 990 or 990-EZ e information for responses to specific questions on 90-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. hedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.			
Internal Revenue Service L Name of the organization PLAN INTERNATIONAL INC)			loyer identif 169168	ication number	
Return Reference	pplemental Informatio	n	Explanation			
Pt VI, Line 3						

990 Schedule O, Supplemental Information

Return

Reference	
	Plan International, Inc (Plan) has a management services subsidiary, Plan Limited, establi shed in the United Kingdom (UK) The directors of this subsidiary during the year ended Ju ne 30, 2017 were the CRO, Deputy CEO and CFO of Plan International, Inc The Deputy CEO, C FO and other Senior Management of Plan Limited report to the CEO of Plan International In c The services provided by Plan Limited include programme and fundraising support service s and management services for Plan International, Inc and its member organizations Programme support services include programme policy and technical expertise, impact evaluations
	i amine support services include programme policy and technical expertise, impact evaluations

Explanation

s and management services for Plan International, Inc. and its member organizations. Programme support services include programme policy and technical expertise, impact evaluations and research, as well as systems which are integral to programme implementation. Fundrais ing activities include funding of new Plan National Organizations, business development of existing National Organizations and business planning services designed to develop the fundraising capabilities of Plan. Support activities include governance, legal, finance, int

ernal audit, human resources and back office information technology services

Return Explanation

990 Schedule O, Supplemental Information

Pt VI Line 6

ı	established with objectives, purposes and constitutions which are substantially similar t
ı	o those of Plan International, Inc. These National Organizations carry out fundraising, de
ı	velopment education and advocacy and those in India and Colombia also carry out developmen
ı	t programmes in their respective countries. National Organizations are admitted as Members.
ı	of Plan International Inc. in accordance with Plan International Inc's Ry-laws, During

The Members of Plan International Inclare separate legal entities (National Organizations)

the year ended June 30, 2017 there were 21 Member National Organizations

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 4 During the year ended June 30, 2017 the Members' Assembly

990 Schedule O, Supplemental Information Return Explanation Reference

of Plan International, Inc (Plan) approved and adopted

Pt VI, Line 4

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 4 a new Purpose Statement (Vision and Mission) which will

990 Schedule O, Supplemental Information Return Explanation Reference

place the advancement of children's rights and equality

990 Schedule O, Supplemental Information Return Explanation

Reference	
Pt VI, Line 4	for girls at the centre of Plan's work. This purpose

990 Schedule O, Supplemental Information Return Explanation Reference

statement has been reflected in changes in Plan's legal

990 Schedule O, Supplemental Information Return Explanation Reference

objects in its Certificate of Incorporation, which were

990 Schedule O, Supplemental Information Return Explanation Reference

approved by the Members' Assembly in November 2016 In

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 4 June 2017, the Members' Assembly also authorized the

990 Schedule O, Supplemental Information Return Explanation Reference

launching of a new five-year global strategy on July 1,

990 Schedule O, Supplemental Information Return Explanation

Reference	·
Pt VI Line 4	2017 Further details are available on Plan's website

990 Schedule O, Supplemental Information Return Explanation Reference Pt VI, Line 4 www plan-international org

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 4 The Internal Revenue Service no longer issues letters

990 Schedule O, Supplemental Information Return Explanation Reference

confirming the tax-exempt status of organizations that

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 4

report significant changes to their organizational

990 Schedule O, Supplemental Information Return Explanation Reference

documents but it is Plan's contention that its revised

990 Schedule O, Supplemental Information Return Explanation Reference

Purpose Statement is consistent with its tax-exempt

990 Schedule O, Supplemental Information Return Explanation Reference Pt VI, Line 4 Durpose

990 Schedule O, Supplemental Information Return Explanation Reference

990 Schedule O, Supplemental Information Return Explanation

Reference	·
Pt VI Line 5	During the year ended June 30, 2017 it was identified

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 5

that there had been an ongoing diversion of funds

990 Schedule O, Supplemental Information Return Explanation Reference

between April 2013 and December 2015 in one of the

Return Explanation
Reference

990 Schedule O, Supplemental Information

Pt VI, Line 5 Plan International, Inc. (Plan) programme countries, Sierra Leone. This diversion occurred through fraudulent activities by a small number of Plan employees and third parties, somet imes in collusion. As soon as Plan became aware, the local police were alerted and staff's uspended and subsequently terminated. Investigations were undertaken by the Sierra Leone C riminal Investigations Department and later the Anti-Corruption Commission. At the time of this writing, a criminal trial is underway.

Return

990 Schedule O, Supplemental Information

Reference	
Pt VI, Line 5	After a thorough internal investigation, sufficient evidence exists to conclude that funds
	amounting to \$1,824,259 had been subject to fraud

990 Schedule O, Supplemental Information Return Explanation

Reference	·
Pt VI. Line 5	There were further transactions with a total value of

990 Schedule O, Supplemental Information D - 4..... Funlanation.

Reference	Explanation
Pt VI, Line 5	\$1,764,879 for which it is impossible to draw conclusions

990 Schedule O, Supplemental Information Return Explanation

Reference	' '
Pt VI. Line 5	due to missing documentation which may have been lost.

990 Schedule O, Supplemental Information Return Explanation

Reference	·
Pt VI Line 5	misplaced or intentionally destroyed or made unavailable

990 Schedule O, Supplemental Information

Return Explanation

Reference	ехрынацон
Pt VI, Line 5	The combined value of \$3,589,138 has been expensed in the

990 Schedule O, Supplemental Information Return Explanation

Reference	Explanation
Pt VI Line 5	June 30, 2017 financial statements and a further prudent

990 Schedule O, Supplemental Information Return Explanation

Reference	
Pt VI, Line 5	amount of \$1,197,408 for transactions with questionable

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 5

documentation is included in contingent liabilities

990 Schedule O, Supplemental Information Return Explanation Reference

Reference
Pt VI, Line 5 Plan is pursuing all options to recover funds

990 Schedule O, Supplemental Information Return Explanation Reference

Reference

Pt VI, Line 5 Immediate and long-term measures have been implemented to protect

990 Schedule O, Supplemental Information Return Explanation Reference

funds against future misappropriation. A new Country

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 5 Director has been appointed in Sierra Leone to reform

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 5 the operations structure and implement a new operating

990 Schedule O, Supplemental Information Return Explanation Reference

Reference
Pt VI, Line 5 model, key staff in functions such as administration,

990 Schedule O, Supplemental Information Return Explanation Reference

procurement and finance have been changed Partnership

Pt VI, Line 5

990 Schedule O, Supplemental Information Return Explanation Reference

agreements with implicated NGO partners have been

Pt VI, Line 5

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 5 terminated and the local supplier database has been

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 5 rebuilt from scratch, with implicated vendors blacklisted

990 Schedule O, Supplemental Information Return Explanation Reference

Reference
Pt VI, Line 5 Other controls in place include the following

990 Schedule O, Supplemental Information Return Explanation Reference Pt VI, Line 5 | 1 PEOPLE/VALUES

990 Schedule O, Supplemental Information Return Explanation Reference

A A team of experienced managers has been hired to lead on all key functional areas. This Pt VI. Line 5 Includes the position of Deputy Country Director Operations,Logistics Manager, Finance Ma

nager, and Grant Manager.

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 5

B New recruitment procedures are in place to assure transparency and fairness in recruitment processes and to ensure that only people with the required skills and competency sets

are hired.

Return Explanation

Reference	·
Pt VI. Line 5	C Complete redundancy has been implemented and the process is ongoing to build the office back from scratch.

Return Explanation

Reference	
Pt VI, Line 5	D Organizational development action plan is currently being implemented to creat a new or
	ganizational culture better aligned with Plan values

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI. Line 5

2 FINANCE/BUDGET/MANAGEMENT

Return Explanation

Reference	
Pt VI, Line 5	A No check or wire transfer is processed by the bank before a telephone confirmation of t
	he payee and the amount is done by the Country Finance Manager (CFM),

990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 5	B Bank reconcilations reviewed on a monthly basis by the CFM and approved by the Deputy County Director (DCD)/Country Director (CD),

990 Schedule O, Supplemental Information

Doturn

Reference	Ехріапацоп
Pt VI, Line 5	C Budget analysis report prepared by the CFM and discussed as a standing item on the monthly Country Management Team (CMT) meeting agenda,

Evolunation

Return Explanation

Reference	·
Pt VI, Line 5	D Advance liquidation reports include a bank reconciliation statement and a copy of the b
	ank statement to help trace reported expenditures to the bank statements,

990 Schedule O, Supplemental Information Datum Funlanation.

Reference	Explanation
Pt VI, Line 5	E Monthly cost recover reports at the CMT meeting,

990 Schedule O, Supplemental Information Return Explanation

Reference
Pt VI, Line 5 F Monthly budget monitoring review (MBMR) meetings with project managers,

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 5 G Monthly budget management analysis (expenditures tracking, burn rate etc.) and report discussed during CMT meetings to identify inconsistency and inaccuracy for follow up actions

Return Explanation

Reference	
Pt VI, Line 5	H Bi-monthly random verification by the Country Internal Control Department of effectiven
	ess of existing controls and report any short-comings to CMT for action,

Return Explanation

Reference	· ·
Pt VI, Line 5	I Quarterly review of effectiveness of existing control using the Internal Control Questi
	onaire (ICQ) and subsequent implementation of mitigation actions

990 Schedule O, Supplemental Information Return Explanation Reference Pt VI. Line 5 | 3 PARTNERSHIP

Return Explanation

Reference	
Pt VI, Line 5	A Re-assessment of all active partners based on a thoroughly amended assessment tool to inform management decision,

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 5 B All active partners now have bank accounts where payments are made,

Return Explanation

Reference	·
Pt VI, Line 5	C All active partnership agreements amended to insert a clause that indicates long outsta

nding advances will result in non-renewal of the agreements with the partners,

990 Schedule O, Supplemental Information Explanation Return

Reference	
Pt VI, Line 5	D Staffs in charge of partners advance liquidation trained on diligences they need to exercise during review,

990 Schedule O, Supplemental Information

Reference	Explanation
Pt VI, Line 5	E Checklist in place to support consistent review of all partner documents,

990 Schedule O, Supplemental Information Return Explanation Reference F A monitoring mechanism for donor reporting with a clear RACI matrix and timeline from t Pt VI. Line 5

he implementing partner to the grant department responsible to send this report is in place

e.

990 Schedule O, Supplemental Information Return Explanation Reference

Pt VI, Line 5 G Training of the staff on effective management of grant funded projects

990 Schedule O, Supplemental Information Return Explanation Reference Pt VI. Line 5 4 LOGISTICS & PROCUREMENT

Return Explanation

Reference	'
Pt VI, Line 5	A Implementation of action plan resulting from the procurement and logistics self-assessment tool required by the regional office,

Return Explanation

Reference	
Pt VI, Line 5	B A contract management tool is being developed to improve monitoring of contracts and to
	ensure that the terms and conditions are being adhered to,

990 Schedule O, Supplemental Information Return Explanation

Reference	·
Pt VI Line 5	C. The rehulding of the supplier database

990 Schedule O, Supplemental Information Explanation Return

Reference	
Pt VI, Line 5	D Approved procedures to transparently recover vehicle use costs to projects,

Return Explanation

Reference	
Pt VI, Line 5	E Conduct annual update of the suppliers database based on assessment, purge the database of all unsatisfactory suppliers,

Return Explanation

Reference	
Pt VI, Line 5	F Development and approval of the supplier roster ensuring that all received quotes are p
	rofessionally assessed and site visits are conducted and accounted for with rigor.

990 Schedule O, Supplemental Information D - 4..... Funlanation.

Reference	Explanation
Pt VI, Line 5	G Internal asset disposal process completed and ongoing external stage,

Return Explanation

Reference	
Pt VI, Line 5	H Alignment of Plan Sierra Leone's procurement practices to commonly accepted standards b
	y developing and implementing a set of procedures and tools,

990 Schedule O, Supplemental Information Return Explanation Reference

Training of administration staff in various areas including SAP,

Pt VI, Line 5

Return Explanation

Reference	
Pt VI, Line 5	J New contract templates designed and signed off by an attorney that ensure key requireme
	nts and protecting clauses are embedded in our contractual documents,

990 Schedule O, Supplemental Information

Return

Reference	Едрівнаюн
Pt VI, Line 5	K A guidance document for use by Procurement Committees and the training of PC members on how to professionally assess
	auotes/tenders

Evolunation

990 Schedule O, Supplemental Information Return Explanation Reference Pt VI, Line 5 5 FILING

990 Schedule O, Supplemental Information Return Explanation

Reference	
Pt VI, Line 5	A Guidelines are now in place for a systematic filing of payment documents and partners liquidations,

Return Explanation

Reference	
Pt VI, Line 5	B Re-filing of past payment vouchers with the view not only to find some missing document
	s, but also to determine the extent of loss of documents,

990 Schedule O, Supplemental Information Doturn Evolunation

Reference	Explanation
Pt VI, Line 5	C Log books available in each department to monitor the movement of files

990 Schedule O, Supplemental Information Return Explanation Reference Pt VI, Line 5 ******

Return Explanation
Reference

Pt VI, Line 7a

The Board of Plan International, Inc, is elected by the Members of Plan International, Inc
Elections are held either when the term of office of a Board Director expires or on the
resignation of a Board Director Each term of office is for a period of three years

990 Schedule O, Supplemental Information	
Return Reference	Explanation
Pt VI, Line 6	

Return Reference

Pt VI, Line 7b The Members Assembly has the responsibility for approving the strategy of Plan Internation

al, Inc , the annual budget and long term financial plans, the appointment of the auditors , the annual financial statements, changes to the governance documents and governance arra ngement, establishing the goals for the Board and monitoring its performance and ratifying the appointment of the CEO Each Member National Organization is entitled to a minimum of one vote Entitlement to further votes is determined by the level of funds transferred to Plan International, Inc or to Plan International, Inc approved programmes in India and Columbia

Return Explanation

Reference	
Pt VI, Line	The Form 990 is reviewed by senior members of the Global Finance Department and the CFO an
11b	d by an independent certified public accountant appointed by the organization

Return **Explanation** Reference Plan International, Inc. has required Directors, Officers and Key Employees to disclose po

tential conflicts of interest as they arise throughout the year ended, June 30, 2017. The C.

to the Financial Audit Committee of the Board at least annually

990 Schedule O, Supplemental Information

Pt VI. Line

12c

 torniar commence of interest as a regular and great the jour ended carre co, 2011 The c
orporation revised its Conflict of Interest policy in June 2014 to meet the requirements o
f the New York State Non-Profit Revitalisation Act and other developments in good practice
On introduction of the new policy, Officers, Directors, Key Employees, Regional Director
s, other Senior Management of the Management Services company, Plan Limited, and the Group
Treasurer were required to disclose relevant interests or confirm that none arose Declar
ations will continue to be required as circumstances change, when individuals are newly ap
pointed and also on an annual basis. Entries on the register of interest will be disclosed

Return Explanation

Reference	·
Pt VI. Line	The compensation of the CEO is determined by a performance review by the Chair and the Vic

e Chair of the Board and by use of comparability data for similar roles in the sector

Return
Reference

Explanation

The financial statements of Disp Internetical Inc. teacher with the governing designments.

Pt VI, Line 19
The financial statements of Plan International, Inc. together with the governing documents and policies are available upon request. Additionally, Plan International, Inc. posts the Annual Review and Worldwide accounts as well as the main policies that govern Plan's work on it's website (http://plan-international.org)

Return Explanation

between opening and closing reserves of (\$6,615,910)

Reference	
Pt XI	Other changes in net assets or fund balances is due to the currency translation adjustment

990 Schedule O, Supplemental Information

Return Explanation

Reference	Едріанацон
Pt XII, Line	The A-133 audit for the fiscal year ended June 30, 2017 is still in progress

990 Schedule O, Supplemental Information

Return Explanation

Reference

Other ****FORM 990, PART III, LINE 4d, OTHER PROGRAM SERVICES****

Return Explanation

ı		
1	Other	Sexual and Reproductive Health including HIV (\$37,264,840) Provision of sexuality educati
ı		on and awareness training to children, adolescents and young people Plan reached 2,118,30

7 girls, boys, women and men through it's sexual and reproductive health and rights work

Return Explanation

s improved sanitation work

Other

Water and Improved Sanitation (\$41,843,691) Installing latrines, sewer systems, provision s of affordable drinking water, hygiene promotion and health education and training Durin g the year ended June 30, 2017, Plan reached 6,364,197 girls, boys, women & men through it

Return Explanation
Reference

ı	Other	Adequate Standard of Living (\$49,962,594) Availability of water, improving sanitation sta
ı		ndards, medical access and education, as well as building sustainable communities. During
		the fiscal year ended June 30, 2017, 53,311 communities were directly affected by Plan's w
ı		ork

Return Explanation
Reference

Other

Protection from all forms of Violence (\$46,198,612) Protection from exploitation, neglect
, abuse and violence, training of children and parents, capacity building of government an
d civil society organizations in child protection issues, child protection and promotion o
f child rights During the fiscal year ended June 30, 2017 Plan reached 6,577,558 girls, b
oys, women & men through its protection programs

Return Explanation
Reference

Other

Participate as Citizens (\$38,759,353) Education through child media, life skills training for adolescents, Because I am a Girl Campaign and child and youth group activities. Durin g the fiscal year ended June 30, 2017 Plan reached 6,577,558 girls, boys, women and men th rough its participation work.

Return Explanation
Reference

Other	Sponsorship Communications (\$35,758,882) From enrolling children in the scheme, monitorin
	g their development within their communities and other visits and communications with their
	r sponsors. During the fiscal year ended June 30, 2017 1,193,314 children were assigned to

sponsors and 199,114 children were assisted pending and assignment to sponsors

990 Schedule O, Supplemental Information Return Explanation Reference Other AMENDED RETURN FILING

990 Schedule O, Supplemental Information									
Return Reference	Explanation								
Other									

990 Schedule O, Supplemental Information

Return Explanation

Reference
Other FORM 990, PAGE 11, BALANCE SHEET (COLUMN B) LINES # 27,28

990 Schedule O, Supplemental Information									
Return Reference	Explanation								
Other									

Return Explanation

Other

The taxpayer recorded a prior period adjustment for the fiscal year ended June 30, 2017 th at was related to assets released from restrictions during the fiscal year ended June 30, 2016 The prior period adjustment affected the balance sheet (Part X) as originally report ed for the fiscal year ended June 30, 2016 There was no change to the State of Revenue (part VIII) and the Statement of Functional Expenses (part IX) as originally reported

990 Schedule O, Supplemental Information Return Explanation Reference See Schedule O 249787972 0 0

Form 990, Part III, Line

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -										DLN: 93493	203001	709		
SCHEDULE R (Form 990)	Related Organizations and Officiated Fatherships										OMB No 1545-0047				
Department of the Treasury Internal Revenue Service	► Attach to Form 990. ► Inform	nation al	out Schedul	e R (Form	990) and	its instruct	ions is at	www.i	rs.gov/form9	<u>90</u> .	Open to	o Public	C		
lame of the organization LAN INTERNATIONAL INC 51-0169168											n number				
									169168						
Part I Identification	of Disregarded Entities Complete If t	he organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.							
Name, address, and	(a) EIN (if applicable) of disregarded entity		(b) Primary a		Legal dom or foreigi	c) ncile (state n country)	(d) Total ind	ome	(e) End-of-year as	sets	(f Direct co ent	ntrolling			
	of Related Tax-Exempt Organization	s Comple	te if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I	V, line 34 be	cause	ıt had one or	more			
See Additional Data Table	npt organizations during the tax year.														
Name, address, and	(a) d EIN of related organization	Prim	(b) ary activity	Legal dom	c) ncile (state n country)	Exempt Cod	le section		(e) harity status on 501(c)(3))	Dı	(f) rect controlling entity	Section (13) coi enti	512(b) ntrolled ty?		
												Yes	No		
For Donorwood, Bodyetic A	t Notice, see the Instructions for Form 99				t No 5013					C -1	edule R (Form	000) 33			

(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomi Income(re unrelat excluded tax un sections 514	inant elated, to ted, I from ider 512-	(f) Share of otal incom		Disprop	h) ortionate tions?	(1) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)	Gene man pari	j) eral or aging tner?	(k) Percentage ownership
									Yes	No		Yes	No	
		_										<u> </u>		
Part IV Identification of Related O because it had one or more re	rganizations Taxable as a (elated organizations treated as	Corporation a corporation	or Trust on or trus	: Complete st during th	out the or	ganızat ar.	tion ans	swered "Yes	" on F	orm 9	90, Part IV	, line	34	
Part IV Identification of Related O because it had one or more re (a) Name, address, and EIN of related organization	rganizations Taxable as a (elated organizations treated as (b) Primary activity	a corporation (or Truston or truston c) egal nicile or foreign	t during th	(d) controlling	ar. (e)	entity S corp,	(f) Share of total income	Share	(g) of end- year assets	of- Perce	h) entage	s	(1) ection 512(l 13) controlle entity?
because it had one or more re (a) Name, address, and EIN of related organization	elated organizations treated as (b) Primary activity	a corporation (on or trus c) egal nicile or foreign ntry)	Direct	(d) controlling	ar. (e) Type of (C corp, S	entity S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) entage ership	s (:	ection 512(l 13) controlle entity? Yes No
because it had one or more re (a) Name, address, and EIN of related organization (1)Plan Limited	elated organizations treated as (b)	a corporation (on or trus c) egal nicile or foreign	t during th	(d) controlling	ar. (e) Type of (C corp, S	entity S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) entage ership	s (:	ection 512(l 13) controlle entity?
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH	elated organizations treated as (b) Primary activity	a corporation (on or trus c) egal nicile or foreign ntry)	Direct	(d) controlling	ar. (e) Type of (C corp, S	entity S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) entage ership	s (:	ection 512(l 13) controlle entity? Yes No
because it had one or more re (a) Name, address, and EIN of	elated organizations treated as (b) Primary activity	a corporation (Line (Lin	on or trus c) egal nicile or foreign ntry)	Direct	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S	entity S corp,	(f) Share of total	Share	(g) of end- year	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH UK	Plated organizations treated as (b) Primary activity Support Services	a corporation (Line (Lin	on or trus c) ggal ggal nicile or foreign ntry)	Direct e	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S or tru	entity S corp,	(f) Share of total Income	Share	(g) of end- year assets	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No Yes
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH UK (2)Plan Italia Onlus NA Bianche 3 Palazzo Larice 20871 Vimercate Milan	Plated organizations treated as (b) Primary activity Support Services	a corporation (Line (Lin	on or trus c) ggal ggal nicile or foreign ntry)	Direct e	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S or tru	entity S corp,	(f) Share of total Income	Share	(g) of end- year assets	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No Yes
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH UK (2)Plan Italia Onlus NA Bianche 3 Palazzo Larice 20871 Vimercate Milan	Plated organizations treated as (b) Primary activity Support Services	a corporation (Line (Lin	on or trus c) ggal ggal nicile or foreign ntry)	Direct e	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S or tru	entity S corp,	(f) Share of total Income	Share	(g) of end- year assets	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No Yes
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH UK (2)Plan Italia Onlus NA Bianche 3 Palazzo Larice 20871 Vimercate Milan	Plated organizations treated as (b) Primary activity Support Services	a corporation (Line (Lin	on or trus c) ggal ggal nicile or foreign ntry)	Direct e	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S or tru	entity S corp,	(f) Share of total Income	Share	(g) of end- year assets	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No Yes
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH UK (2)Plan Italia Onlus NA Bianche 3 Palazzo Larice 20871 Vimercate Milan	Plated organizations treated as (b) Primary activity Support Services	a corporation (Line (Lin	on or trus c) ggal ggal nicile or foreign ntry)	Direct e	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S or tru	entity S corp,	(f) Share of total Income	Share	(g) of end- year assets	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No Yes
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH UK (2)Plan Italia Onlus NA Bianche 3 Palazzo Larice 20871 Vimercate Milan	Plated organizations treated as (b) Primary activity Support Services	a corporation (Line (Lin	on or trus c) ggal ggal nicile or foreign ntry)	Direct e	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S or tru	entity S corp,	(f) Share of total Income	Share	(g) of end- year assets	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No Yes
(a) Name, address, and EIN of related organization (1)Plan Limited Dukes Court Block A Duke Street Woking Surrey GU BH UK (2)Plan Italia Onlus NA Bianche 3 Palazzo Larice 20871 Vimercate Milan	Plated organizations treated as (b) Primary activity Support Services	a corporation (Line (Lin	on or trus c) ggal ggal nicile or foreign ntry)	Direct e	ne tax ye (d) controlling entity	ar. (e) Type of (C corp, S or tru	entity S corp,	(f) Share of total Income	Share	(g) of end- year assets	of- Perce own	h) entage ership	S	ection 512(l 13) controlle entity? Yes No Yes

See Additional Data Table

Sale of assets to related organization(s).

Purchase of assets from related organization(s).

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

m Performance of services or membership or fundraising solicitations by related organization(s) . . . n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

(a)

Name of related organization

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

(b)

Transaction

type (a-s)

(c)

Amount involved

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

No

11

1m

1n

10

1q Yes

1r

1s

Schedule R (Form 990) 2016

(d)

Method of determining amount involved

Yes

Part V Transactions With Related Organizations Complete if the organization answered "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	<u></u> `	Yes	No			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?						

	· · · · · · · · · · · · · · · · · · ·		1	
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	section		Are all partners section		Are all partners section		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g ?	(k) Percentage ownership
			514)	Yes	No	! ,		Yes	No		Yes	No					
										Schedul	e R (Form	1 990	0) 2016				

Schedule R (Form 990) 2016 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2016

Calle 71 No 13-47 Bogota DC

Software ID: 16000371

Software Version:

EIN: 51-0169168 Name: PLAN INTERNATIONAL INC Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (d) (f) (g) Section 512 (a) Name, address, and EIN of related organization (b) (c) (e) Direct controlling Legal domicile Exempt Code Public charity Primary activity (state status entity (b)(13) or foreign country) (if section 501(c) controlled entity? (3)) Yes No Supported Organization NΑ No (1) RΙ 501(c)(3) Fundraising 155 Plan Way Warwick, RI 02886 13-5661832 See Sch A Pt See Sch A Pt VI NΑ No (1) Supported Organization AS Fundraising Level 18/60 City Road Southbank VIC AS (2) Supported Organization ВΕ See Sch A Pt See Sch A Pt VI NA Νo Fundraising Galerie Ravenstein 3B5 Bruxelles BE (3) NΑ Supported Organization CA See Sch A Pt See Sch A Pt VI No Fundraising 245 Eglinton Avenue East Ste 300 To MP OB Ontario (4) Supported Organzation FΙ See Sch A Pt VI NΑ See Sch A Pt Kumpulantie 3 6th Floor Helsınkı FΙ (5) Supported Organization FR See Sch A Pt See Sch A Pt VI NΑ No 14 Blvd de Douaumont 75017 Parıs FR (6) Supported Organization GΜ See Sch A Pt See Sch A Pt VI NΑ Νo Fundraising Bramfelder Strasse 70 D-22305 Hamburg GM NΑ (7) Supported Organization JA See Sch A Pt See Sch A Pt VI No Fundraising VΤ 11F Sun Towers Centre Building Tokyo JΑ (8) See Sch A Pt VI NΑ Supported Organization NL See Sch A Pt No Fundraising Stadhouderskade 60 1072 AC Amsterdam (9) NO See Sch A Pt VI NΑ No Supported Organization See Sch A Pt Fundraising Tullins Gate 4C 0166 Oslo NO (10) Supported Organization SP See Sch A Pt See Sch A Pt VI NΑ No Fundraising C/Pantoja 10 28002 Madrid (11) See Sch A Pt VI NA No Supported Organization SW See Sch A Pt Fundraising Textilgatan 43 120 08 Stockholm SW Supported Organization (12) UK See Sch A Pt See Sch A Pt VI NA Νo Fundraising Finsgate 5-7 Cranwood St EC1V 9LH UK Supported Organization (13)DA See Sch A Pt See Sch A Pt VI NA No Fundraising Borgergade 101300 Kobenhavn DA ΕI See Sch A Pt VI NΑ Supported Organization See Sch A Pt Nο Fundraising 126 Lower Baggot Street Dublin ΕI Supported Organization See Sch A Pt See Sch A Pt VI NA No KS 463-400680 H Bundang Sampyeondong S East Lake KS Supported Organization SZ See Sch A Pt See Sch A Pt VI NΑ No Fundraising Badenerstrasse 580 8048 Zurich SZ See Sch A Pt VI (17) Supported Organization HK See Sch A Pt No Fundraising Unit 1104 11/F Cameron Comm Bldg Causeway Bay See Sch A Pt VI (18)IN See Sch A Pt NΑ Supported Organization No Fundraising VI E-12 Kaılash Colony New Delhi IN (19) CO See Sch A Pt VI NΑ No Supported Organization See Sch A Pt

Fundraising

Form 990, Schedule R, Part V - Transactions With Related Organizations (c) (b) Name of related organization Transaction Amount Involved (d) Method of determining amount involved type(a-s) (1) Plan International USA Inc 35,923,747 С Pledged Amount (1) Plan International Australia С 35,285,036 Pledged Amount Plan Belgium Pledged Amount 11,601,074 (2) c 126,688,777 Pledged Amount (3) Plan International Canada С (4) Pledged Amount Plan Suomi Saatio c 10,959,967 (5) Plan International France С 10,421,731 (6) Plan International Deutschland E V 128,213,295 c 20,011,223 (7) Plan Japan С (8) Stichting Plan Nederlands c 30,441,440 (9) Plan Norge 40,779,419 С (10) Plan International de Espana 23,421,208 c (11) Plan International Sverige 39,972,503 С (12) Plan International UK c 56,896,919 Plan Denmark 6,767,366 (13) С (14)Plan Ireland 10,768,888 c (15)Plan Korea С 9,952,085 (16)Plan Switzerland 3,519,507 c (17) Plan Hong Kong С 6,187,130 (18) Plan Limited 32,239,654 р (19) Plan International Australia р 397,020 (20) Plan Belgium 122,906 р (21) Plan International Canada 1,180,669 р (22)Plan Denmark р 291,488 (23) Plan Suomi Saatio 239,930 р

385,825

р

Plan Hong Kong

(24)

Form 990, Schedule R, Part V - Transactions With Related Organizations (b) (c) Name of related organization Transaction Amount Involved (d) Method of determining amount involved type(a-s) Plan International France 287,398 (26) р 666,497 (1) Plan International Deutschland E V р (2) Plan Italia Onlus 344,827 р (3) Plan Ireland р 239,298 (4) Plan Japan 234,361 р (5) Plan Korea 57,436 р (6) Stichting Plan Nederland 1,467,173 р (7) Plan International de Espana 59,001 р (8) Plan International Sverige 1,135,701 р (9) Plan Switzerland 17,051 р (10) Plan International UK 511,375 р (11) Plan International USA Inc 616,886 р (12) Plan India р 4,500,848 Plan Columbia 26,564,451 (13) р (14)Plan International Australia 95,262 q Plan Belgium (15) 150,514 q (16)Plan International Canada 775,520 q (17) Plan Denmark 319,309 q (18) Plan Suomi Saatio 232,566 q (19) Plan Hong Kong q 387,843 (20) Plan International France 262,539 q (21) Plean International Deutschland E V 668,744 q (22) Plan Ireland q 234,619 (23) Plan Italia Onlus 342,923 q

241,975

q

(24)

Plan Japan

(a)
Name of related organization (b) (c) Transaction Amount Involved (d) Method of determining amount involved type(a-s) (51) Plan Korea 96,760 q (1) Stichting Plan Nederland 1,794,263 q (2) Plan Norge q 401,585 (3) Plan International de Espana 324,917 q

1,577,385

16,929

622,636

615,407

26,156,337

4,916,057

q

q

q

q

q

q

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

(4)

(5)

(6)

(7)

(8)

(9)

Plan International Sverige

Plan International USA Inc

Fundacion Plan (Colombia)

Plan Switzerland

Plan India

Plan International UK