

**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2010**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2010 calendar year, or tax year beginning** Jul 1 , 2010, **and ending** Jun 30 , 2011

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization **Plan International USA, Inc.**  
 Doing Business As **Plan USA**  
 Number and street (or P.O. box if mail is not delivered to street addr) Room/suite  
**155 Plan Way**  
 City, town or country State ZIP code + 4  
**Warwick RI 02886-1099**

**D** Employer Identification Number  
**13-5661832**

**E** Telephone number  
**(401) 738-5600**

**F** Name and address of principal officer:  
**A. San Martin 155 Plan Way Warwick RI 02886**

**G** Gross receipts \$ **95,785,043.**

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If 'No,' attach a list. (see instructions)

**I** Tax-exempt status  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website: **www.planusa.org**

**K** Form of organization:  Corporation  Trust  Association  Other

**L** Year of Formation: **1937** **M** State of legal domicile: **NY**

**Part I Summary**

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: <u>See Schedule O, Page 2</u>	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a) ..... <b>3</b> <b>14</b>
	4	Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>4</b> <b>14</b>
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a) ..... <b>5</b> <b>146</b>
	6	Total number of volunteers (estimate if necessary) ..... <b>6</b> <b>17</b>
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>7a</b> <b>0.</b>
	b Net unrelated business taxable income from Form 990-T, line 34 ..... <b>7b</b>	
<b>Revenue</b>	8	Contributions and grants (Part VIII, line 1h) ..... <b>62,452,846.</b> <b>86,995,832.</b>
	9	Program service revenue (Part VIII, line 2g) .....
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>992,757.</b> <b>1,264,089.</b>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>159,569.</b> <b>65,295.</b>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>63,605,172.</b> <b>88,325,216.</b>
<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) ..... <b>41,750,031.</b> <b>45,550,627.</b>
	14	Benefits paid to or for members (Part IX, column (A), line 4) .....
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>7,555,658.</b> <b>8,205,378.</b>
	16a	Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>528,625.</b> <b>1,421,162.</b>
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>7,547,308.</b>
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) ..... <b>8,994,256.</b> <b>9,223,962.</b>
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>58,828,570.</b> <b>64,401,129.</b>
19	Revenue less expenses. Subtract line 18 from line 12 ..... <b>4,776,602.</b> <b>23,924,087.</b>	
<b>Net Assets or Fund Balances</b>	20	Total assets (Part X, line 16) ..... <b>25,973,029.</b> <b>50,962,105.</b>
	21	Total liabilities (Part X, line 26) ..... <b>1,997,935.</b> <b>2,086,085.</b>
	22	Net assets or fund balances. Subtract line 21 from line 20 ..... <b>23,975,094.</b> <b>48,876,020.</b>

**Part II Signature Block**

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

**Sign Here**

Signature of officer: *Ana Teresa Gutierrez-San Martin* Date: 11/7/11

Type or print name and title: **Ana Teresa Gutierrez-San Martin** **President/CEO**

**Paid Preparer Use Only**

Print/Type preparer's name: **Robert A. Perillo** Preparer's signature: *Robert A. Perillo* Date: 11/4/11 Check  if self-employed PTIN: \_\_\_\_\_

Firm's name: **DYL & PERILLO, INC.** Firm's address: **38 NORTH COURT STREET PROVIDENCE RI 02903** Firm's EIN: \_\_\_\_\_ Phone no.: **(401) 453-2020**

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

See Schedule O, Page 2

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

Yes No

If 'Yes,' describe these new services on Schedule O.

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

Yes No

If 'Yes,' describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 48,104,327. including grants of \$ 45,550,627.) (Revenue \$ 0.)

Program and Technical Support - Plan's programs support child survival, maternal and child health, basic education, adult literacy, microenterprise development and more, due to the generosity of our donors, child sponsors and others. We work with children, adults and local partners to build stronger communities. For more detailed information, please see Schedule O.

4b (Code: ) (Expenses \$ 755,055. including grants of \$ 0.) (Revenue \$ 120,386.)

Building Relationships - Our child sponsorship program links a sponsor in the United States with a child in need; they can exchange letters, cards and photos as a way to build relationships. Plan USA also shares program communications to keep sponsors informed of the work underway in the field. For more detailed information, please see Schedule O.

4c (Code: ) (Expenses \$ 821,584. including grants of \$ 0.) (Revenue \$ 0.)

Development Education and Advocacy - Plan conducts educational outreach programs in the United States with youth, educators, sponsors and the public about issues affecting children and families in the developing world. These programs strive to enhance the understanding of poverty and the role that Plan has in the development process. We give children in the U.S. a voice to speak out about issues impacting children overseas, such as HIV/AIDS and child trafficking. We help develop school curriculum around such issues and we are an active partner in groups that work to eradicate poverty in developing countries. For more detailed information, please see Schedule O.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 49,680,966.

**Part IV Checklist of Required Schedules**

	Yes	No	
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A</i> .....	1	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) .....	2		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I</i> .....	3		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i> .....	4	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III</i> .....	5		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i> .....	6		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i> .....	7		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III</i> .....	8		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i> .....	9		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i> .....	10	X	
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .....	11a	X	
b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i> .....	11b		X
c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VIII</i> .....	11c		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part IX</i> .....	11d	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X</i> .....	11e		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X</i> .....	11f		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII</i> .....	12a	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> .....	12b		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E</i> .....	13		X
14a Did the organization maintain an office, employees, or agents outside of the United States? .....	14a		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Parts I and IV</i> .....	14b		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Parts II and IV</i> .....	15	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Parts III and IV</i> .....	16		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If 'Yes,' complete Schedule G, Part I (see instructions)</i> .....	17	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II</i> .....	18		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III</i> .....	19		X
20 a Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H</i> .....	20		X
b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) .....	20b		

**Part IV Checklist of Required Schedules (continued)**

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

BAA

Form 990 (2010)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1 a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
	<b>1 a</b> 30		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	<b>1 b</b> 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2 a</b>	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		
	<b>2 a</b> 146		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
<b>3 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
<b>4 a</b>	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)?		X
<b>b</b>	If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5 a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
<b>6 a</b>	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?		X
<b>b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?		X
<b>b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year		
	<b>7 d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10 a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10 b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11 a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11 b</b>	
<b>12 a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12 a</b>	
<b>b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	<b>12 b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state?	<b>13 a</b>	
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13 b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13 c</b>	
<b>14 a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14 a</b>	X
<b>b</b>	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	<b>14 b</b>	

**Part VI Governance, Management and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1 a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1 a</b>		
			14
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1 b</b>		
			14
<b>2</b> 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?	<b>2</b>		X
<b>3</b> 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?	<b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		X
<b>6</b> Does the organization have members or stockholders?	<b>6</b>		X
<b>7 a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	<b>7 a</b>		X
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	<b>7 b</b>		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body?	<b>8 a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8 b</b>	X	
<b>9</b> Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	<b>9</b>		X

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

		Yes	No
<b>10 a</b> Does the organization have local chapters, branches, or affiliates?	<b>10 a</b>		X
<b>b</b> If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	<b>10 b</b>		
<b>11 a</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	<b>11 a</b>	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
<b>12 a</b> Does the organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i>	<b>12 a</b>	X	
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12 b</b>	X	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? <i>If 'Yes,' describe in Schedule O how this is done</i>	<b>12 c</b>	X	
<b>13</b> Does the organization have a written whistleblower policy?	<b>13</b>	X	
<b>14</b> Does the organization have a written document retention and destruction policy?	<b>14</b>	X	
<b>15</b> 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?			
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15 a</b>	X	
<b>b</b> Other officers of key employees of the organization	<b>15 b</b>	X	
<i>If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)</i>			
<b>16 a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16 a</b>		X
<b>b</b> If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	<b>16 b</b>		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ See Form 990, Page 6, Line 17 (continued)
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  
 ▶ David Cannata    155 Plan Way,    Warwick    RI    02886-1099    (401) 738-5600

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Howard Cutler Board Chair	8.00	X					0.	0.	0.	
(2) Dorota Keverian Secretary	5.00	X					0.	0.	0.	
(3) Eric Chatman Treasurer	4.00	X					0.	0.	0.	
(4) Raj Nooyi Vice Chair	4.00	X					0.	0.	0.	
(5) Tamer Rashad Board Member	2.00	X					0.	0.	0.	
(6) Deborah Held Board Member	2.00	X					0.	0.	0.	
(7) Isobel Coleman Board Member	2.00	X					0.	0.	0.	
(8) Allison Knapp Womack Board Member	3.00	X					0.	0.	0.	
(9) Paul Dwyer Board Member; Audit Chair	3.00	X					0.	0.	0.	
(10) Oren E. Whyche-Shaw Board Member	3.00	X					0.	0.	0.	
(11) Walter Stone Board Member	2.00	X					0.	0.	0.	
(12) Jack Poulson Board Member	2.00	X					0.	0.	0.	
(13) Ahmed Moen Board Member	2.00	X					0.	0.	0.	
(14) Georgiana Gibson Board Member	2.00	X					0.	0.	0.	
(15) Ana Teresa Gutierrez-San Martin President/CEO	50.00			X			49,104.	0.	234.	
(16) David Cannata CFO	50.00			X			141,536.	0.	13,438.	
(17) Carolyn Rose-Avila VP, Policy/Public Engagement	50.00				X		120,718.	0.	9,957.	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) James Bowman Dir Info Systems	50.00					X		115,213.	0.	11,099.
(19) Eric Dupree-Walker Sr Advisor, Strategy/Org Dev	50.00					X		112,124.	0.	14,376.
(20) Rebecca Lake Dir Foundation/Corp Relations	50.00					X		109,768.	0.	20,477.
(21) Karen Scriven Director of Philanthropy	50.00					X		110,186.	0.	13,342.
(22) W. Ahuma Adoadaji Former President/CEO	0.00			X			X	105,000.	0.	0.
(23) Audrey Bracey Deegan Former Interim Pres./CEO	50.00			X				170,830.	0.	14,151.
(24) John McGeehan Chief Operating Officer	50.00					X		181,379.	0.	160.
(25) Scott Schroeder Chief Marketing Officer	50.00					X		177,870.	0.	12,230.
(26)										
(27)										
(28)										
(29)										
<b>1 b Sub-total</b>								<b>1,393,728.</b>	<b>0.</b>	<b>109,464.</b>
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								<b>1,393,728.</b>	<b>0.</b>	<b>109,464.</b>

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 14

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

**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.

(A) Name and business address	(B) Description of services	(C) Compensation
Eagle-Com Inc. 110 Eglinton Ave E Ste 604 Toronto Canada, CA	Video Production Svc	144,429.
PricewaterhouseCoopers, LLC 125 High St., Boston, MA 02110	Accounting/Auditing	185,600.
Cone Communications 855 Boylston St. Boston MA 02116	Branding/Marketing	480,268.
Public Outreach Fundrai 509 Olive Way; Suite 1349 Seattle WA 98101	In-person solicitation	1,081,560.
M+R Strategic Services 2120 L St., NW Washington, DC 20037	Web/Internet Consulting	145,196.

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

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS</b>	<b>1 a</b> Federated campaigns .....	<b>1 a</b>					
	<b>b</b> Membership dues .....	<b>1 b</b>					
	<b>c</b> Fundraising events .....	<b>1 c</b>					
	<b>d</b> Related organizations .....	<b>1 d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1 e</b>	18,601,861.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1 f</b>	68,393,971.				
	<b>g</b> Noncash contributions included in Ins 1a-1f: \$		135,116.				
<b>h Total.</b> Add lines 1a-1f .....			86,995,832.				
<b>PROGRAM SERVICE REVENUE</b>	<b>2 a</b> _____ <b>Business Code</b>						
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....						
<b>OTHER REVENUE</b>	<b>3</b> Investment income (including dividends, interest and other similar amounts) .....		349,670.	0.	0.	349,670.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross Rents .....	(i) Real	(ii) Personal				
		<b>b</b> Less: rental expenses .....					
		<b>c</b> Rental income or (loss) .....					
		<b>d</b> Net rental income or (loss) .....					
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other				
		<b>b</b> Less: cost or other basis and sales expenses .....					
		<b>c</b> Gain or (loss) .....					
		<b>d</b> Net gain or (loss) .....					
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>					
		<b>b</b> Less: direct expenses .....	<b>b</b>				
		<b>c</b> Net income or (loss) from fundraising events .....					
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>					
<b>b</b> Less: direct expenses .....		<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>	120,386.					
	<b>b</b> Less: cost of goods sold .....	<b>b</b>	55,091.				
	<b>c</b> Net income or (loss) from sales of inventory .....		65,295.	0.	0.	65,295.	
<b>11 a</b> _____ <b>Miscellaneous Revenue</b> <b>Business Code</b>							
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> All other revenue .....							
<b>e Total.</b> Add lines 11a-11d .....							
<b>12 Total revenue.</b> See instructions .....			88,325,216.	0.	0.	1,329,384.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	45,253,187.	45,253,187.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	297,440.	297,440.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	708,670.	24,676.	486,330.	197,664.
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	5,979,833.	1,972,512.	2,849,376.	1,157,945.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	368,037.	107,520.	197,265.	63,252.
9 Other employee benefits	664,142.	150,909.	391,328.	121,905.
10 Payroll taxes	484,696.	159,172.	230,506.	95,018.
11 Fees for services (non-employees):				
a Management				
b Legal	33,843.	0.	33,843.	0.
c Accounting	178,040.	84,490.	93,550.	0.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	1,421,162.			1,421,162.
f Investment management fees	102,671.	0.	102,671.	0.
g Other	1,611,240.	274,760.	680,835.	655,645.
12 Advertising and promotion	3,010,239.	0.	0.	3,010,239.
13 Office expenses	1,048,489.	412,850.	279,362.	356,277.
14 Information technology	257,120.	0.	257,120.	0.
15 Royalties				
16 Occupancy	674,401.	234,517.	300,712.	139,172.
17 Travel	822,368.	453,453.	207,754.	161,161.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	382,184.	54,598.	238,244.	89,342.
23 Insurance	64,653.	0.	64,653.	0.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <u>Banking &amp; Credit Card Fees</u>	368,745.	0.	368,745.	0.
b <u>Outside Clerical</u>	98,497.	6,769.	90,807.	921.
c <u>Repairs/Maintenance</u>	106,747.	7,933.	90,544.	8,270.
d <u>Training</u>	66,733.	32,386.	27,611.	6,736.
e <u>Recruitment</u>	79,425.	0.	79,425.	0.
f All other expenses	318,567.	153,794.	102,174.	62,599.
25 Total functional expenses. Add lines 1 through 24f	64,401,129.	49,680,966.	7,172,855.	7,547,308.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A)		(B)	
		Beginning of year		End of year	
ASSETS	1	Cash — non-interest-bearing .....	3,525,714.	1	4,569,792.
	2	Savings and temporary cash investments .....	115,769.	2	444,998.
	3	Pledges and grants receivable, net .....	6,470,170.	3	5,201,509.
	4	Accounts receivable, net .....		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....		6	
	7	Notes and loans receivable, net .....		7	
	8	Inventories for sale or use .....	15,281.	8	0.
	9	Prepaid expenses and deferred charges .....	337,841.	9	818,770.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 6,692,497.		
	b	Less: accumulated depreciation .....	10b 4,675,539.	2,187,410.	10c 2,016,958.
	11	Investments — publicly traded securities .....	13,320,844.	11	15,243,421.
	12	Investments — other securities. See Part IV, line 11 .....		12	
	13	Investments — program-related. See Part IV, line 11 .....		13	
	14	Intangible assets .....		14	
	15	Other assets. See Part IV, line 11 .....		15	22,666,657.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	25,973,029.	16	50,962,105.	
LIABILITIES	17	Accounts payable and accrued expenses .....	1,051,959.	17	1,488,625.
	18	Grants payable .....		18	
	19	Deferred revenue .....		19	597,460.
	20	Tax-exempt bond liabilities .....		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23	Secured mortgages and notes payable to unrelated third parties .....		23	
	24	Unsecured notes and loans payable to unrelated third parties .....		24	
	25	Other liabilities. Complete Part X of Schedule D .....	945,976.	25	
	26	<b>Total liabilities.</b> Add lines 17 through 25 .....	1,997,935.	26	2,086,085.
NET ASSETS OR FUND BALANCES	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.</b>				
	27	Unrestricted net assets .....	4,766,383.	27	6,327,255.
	28	Temporarily restricted net assets .....	11,136,342.	28	34,000,881.
	29	Permanently restricted net assets .....	8,072,369.	29	8,547,884.
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds .....		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32	Retained earnings, endowment, accumulated income, or other funds .....		32	
	33	<b>Total net assets or fund balances.</b> .....	23,975,094.	33	48,876,020.
34	<b>Total liabilities and net assets/fund balances.</b> .....	25,973,029.	34	50,962,105.	

BAA

Form 990 (2010)

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	88,325,216.
2	Total expenses (must equal Part IX, column (A), line 25)	2	64,401,129.
3	Revenue less expenses. Subtract line 2 from line 1	3	23,924,087.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	23,975,094.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	976,839.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	48,876,020.

**Part XII Financial Statements and Reporting**

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

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

BAA

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

Name of the organization <b>Plan International USA, Inc.</b>	Employer identification number <b>13-5661832</b>
---	---

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

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

- 1  A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III – Functionally integrated
  - d  Type III – Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....		
(ii) A family member of a person described in (i) above? .....		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....		

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....		
(ii) A family member of a person described in (i) above? .....		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.') ...	49,449,785.	46,868,850.	48,182,353.	62,452,846.	86,995,832.	293,949,666.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 <b>Total.</b> Add lines 1 through 3 .....	49,449,785.	46,868,850.	48,182,353.	62,452,846.	86,995,832.	293,949,666.
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 <b>Public support.</b> Subtract line 5 from line 4 .....						293,949,666.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4 .....	49,449,785.	46,868,850.	48,182,353.	62,452,846.	86,995,832.	293,949,666.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	663,711.	470,456.	516,369.	225,212.	349,670.	2,225,418.
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
11 <b>Total support.</b> Add lines 7 through 10 .....						296,175,084.
12 Gross receipts from related activities, etc (see instructions) .....					12	2,733,708.
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....	<input type="checkbox"/>					

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) .....	14	99.25 %
15 Public support percentage from 2009 Schedule A, Part II, line 14 .....	15	98.99 %
16a <b>33-1/3% support test – 2010.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>	
16b <b>33-1/3% support test – 2009.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
17a <b>10%-facts-and-circumstances test – 2010.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
17b <b>10%-facts-and-circumstances test – 2009.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>	

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

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

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.) .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 ..						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 ..						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support.</b> (Add lns 9, 10c, 11, and 12.) .....						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2010</b> (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2009</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33-1/3% support tests – 2010.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33-1/3% support tests – 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....



**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

**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. ▶ See separate instructions.**

Department of the Treasury  
Internal Revenue Service

**If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>Plan International USA, Inc.</b>	Employer identification number <b>13-5661832</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 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  No
- 4a Was a correction made? .....  Yes  No
- b 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 file **Form 1120-POL** for this year? .....  Yes  No
- 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 filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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

Schedule **C** (Form 990 or 990-EZ) 2010

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group.  
**B** Check  if the filing organization checked box A and 'limited control' provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1 a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....		0.													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....		0.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....		0.													
<b>d</b> Other exempt purpose expenditures .....		56,853,821.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....		56,853,821.													
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....		250,000.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....		0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....		0.													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....			<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
<b>2a</b> Lobbying non-taxable amount .....	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e)) .....					6,000,000.
<b>c</b> Total lobbying expenditures .....	0.	0.	88,925.	0.	88,925.
<b>d</b> Grassroots nontaxable amount .....	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e)) .....					1,500,000.
<b>f</b> Grassroots lobbying expenditures .....	0.	0.	88,925.	0.	88,925.

**BAA**

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

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**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**  
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

Name of the organization

Employer identification number

Plan International USA, Inc.

13-5661832

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

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

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

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

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

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

Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

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

Yes  No

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

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

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

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

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

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

a Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

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

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2 a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If 'Yes,' explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance	10,999,258.	9,763,472.	10,208,645.		
b Contributions	417,255.	102,481.	176,500.		
c Net investment earnings, gains, and losses	1,650,767.	1,133,305.	-621,673.		
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	13,067,280.	10,999,258.	9,763,472.		

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ 38.00 %
- b Permanent endowment ▶ 62.00 %
- c Term endowment ▶ 0.00 %

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

	Yes	No
(i) unrelated organizations	3a(i)	X
(ii) related organizations	3a(ii)	X
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		184,588.		184,588.
b Buildings		2,503,303.	1,554,114.	949,189.
c Leasehold improvements		660,706.	221,922.	438,784.
d Equipment		3,343,900.	2,899,503.	444,397.
e Other				

**Total.** Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 2,016,958.

BAA

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
<b>Total.</b> (Column (b) must equal Form 990 Part X, column (B) line 12.) . . . ▶		

**Part VIII Investments—Program Related.** (See Form 990, Part X, line 13)

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 13.) . . . ▶		

**Part IX Other Assets.** (See Form 990, Part X, line 15)

(a) Description	(b) Book value
(1) Due from Plan International Inc.	22,666,657.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column(B), line 15) . . . . . ▶	22,666,657.

**Part X Other Liabilities.** (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 25) . . . . . ▶	

**2.** FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	88,325,216.
2	Total expenses (Form 990, Part IX, column (A), line 25)	64,401,129.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	23,924,087.
4	Net unrealized gains (losses) on investments	565,432.
5	Donated services and use of facilities	0.
6	Investment expenses	102,671.
7	Prior period adjustments	0.
8	Other (Describe in Part XIV)	308,736.
9	Total adjustments (net). Add lines 4 through 8	976,839.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	24,900,926.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	88,355,235.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains on investments	2a	
	b Donated services and use of facilities	2b	
	c Recoveries of prior year grants	2c	
	d Other (Describe in Part XIV)	2d	95,314.
	e Add lines 2a through 2d	2e	95,314.
3	Subtract line 2e from line 1	3	88,259,921.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
	b Other (Describe in Part XIV.)	4b	65,295.
	c Add lines 4a and 4b	4c	65,295.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	88,325,216.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	64,353,544.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities	2a	
	b Prior year adjustments	2b	
	c Other losses	2c	
	d Other (Describe in Part XIV.)	2d	55,091.
	e Add lines 2a through 2d	2e	55,091.
3	Subtract line 2e from line 1	3	64,298,453.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
	b Other (Describe in Part XIV.)	4b	102,671.
	c Add lines 4a and 4b	4c	102,671.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	64,401,124.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Pt V Line 4 The intended use of the Endowment Fund is to maintain the purchasing power of the assets through long-term returns which provide for both a) future growth of the endowment and b) current income which can be used to support program and operating expenses.

Pt XI Line 8 This amount is comprised of the change in value of perpetual trusts of \$58,260 and the change in value of

**Part XIV** Supplemental Information (continued)

----- split interest agreements of \$250,476 -----

Pt XIII Line 2d This amount is cost of goods sold from Gift Program inventory  
----- of \$55,091 as shown on Form 990, Part VIII, line 10b -----

Pt XII Line 2d This amount is comprised of Gift Program inventory sales  
----- at gross of \$120,386 and the net impairment loss on  
----- investments of \$(25,072). -----

Pt XIII Line 4b This amount is the investment expenses of \$102,671 as  
----- shown on Form 990, Part IX, line 11f. -----

Pt XII Line 4b This amount is the net income from Gift Program inventory  
----- sales of \$65,295 as shown on Form 990, Part VIII, Line 10c -----

**Schedule F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

Plan International USA, Inc.

Employer identification number

13-5661832

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

- 1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . .  Yes  No
- 2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Sub-total . . . . .					
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c</b> Totals (add lines 3a and 3b) . . . . .					

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ....   
 Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			South Asia	Education Suppt	40,000.	wire transfer			
(2)			South Asia	Cmbat chld labor	231,050.	wire transfer			
(3)			South America	Flood relief	25,340.	wire transfer			
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities ..... **0**

**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

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

**Part V** Supplemental Information

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

Pt II, Line 1 The amounts listed on Part II, Line 1, represent funds transferred to Plan India and Plan Colombia for donor-designated projects. These amounts total \$296,390.

The amounts released from temporarily restricted revenues on the organization's financial statements are accounted for on the accrual basis. These amounts total \$297,440. See form 990, Part IX, Line 3.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding**  
**Fundraising or Gaming Activities**

OMB No. 1545-0047

**2010**

**Open to Public**  
**Inspection**

**Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18,**  
**or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**  
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Plan International USA, Inc.**

Employer identification number

**13-5661832**

**Part I Fundraising Activities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.  
Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**

**b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 Changing Our World, Inc.	F.R. Consulting		X	0.	27,500.	-27,500.
2 M&R Strategic Services, Inc.	Web Consulting		X	0.	145,196.	-145,196.
3 Public Outreach Fundraising	In-person solic		X	122,286.	1,081,560.	-959,274.
4 Public Interest Communications, In	phone solicitat		X	129,541.	45,806.	83,735.
5 AB Data	Mail consulting		X	0.	121,100.	-121,100.
6						
7						
8						
9						
10						
<b>Total</b>				<b>251,827.</b>	<b>1,421,162.</b>	<b>-1,169,335.</b>

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

- Alabama
  - Alaska
  - Arizona
  - Arkansas
  - California
  - Colorado
  - Connecticut
  - Delaware
  - District of Columbia
  - Florida
  - Georgia
- See Part I, Line 3 List of States Registered or Licensed to Solicit Funds

**Part II Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6a. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add column (a) through column (c))
REVENUE	1	Gross receipts			
	2	Less: Charitable contributions			
	3	Gross income (line 1 minus line 2)			
DIRECT EXPENSES	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4- through 9 in column (d)			
	11	Net income summary. Combine line 3, column (d), and line 10			

**Part III Gaming.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(add column (a) through column (c))
REVENUE	1	Gross revenue			
	2	Cash prizes			
DIRECT EXPENSES	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Combine lines 1, column (d) and line 7			

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_  
 a Is the organization licensed to operate gaming activities in each of these states?  Yes  No  
 b If 'No,' explain: \_\_\_\_\_

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No  
 b If 'Yes,' explain: \_\_\_\_\_



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

Plan International USA, Inc.

Employer identification number

13-5661832

**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

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

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) <u>Plan International Inc.</u> <u>PO Box 7670</u> <u>Warwick RI 02887</u>	<u>51-0169168</u>	<u>501 (c) (3)</u>	<u>45,253,187.</u>	<u>0.</u>	<u>N/A</u>	<u>N/A</u>	<u>Gen'l Support</u>
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

2 Enter total number of section 501(c)(3) and government organizations ▶ 1

3 Enter total number of other organizations ▶ 0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Pt I Line 2 See Schedule O

Part II Line 1(h) General program support for community development projects focusing on children in 50 developing countries around the world.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2010**

Department of the Treasury  
Internal Revenue Service

► **Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.  
► Attach to Form 990. ► See separate instructions.**

**Open to Public Inspection**

Name of the organization

Employer identification number

Plan International USA, Inc.

13-5661832

**Part I Questions Regarding Compensation**

	Yes	No								
<p><b>1 a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p><b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain</p>	<b>1b</b> X									
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	<b>2</b> X									
<p><b>3</b> Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p><b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:</p> <p><b>a</b> Receive a severance payment or change-of-control payment from the organization or a related organization?</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	<b>4a</b> X									
	<b>4b</b>	X								
	<b>4c</b>	X								
<p><b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b></p>										
<p><b>5</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If 'Yes' to line 5a or 5b, describe in Part III.</p>	<b>5a</b>	X								
	<b>5b</b>	X								
<p><b>6</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If 'Yes' to line 6a or 6b, describe in Part III.</p>	<b>6a</b>	X								
	<b>6b</b>	X								
<p><b>7</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III</p>	<b>7</b>	X								
<p><b>8</b> Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III</p>	<b>8</b>	X								
<p><b>9</b> If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	<b>9</b>									

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

Schedule J (Form 990) 2010

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

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

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1 David Cannata	(i)	141,536.	0.	0.	12,031.	1,407.	154,974.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 W. Ahuma Adodoadji	(i)	105,000.	0.	0.	0.	0.	105,000.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 Audrey Bracey Deegan	(i)	170,830.	0.	0.	0.	14,151.	184,981.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 John McGeehan	(i)	144,384.	0.	36,995.	0.	160.	181,539.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 Scott Schroeder	(i)	147,738.	5,000.	25,132.	0.	12,230.	190,100.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 Carolyn Rose-Avila	(i)	120,718.	0.	0.	5,271.	4,686.	130,675.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**Part III Supplemental Information**

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

Pt I Line 1b Plan USA currently provides monetary assistance and reimbursement of certain expenses related to the relocation of current or new employees. Among the qualified costs, Plan's written policy provides for a temporary housing allowance which allows that person to search for permanent housing. To the extent that some of the relocation costs are deemed to be taxable, Plan USA provides gross-up payments to cover the employee's federal and state tax liabilities. Such amounts are included in Part II, Col B(iii) as other reportable compensation

Pt I Line 4a Severance payments totaling \$105,000 were paid to Ahuma Adodoadji. These payments are included in his total compensation listed on Form 990, Part VII, Section 1a.

Severance payments totaling \$18,462 were paid to Carolyn Rose-Avila. These payments are included in her total compensation listed on Form 990, Part VII, Section 1a.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2010**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organizations answered 'Yes'**  
on Form 990, Part IV, lines 29 or 30.  
▶ **Attach to Form 990.**

Name of the organization

Employer identification number

**Plan International USA, Inc.**

**13-5661832**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art .....				
2 Art—Historical treasures .....				
3 Art—Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities—Publicly traded .....	X	24	135,116.	Fair value on gift date
10 Securities—Closely held stock .....				
11 Securities—Partnership, LLC, or trust interests .....				
12 Securities—Miscellaneous .....				
13 Qualified conservation contribution— Historic structures .....				
14 Qualified conservation contribution—Other .....				
15 Real estate—Residential .....				
16 Real estate—Commercial .....				
17 Real estate—Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( _____ ) .....				
26 Other ▶ ( _____ ) .....				
27 Other ▶ ( _____ ) .....				
28 Other ▶ ( _____ ) .....				

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

29

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

	Yes	No
30a		X
31	X	
32a		X
33		

b If 'Yes,' describe the arrangement in Part II.

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

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

b If 'Yes,' describe in Part II.

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

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

Schedule M (Form 990) 2010

**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Part I, Line 9(b) The number of contributions listed represents 24 separate  
gifts of publicly traded stock received throughout the  
fiscal year ended June 30, 2011.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

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Pt VI-C, Line 19 Plan USA's financial documents are available to the public  
on our website at: www.planusa.org and also on other  
websites, such as GuideStar. In addition, financial  
information as well as governing documents and our Conflict  
of Interest policy are available upon request.

Pt VI-B, Line 11a The form 990 is provided electronically to each member  
of the Plan USA Audit Committee. The Audit Committee then  
meets with Plan USA's CEO & CFO to review the document  
in detail. Once the form 990 has been approved by the Audit  
Committee, it is sent electronically to the full Board of  
Directors. At Plan USA's November board meeting each  
year, the entire Board of Directors then votes on whether  
to approve the form 990. Once approved by the full board,  
it is filed with the IRS and posted to the Organization's  
website.

Pt VI-B, Line 12c On an annual basis, the Board receives a copy of and  
review's Plan USA's Conflict of Interest policy. Each  
Board member then signs a questionnaire where they must disclose  
any conflicts of interest. If there are any potential  
conflicts of interest relating to a particular vote on the  
board, the member must declare the potential conflict  
and abstain from voting. This is then recorded in the  
minutes of the meeting.

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Pt VI-B, Line 15 Every May, the Board Governance Committee leads the annual CEO performance review process. The committee receives and reviews a CEO evaluation form that is received from each board member. Based on that feedback, the Governance Committee conducts the CEO's performance review directly with the CEO. Based on CEO and organizational performance, a merit increase, if any, is also determined by the Committee (and approved by the Board) within the range comparable to other staff increases and in line with external benchmarks. The Committee retains documentation with respect to deliberations and decisions regarding compensation. In addition, the process includes a regular external consultation with a compensation specialist to ensure that CEO salary is within market range of comparable positions at similarly situated organizations.

For a period of approximately 4 months during the fiscal year ended June 30, 2011, Plan USA was managed by a board selected interim CEO while recruitment for a permanent CEO was being conducted.

In the context of the CEO recruitment process, a rigorous analysis of comparable sector compensation and benefits data was conducted by external consultants. The data was reviewed by the Governance and Executive Committees of the Board of Directors, and was the basis for the compensation package offered to the CEO finalist who began employment in Oct. 2010.

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For current Plan USA staff, including key employees, except for the CEO, annual performance reviews are conducted in summer/fall. At that time, managers determine compensation increases for staff based upon merit and organizational performance. As needed, positions at Plan USA are market priced with an outside consultant to determine if the salary is in line with other like positions in similar locations. When changes to the job descriptions of current employees are made, HR Staff have a process for determining grade level and salary. Documentation is kept regarding each employee's salary. Key employees and highly compensated staff are reviewed by the CEO and any salary changes are approved by the CEO.

Pt XI	Non-operating Revenue per the	
	Audited Financial Statements	\$899,240
	Impairment Loss on Investments	(25,072)
	Investment Advisor Fees on Form	
	990 (at net per Financial	
	Statements)	102,671
		-----
	Total	976,839
		=====

Form 990 Program and technical support-Field Program Support  
 Part III, Funding of \$45,550,627 (for the fiscal year ended June 30,

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Line 4a 2011) represents funds received by Plan USA from sponsors, donors and other entities (such as the US Government, corporations, etc.) which are periodically transferred to Plan International, Inc. ("PII") and combined with the funding received from the 19 other Plan National offices around the world. The combined funds are then managed at PII and used to support field programs in 50 developing countries.

The combined funds support child-centered community development programs that benefit approximately 1.4 million children plus their families and communities.

These programs cover a multitude of areas including, but not limited to child survival, maternal and child health, basic education, adult literacy, microenterprise development and the safety and security of the communities.

Plan's child centered programs include children and adults working together with Plan and the local partners to build stronger communities where children are ultimately able to help shape their own futures. This approach enhances the capacity of all members, young and old, to work together to address the structural issues of poverty and its consequences on children's lives.

Every field program is designed, implemented and monitored in partnership with communities, indigenous non-governmental organizations, community based or grass

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roots organizations and host government ministries.

The foundation of our work is through grassroots efforts,

helping people help themselves. Within a community, Plan

typically works with children and families for 8-10 years

or until the majority of families have achieved improvements

in their lives, relative to economic sustainability,

housing, education and health. When these improvements

have been achieved, the community "graduates" with

the understanding and agreement by both parties that

the community members are able to sustain themselves

without Plan's continued intervention or support. These

graduations allow us to move on to new communities in

need of assistance.

Technical support expenses of \$2,553,700 for the fiscal

year ended June 30, 2011 represent costs associated

with designing, monitoring and delivering programs in

the field which are primarily funded through grants.

Additionally, this area provides training and technical

assistance to field staff. For example, a child survival

program funded by Plan USA would include staff assistance

such as through a technical specialist who would work

with and visit Plan field staff in the respective country

throughout the duration of the funding. Plan USA staff

would help set up the monitoring and evaluation systems

to ensure the successful implementation of the program.

(This would be true with respect to any of the key areas in

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----- which Plan has programs). By design, each grant funded -----  
 ----- program has clear goals and objectives and a set of -----  
 ----- impact indicators against which we can measure the -----  
 ----- effectiveness of our work. Programs are multi-faceted -----  
 ----- as demonstrated by the components in the following -----  
 ----- example. A typical maternal and child health program -----  
 ----- would include: -----

- \* Regular check-ups to monitor the health and well-being -----  
 ----- of the expectant mother. -----
- \* Ensuring pre-and post-natal health care and interventions. -----
- \* Training of community healthworkers. -----
- \* Promotion of exclusive breast feeding. -----
- \* Weight and growth monitoring for the newborn. -----
- \* Regular health check-ups for the newborn. -----
- \* Scheduled immunizations. -----
- \* Interventions to address common infant and childhood -----  
 ----- illnesses. -----

----- Plan's projects are designed and implemented to help -----  
 ----- communities develop long-term solutions to poverty. -----

Form 990 ----- As part of our mission we promote learning and under- -----  
 Part III ----- standing among people of different countries and cultures. -----  
 Line 4b ----- Through our child sponsorship program, where a sponsor -----  
 ----- in the US is linked with a child in need, children and -----  
 ----- sponsors can exchange letters, cards and photos as a way -----

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----- to gain important understandings of one another. These -----  
----- cross-cultural exchanges provide the foundation for -----  
----- the sponsor/child relationship. Plan provides various -----  
----- program communications to sponsors throughout the year. -----  
----- Sponsors are introduced to their children through the -----  
----- initial materials in their Sponsorship Guide. The -----  
----- "Sponsored Child Introduction" provides information on -----  
----- the child and family, along with a photo. This information -----  
----- is also accompanied by an "Area Overview", which provides -----  
----- information relevant to activities in the sponsored -----  
----- child's community. -----

----- Our annual "Programs in Action" report highlights -----  
----- some of our program successes across the world each -----  
----- year, while our "Annual Update" specifically details -----  
----- programs or projects within a child's community or -----  
----- program area. This report is accompanied by new -----  
----- photographs of the sponsored child and his or her -----  
----- family members. Development education communications -----  
----- (posted online) provide information about a particular -----  
----- development issue in a program country and is written -----  
----- from the perspective of children. These are some of the -----  
----- ways that the relationship is nurtured and promoted -----  
----- throughout the year. Building relationships is a -----  
----- reciprocal process and we encourage two-way communications. -----  
----- We ask sponsors to write their child at least once annually -----  
----- and more often, if possible. We promote an annual -----

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----- "Plan USA Writing Day" that reminds sponsors of the -----  
----- importance of communications and asks them to write to -----  
----- their child. Through our website, sponsors can -----  
----- easily send email communications or letters to their -----  
----- sponsored children. -----

----- We refer to the costs associated with these cross-cultural -----  
----- exchanges as "Building Relationships". During the year -----  
----- ended June 30, 2011, there were approximately 56,000 -----  
----- communications from the sponsored children to their -----  
----- sponsors, 54,300 communications from the field offices -----  
----- to the sponsor/donors regarding the individual sponsored -----  
----- children and families and approximately 54,700 communications -----  
----- sent from sponsors to the children such as letters -----  
----- or letters with small gifts sent in by the sponsor or -----  
----- purchased via the gift program (which was discontinued in 2011). -----  
----- In addition to the types of communications noted above -----  
----- (which are processed through a centralized communications -----  
----- or mail area at the Plan USA offices in Warwick, RI) -----  
----- there are also some Plan International countries through -----  
----- which the sponsored children and their sponsors can send -----  
----- and receive their "Building Relationships" communications -----  
----- via a process we call "direct communications." For these -----  
----- offices, letters and communications are sent and received -----  
----- through the local postal system, bypassing Plan USA in -----  
----- Warwick, Rhode Island. In some instances, sponsors are -----  
----- encouraged to send letters via email. -----

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The total expense of \$755,055 per Part III, Line 4b of Form 990 associated with the Building Relationships program is the net result of total Building Relationships expense of \$810,146 per the Statement of Functional Expenses in the Organization's audited financial statements less the cost of goods sold of \$55,091 related to the gift program as shown on line 10b of Part VIII of form 990. For related points, please refer to Notes 14 and 15 in the Organization's audited financial statements.

Form 990 Part III, Line 4c Development Education and Advocacy - As part of its mission, Plan conducts educational outreach programs in the U.S. with youth, educators, sponsors and the public about issues affecting children and families in the developing world. Development education programs strive to enhance the public's understanding of the causes and conditions of poverty in developing countries and the role that Plan can have in the development process. Development Education is one of the key tools Plan can use to strengthen relationships with, and between, individual children, adults, groups, organizations and institutions.

Plan brings messages to the public (or educates them) through its Plan Magazine, Programs in Action newsletter, country information booklets, cross-cultural communications, monthly e-letter and specific work with classroom

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learning. Information about issues affecting children is regularly posted on our website and available through our video library. Youth group activities and speaking engagements by staff also play a key role in the delivery of these messages.

Plan works with both adults and young people in an effort to increase awareness of the difficult issues that face the developing world. Specifically, our youth group (YUGA), gives children a voice by helping them organize meetings, school activities, retreats and events that bring attention to children affected by poverty, HIV/AIDS, child trafficking and other issues.

Additionally, Plan USA facilitates engagement through group meetings, development of school curriculum and via advocacy which reinforces the communications around poverty and community development. Plan is an active partner and/or member in groups and coalitions that support these issues, such as the Basic Education Coalition, InterAction and the Global Health Council, and is a founding member of the Orphans and Vulnerable Children (OVC) task force. Regular meetings between CEOs and senior staff of organizations with similar missions help to give all of us a stronger voice.

For the fiscal year ended June 30, 2011, the total Development Education and Advocacy expenses were \$821,584.

During the fiscal year ended June 30, 2011, Plan

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initiated over 1.5 million mailed or emailed communications, and participated in various presentations, activities and forums.

Through donor communications, sponsor meetings, website publications and public gatherings, Plan will continue to reach out to the public and invite them to engage with us and make a difference for children in need. We have found that once people understand these issues, they are willing to take action. Our task is to help bring these issues to light.

Form 990, Page 1 ORGANIZATION'S MISSION STATEMENT

Part 1,

Line 1 Plan USA strives to achieve lasting improvements in the and also quality of life of children and their communities in

Form 990, Page 2 developing countries by enabling deprived children,

Part III, their families and their communities to meet basic needs

Line 1 and to increase their ability to participate in and benefit from their societies; fostering relationships to increase understanding and unity among people of different cultures and countries; and advocating for the rights and interests of the world's children.

Schedule I Plan USA monitors funds transferred to Plan International,

Part I, Line 2 Inc. (PII) regularly throughout each fiscal year. Plan USA staff are involved in the planning, design and

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implementation of programs that are currently administered through PII and work directly with staff of PII in these matters. Some of the specific activities include:

1. Plan USA has access to and regularly reviews the global organization's intranet site which includes significant amounts of data on the program activities that are being conducted throughout all of the program locations.

2. Plan USA has regular access to financial reporting which allows for the monitoring of programs on a budget versus actual basis as well as providing detail on the types of spending that are conducted so that the monitoring of the proper scope of work can be done.

3. Plan USA can review the results of the work conducted by PII's Global Assurance Unit (i.e. internal audit) to gain satisfaction over the procedures and controls of the program locations.

4. Plan USA staff conduct regular field visits whereby they perform program monitoring and evaluation work as well as providing technical program backstopping assistance.

5. Plan USA has representation on many of the global management and program consortia that help oversee and guide

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the work of PII.

6. At Plan USA, the United States National Office (USNO)

of Plan International, Inc., two members of the Plan USA

Board of Directors are elected as delegates to to the

Plan International Member's Assembly which is composed

of delegates from all national office members. The Member's

Assembly serves as the governance and policy setting board for

the worldwide organization.

Overall, there is open communication between Plan USA and

PII which provides for effective and timely oversight

of the use of funding provided by Plan USA to PII.

Schedule G The information for Public Outreach Fundraising is only

Line 2(b) representative of results during the fiscal year ended June

Item 3 30, 2011. The activities undertaken on behalf of Plan USA

are primarily to generate recurring monthly donors. As such

the costs are recovered over a longer term through the

continuing revenue generated from the donors added through

the Public Outreach campaigns.

Schedule G Plan USA's agreement with AB Data provides that Plan USA will

Line 2(b) pay a monthly fee to the agency for professional services

Item 5 related to direct marketing fundraising counsel. The

professional services portion of the monthly fee is

Name of the organization

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separately identified and relates specifically to creative and design services, campaign consultation and other services.

The agreement also specifies that Plan USA will reimburse the agency for the actual costs for services provided by third parties such as postage, printing, data processing, etc. at actual cost supported by third party invoices with no markup paid to the agency. For the fiscal year ended June 30, 2011, total payments to AB Data were \$814,644, of which \$121,100 related to professional services and \$693,544 was strictly for the reimbursement of costs separately documented for third party services.

Schedule G Plan USA's agreement with M&R Strategic Services provides Line 2(b) that Plan USA will pay a fee to the agency for professional Item 2 services and reimburse M&R for the actual costs of running various media advertisements at actual cost with no markup.

For the fiscal year ended June 30, 2011, total payments to M&R were \$185,391 of which \$145,196 were related to professional services and the remaining \$40,195 was strictly from the reimbursement of advertising costs separately documented for third party services.

Schedule G Plan USA did not enter into any agreements with fundraisers Part IV under which Plan USA made payments exclusively for such expenses but not for professional services.

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Schedule G Names and Addresses of Firms Listed in Part I

Part IV

Changing Our World, Inc.

220 E. 42nd St., 7th Floor

New York, NY 10017

Public Interest Communications, Inc.

770 Leesburg Pike, Suite 301

Falls Church, VA 22043

M&R Strategic Services, Inc.

2120 L Street NW, 6th Floor

Washington, DC 20037

AB Data, Ltd.

600 AB Data Drive

Milwaukee, WI 53217

Public Outreach Fundraising

509 Olive Way, Suite 1349

Seattle, WA 98101

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

Name of the organization

Plan International USA, Inc.

Employer identification number

13-5661832

**Part I Identification of Disregarded Entities** (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) <u>Plan International, Inc. 51-0169168</u> <u>P.O. Box 7670, Warwick RI 02887</u>	<u>Supporting Organization</u>	<u>NY</u>	<u>501 (c) (3)</u>	<u>509 (a) (3), Line 11 Type I</u>	<u>N/A</u>		<u>X</u>
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ----- ----- -----												
(2) ----- ----- -----												
(3) ----- ----- -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) ----- ----- -----							
(2) ----- ----- -----							
(3) ----- ----- -----							

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

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

	Yes	No
<b>1</b> During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties <b>(iv)</b> rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to other organization(s)	X	
<b>c</b> Gift, grant, or capital contribution from other organization(s)		X
<b>d</b> Loans or loan guarantees to or for other organization(s)		X
<b>e</b> Loans or loan guarantees by other organization(s)		X
<b>f</b> Sale of assets to other organization(s)		X
<b>g</b> Purchase of assets from other organization(s)		X
<b>h</b> Exchange of assets		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s)		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s)		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets		X
<b>n</b> Sharing of paid employees		X
<b>o</b> Reimbursement paid to other organization for expenses	X	
<b>p</b> Reimbursement paid by other organization for expenses	X	
<b>q</b> Other transfer of cash or property to other organization(s)		X
<b>r</b> Other transfer of cash or property from other organization(s)		X

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

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Plan International Inc.	b	45,253,187.	Dollar Value
(2) Plan International Inc.	o	77,696.	Invoice Amount
(3) Plan International Inc.	p	523,885.	Invoice Amount
(4)			
(5)			
(6)			

**Part VI Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered 'Yes' to 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	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1) ----- ----- -----										
(2) ----- ----- -----										
(3) ----- ----- -----										
(4) ----- ----- -----										
(5) ----- ----- -----										
(6) ----- ----- -----										
(7) ----- ----- -----										
(8) ----- ----- -----										



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Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 6, Line 17 (continued)**

---

Alabama \_\_\_\_\_  
Alaska \_\_\_\_\_  
Arizona \_\_\_\_\_  
Arkansas \_\_\_\_\_  
California \_\_\_\_\_  
Connecticut \_\_\_\_\_  
Florida \_\_\_\_\_  
Georgia \_\_\_\_\_  
Illinois \_\_\_\_\_  
Kansas \_\_\_\_\_  
Kentucky \_\_\_\_\_  
Louisiana \_\_\_\_\_  
Maine \_\_\_\_\_  
Maryland \_\_\_\_\_  
Massachusetts \_\_\_\_\_  
Michigan \_\_\_\_\_  
Minnesota \_\_\_\_\_  
Mississippi \_\_\_\_\_  
New Hampshire \_\_\_\_\_  
New Jersey \_\_\_\_\_  
New Mexico \_\_\_\_\_  
New York \_\_\_\_\_  
North Carolina \_\_\_\_\_  
North Dakota \_\_\_\_\_  
Ohio \_\_\_\_\_  
Oklahoma \_\_\_\_\_  
Oregon \_\_\_\_\_  
Pennsylvania \_\_\_\_\_  
Rhode Island \_\_\_\_\_  
South Carolina \_\_\_\_\_  
Tennessee \_\_\_\_\_  
Utah \_\_\_\_\_  
Virginia \_\_\_\_\_  
Washington \_\_\_\_\_  
West Virginia \_\_\_\_\_  
Wisconsin \_\_\_\_\_  
Hawaii \_\_\_\_\_  
Missouri \_\_\_\_\_  
District of Columbia \_\_\_\_\_

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Schedule G (Form 990 or Form 990-EZ), Supplemental Information Regarding Fundraising or Gaming Activities  
**Part I, Line 3 List of States Registered or Licensed to Solicit Funds**

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Hawaii \_\_\_\_\_  
Idaho \_\_\_\_\_  
Illinois \_\_\_\_\_  
Indiana \_\_\_\_\_  
Iowa \_\_\_\_\_  
Kansas \_\_\_\_\_  
Kentucky \_\_\_\_\_  
Louisiana \_\_\_\_\_  
Maine \_\_\_\_\_  
Maryland \_\_\_\_\_  
Massachusetts \_\_\_\_\_

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Schedule G (Form 990 or Form 990-EZ), Supplemental Information Regarding Fundraising or Gaming Activities

**Part I, Line 3 List of States Registered or Licensed to Solicit Funds**

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Michigan \_\_\_\_\_  
Minnesota \_\_\_\_\_  
Mississippi \_\_\_\_\_  
Missouri \_\_\_\_\_  
Montana \_\_\_\_\_  
Nebraska \_\_\_\_\_  
Nevada \_\_\_\_\_  
New Hampshire \_\_\_\_\_  
New Jersey \_\_\_\_\_  
New Mexico \_\_\_\_\_  
New York \_\_\_\_\_  
North Carolina \_\_\_\_\_  
North Dakota \_\_\_\_\_  
Ohio \_\_\_\_\_  
Oklahoma \_\_\_\_\_  
Oregon \_\_\_\_\_  
Pennsylvania \_\_\_\_\_  
Rhode Island \_\_\_\_\_  
South Carolina \_\_\_\_\_  
South Dakota \_\_\_\_\_  
Tennessee \_\_\_\_\_  
Texas \_\_\_\_\_  
Utah \_\_\_\_\_  
Vermont \_\_\_\_\_  
Virginia \_\_\_\_\_  
Washington \_\_\_\_\_  
West Virginia \_\_\_\_\_  
Wisconsin \_\_\_\_\_  
Wyoming \_\_\_\_\_

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**Supporting Statement of:**

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Form 990 p 11/Line 1, column (A)

Description	Amount
Cash & Equivalents from GAAP Balance Sheet	3,641,483.
Cash Equiv included as Temporary Cash inv	-115,769.
Total	<u>3,525,714.</u>

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**Supporting Statement of:**

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Form 990 p 11/Line 3, column (A)

Description	Amount
Grants Receivable	5,125,659.
Bequests Receivable	160,610.
Charitable Remainder Trusts receivable	785,438.
Perpetual Trusts receivable	398,463.
Total	<u>6,470,170.</u>

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**Supporting Statement of:**

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Form 990 p 11/Line 17, column (A)

Description	Amount
Accounts Payable per GAAP Balance Sheet	858,605.
Obligations Under Split Interest Agreements	193,354.
Total	<u>1,051,959.</u>