Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt from Income Tax

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

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

OMB No. 1545-0047

2003

Open to Public Inspection

A For the 2003 calendar year, or tax year beginning Jul 1 **, 2003, and ending** Jun 30 **, 2004**

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See specific instructions.

C Name of organization: Cooperative for Assistance and Relief Everywhere (CARE)

Number and street (or P.O. box if mail is not delivered to street addr) Room/suite: 151 Ellis Street

City, town or country: Atlanta State: GA ZIP code + 4: 30303-2440

D Employer Identification Number: 13-1685039

E Telephone number: (404) 681-2552

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ►

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations.

H (a) Is this a group return for affiliates? ☐ Yes ☒ No

H (b) If 'Yes,' enter number of affiliates ►

H (c) Are all affiliates included? ☐ Yes ☒ No
(If 'No,' attach a list. See instructions.)

H (d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

G Web site: ► www.care.org

J Organization type (check only one) ► ☒ 501(c) 3 ◄ (insert no.) ☐ 4947(a)(1) **or** ☐ **527**

I Group Exemption Number ►

K Check here ► ☐ if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

M Check ► ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 641,493,000.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

REVENUE	**1**	Contributions, gifts, grants, and similar amounts received: See Attachment A			
	a	Direct public support	**1a** 74,003,000.		
	b	Indirect public support	**1b** 98,622,000.		
	c	Government contributions (grants)	**1c** 393,914,000.		
	d	**Total** (add lines 1a through 1c) (cash $ 461,734,000. noncash $ 104,805,000.) See Attachment B		**1d**	566,539,000.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		**2**	0.
	3	Membership dues and assessments		**3**	0.
	4	Interest on savings and temporary cash investments		**4**	387,000.
	5	Dividends and interest from securities		**5**	1,706,000.
	6a	Gross rents	**6a** 540,000.		
	b	Less: rental expenses	**6b** 0.		
	c	Net rental income or (loss) (subtract line 6b from line 6a)		**6c**	540,000.
	7	Other investment income (describe ►)		**7**	
			(A) Securities / **(B) Other**		
	8a	Gross amount from sales of assets other than inventory	(A) 69,398,000. **8a** (B)		
	b	Less: cost or other basis and sales expenses	(A) 69,472,000. **8b** (B)		
	c	Gain or (loss) (attach schedule)	(A) -74,000. **8c** (B)		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))		**8d**	-74,000.
	9	Special events and activities (attach schedule). If any amount is from **gaming,** check here ► ☐			
	a	Gross revenue (not including $ 563,000. of contributions reported on line 1a) See Attachment C	**9a** 73,000.		
	b	Less: direct expenses other than fundraising expenses	**9b** 389,000.		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)		**9c**	-316,000.
	10a	Gross sales of inventory, less returns and allowances	**10a**		
	b	Less: cost of goods sold	**10b**		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		**10c**	
	11	Other revenue (from Part VII, line 103)		**11**	2,850,000.
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		**12**	571,632,000.
EXPENSES	**13**	Program services (from line 44, column (B))		**13**	516,875,000.
	14	Management and general (from line 44, column (C))		**14**	23,703,000.
	15	Fundraising (from line 44, column (D))		**15**	19,466,000.
	16	Payments to affiliates (attach schedule) See Attachment D		**16**	1,084,000.
	17	**Total expenses** (add lines 16 and 44, column (A))		**17**	561,128,000.
NET ASSETS	**18**	Excess or (deficit) for the year (subtract line 17 from line 12)		**18**	10,504,000.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		**19**	222,382,000.
	20	Other changes in net assets or fund balances (attach explanation) See Attachment E		**20**	15,099,000.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		**21**	247,985,000.

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		**(A)** Total	**(B)** Program services	**(C)** Management and general	**(D)** Fundraising
22 Grants and allocations (att sch) (cash $ ____ non-cash $ ____)	22				
23 Specific assistance to individuals (att sch)	23				
24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25				
26 Other salaries and wages	26				
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42				
43 Other expenses not covered above (itemize):					
a See Att. F for Details	43a				
b	43b				
c Column C Includes	43c				
d Public Information	43d				
e	43e				
44 **Total functional expenses** (add lines 22 - 43). **Organizations completing columns (B) - (D), carry these totals to lines 13 - 15**	44	560,044,000.	516,875,000.	23,703,000.	19,466,000.

Joint Costs. Check ► ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ► ☐ **Yes** ☒ **No**

If 'Yes,' enter **(i)** the aggregate amount of these joint costs $ ____; **(ii)** the amount allocated to Program services $ ____; **(iii)** the amount allocated to Management and general $ ____; and **(iv)** the amount allocated to Fundraising $ ____.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? ► International Relief and Development

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others.)

		Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a	See Attachment G (Grants and allocations $ 83,327,000.)	516,875,000.
b	(Grants and allocations $)	
c	(Grants and allocations $)	
d	(Grants and allocations $)	
e	Other program services (Grants and allocations $)	
f	**Total of Program Service Expenses** (should equal line 44, column (B), Program services) ►	516,875,000.

Part IV Balance Sheets (See Instructions)

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
ASSETS 45 Cash — non-interest-bearing See Attachment H			101,003,000.	45	85,944,000.
46 Savings and temporary cash investments			5,338,000.	46	8,748,000.
47a Accounts receivable	47a	70,655,000.			
b Less: allowance for doubtful accounts	47b	1,378,000.	60,880,000.	47c	69,277,000.
48a Pledges receivable	48a	2,073,000.			
b Less: allowance for doubtful accounts	48b	138,000.	30,326,000.	48c	1,935,000.
49 Grants receivable			32,419,000.	49	41,156,000.
50 Receivables from officers, directors, trustees, and key employees (attach schedule)			0.	50	0.
51a Other notes & loans receivable (attach sch)	51a	0.			
b Less: allowance for doubtful accounts	51b	0.	0.	51c	0.
52 Inventories for sale or use			4,651,000.	52	786,000.
53 Prepaid expenses and deferred charges			2,407,000.	53	2,162,000.
54 Investments — securities (attach schedule) See Attachment I ► ☐ Cost ☒ FMV			106,676,000.	54	162,341,000.
55a Investments — land, buildings, & equipment: basis	55a	0.			
b Less: accumulated depreciation (attach schedule)	55b	0.	0.	55c	0.
56 Investments — other (attach schedule)				56	
57a Land, buildings, and equipment: basis	57a	20,781,000.			
b Less: accumulated depreciation (attach schedule) See Attachment J	57b	11,662,000.	10,146,000.	57c	9,119,000.
58 Other assets (describe ► See Attachment K)			100,859,000.	58	121,516,000.
59 **Total assets** (add lines 45 through 58) (must equal line 74)			454,705,000.	59	502,984,000.
LIABILITIES 60 Accounts payable and accrued expenses			64,247,000.	60	77,206,000.
61 Grants payable				61	
62 Deferred revenue			133,859,000.	62	143,725,000.
63 Loans from officers, directors, trustees, and key employees (attach schedule)			0.	63	0.
64a Tax-exempt bond liabilities (attach schedule)			0.	64a	0.
b Mortgages and other notes payable (attach schedule)			2,835,000.	64b	0.
65 Other liabilities (describe ► See Attachment L)			31,382,000.	65	34,068,000.
66 **Total liabilities** (add lines 60 through 65)			232,323,000.	66	254,999,000.
NET ASSETS OR FUND BALANCES **Organizations that follow SFAS 117, check here** ► ☒ and complete lines 67 through 69 and lines 73 and 74.					
67 Unrestricted			63,620,000.	67	71,519,000.
68 Temporarily restricted			56,172,000.	68	54,433,000.
69 Permanently restricted			102,590,000.	69	122,033,000.
Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 70 through 74.					
70 Capital stock, trust principal, or current funds				70	
71 Paid-in or capital surplus, or land, building, and equipment fund				71	
72 Retained earnings, endowment, accumulated income, or other funds				72	
73 **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72; column (A) **must** equal line 19; column (B) **must** equal line 21)			222,382,000.	73	247,985,000.
74 **Total liabilities and net assets/fund balances** (add lines 66 and 73)			454,705,000.	74	502,984,000.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

a	Total revenue, gains, and other support per audited financial statements ►	**a**	572,095,000.
b	Amounts included on line **a** but not on line 12, Form 990:		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify): See Att M $ 389,000.		
	Add amounts on lines **(1)** through **(4)** ►	**b**	389,000.
c	Line **a** minus line **b** ►	**c**	571,706,000.
d	Amounts included on line 12, Form 990 but not on line **a:**		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): See Att M $ -74,000.		
	Add amounts on lines **(1)** and **(2)** ►	**d**	-74,000.
e	Total revenue per line 12, Form 990 (line **c** plus line **d**) ►	**e**	571,632,000.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ►	**a**	561,517,000.
b	Amounts included on line **a** but not on line 17, Form 990:		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify): Fundraising Expenses $ 389,000.		
	Add amounts on lines **(1)** through **(4)** ►	**b**	389,000.
c	Line **a** minus line **b** ►	**c**	561,128,000.
d	Amounts included on line 17, Form 990 but not on line **a:**		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): $		
	Add amounts on lines **(1)** and **(2)** ►	**d**	
e	Total expenses per line 17, Form 990 (line **c** plus line **d**) ►	**e**	561,128,000.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see instructions.)

(A) Name and address	**(B)** Title and average hours per week devoted to position	**(C)** Compensation **(if not paid, enter -0-)**	**(D)** Contributions to employee benefit plans and deferred compensation	**(E)** Expense account and other allowances
See Attachment N				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ► ☐ **Yes** ☒ **No**

If 'Yes,' attach schedule — see instructions.

Part VI Other Information (See instructions.)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.	77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78 a		X
b	If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	78 b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80 a	X	
b	If 'Yes,' enter the name of the organization ► CARE International and check whether it is [X] exempt **or** [ ] nonexempt.			
81 a	Enter direct and indirect political expenditures. See line 81 instructions — 81 a: 0.			
b	Did the organization file **Form 1120-POL** for this year?	81 b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82 a	X	
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) — 82 b:			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83 a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84 a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84 b		
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?	85 a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85 b		
	If 'Yes' was answered to either 85a or 85b**, do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members — 85 c:			
d	Section 162(e) lobbying and political expenditures — 85 d:			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85 e:			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85 f:			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85 g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h		
86	*501(c)(7) organizations.* Enter: **a** Initiation fees and capital contributions included on line 12 — 86 a:			
b	Gross receipts, included on line 12, for public use of club facilities — 86 b:			
87	*501(c)(12) organizations.* Enter: **a** Gross income from members or shareholders — 87 a:			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) — 87 b:			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88	X	
89 a	*501(c)(3) organizations*. Enter: Amount of tax imposed on the organization during the year under: section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0.			
b	*501(c)(3) and 501(c)(4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89 b		X

c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.

d Enter: Amount of tax on line 89c, above, reimbursed by the organization ►

90 a List the states with which a copy of this return is filed ► See Attachment O

b Number of employees employed in the pay period that includes March 12, 2003 (See instructions.) 90 b 458

91 The books are in care of ► David Sexton Telephone number ► (404) 681-2552

Located at ► 151 Ellis Street, Atlanta, GA ZIP + 4 ► 30303-2440

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041*** – Check here ► [ ]

and enter the amount of tax-exempt interest received or accrued during the tax year ► 92

Part VII Analysis of Income-Producing Activities (See instructions.)

Note: Enter gross amounts unless otherwise indicated.	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	Excluded by section 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts.			14	387,000.	
96 Dividends & interest from securities			14	1,706,000.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	540,000.	
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-74,000.	
101 Net income or (loss) from special events			1	-316,000.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b Royalties			15	6,000.	
c List Rental			13	533,000.	
d Sale of Goods/Assets			18	571,000.	
e See Other Revenue Stmt				1,740,000.	
104 Subtotal (add columns (B), (D), and (E))				5,093,000.	

105 **Total** (add line 104, columns (B), (D), and (E)) ► 5,093,000.

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	N/A

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
Edyificar, Peru	90.0000 %	Micro-finance	11,802,000.	37,196,000.
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions.)

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).*

Please Sign Here

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.

► [signature] Signature of officer — Date 10/29/04

► David Sexton, Controller
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ►	Date	Check if self-employed ► ☐	Preparer's SSN or PTIN (see General Instruction W)
Firm's name (or yours if self-employed) address, and ZIP + 4 ►		EIN ►	
		Phone no. ►	

Form 990, Page 6, Part VII, Line 103

Other Revenue Stmt

Other revenue:	Unrelated business income (A) Business code	(B) Amount	Excluded by section 512, 513, or 514 (C) Exclusn code	(D) Amount	(E) Related or exempt function income
Program Rental Income			1	193,000.	
Country office misc. income			1	1,547,000.	
Total				1,740,000.	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

OMB No. 1545-0047

2003

Name of the organization	Employer identification number
Cooperative for Assistance and Relief Everywhere (CARE)	13-1685039

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
See Attachment P				
Total number of other employees paid over $50,000 ►	383			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
Domain Group Inc 701 Pike Street, Ste 700, Seattle, WA 98101	Fundraising	975,000.
Duke Corporate Education 333 Liggett Street, Durham, NC 27701	Consulting	401,000.
Public Interest Data Inc 1800 Diagonal Road, Alexandria, VA 22314	Fundraising	318,000.
PriceWaterhouseCoopers LLP 10 Tenth Street, Atlanta, GA 30309	Auditing	208,000.
Merkle Data Technologies Inc PO Box 64897, Baltimore, MD 21264	Fundraising	153,000.
Total number of others receiving over $50,000 for professional services ► 6		

Part III Statements About Activities (See instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities . . . . ► $ 262,000. (Must equal amounts on line 38, Part VI-A, or line **i** of Part VI-B.)	**1**	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes,' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property? See Attachment Q	**2 a**	X	
b	Lending of money or other extension of credit?	**2 b**		X
c	Furnishing of goods, services, or facilities?	**2 c**		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? See Part V, Form 990	**2 d**	X	
e	Transfer of any part of its income or assets?	**2 e**		X
3 a	Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)	**3 a**		X
b	Do you have a section 403(b) annuity plan for your employees?	**3 b**		X
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	**4**		X

Part IV Reason for Non-Private Foundation Status (See instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ►

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11 a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11 b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ 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 charitable, etc, 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). (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions.)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ►	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	501,749,000.	431,166,000.	452,066,000.	461,353,000.	1,846,334,000.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,741,000.	3,156,000.	4,501,000.	4,761,000.	14,159,000.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets See Attachment R	1,985,000.	-2,344,000.	3,683,000.	3,101,000.	6,425,000.
23 Total of lines 15 through 22	505,475,000.	431,978,000.	460,250,000.	469,215,000.	1,866,918,000.
24 Line 23 minus line 17	505,475,000.	431,978,000.	460,250,000.	469,215,000.	1,866,918,000.
25 Enter 1% of line 23	5,054,750.	4,319,780.	4,602,500.	4,692,150.	

26 Organizations described on lines 10 or 11: **a** Enter 2% of amount in column (e), line 24 ► **26a** 37,338,360.

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ► **26b**

c Total support for section 509(a)(1) test: Enter line 24, column (e) ► **26c** 1,866,918,000.

d Add: Amounts from column (e) for lines: 18 14,159,000. 19 ______ 22 6,425,000. 26b ______ ► **26d** 20,584,000.

e Public support (line 26c minus line 26d total) ► **26e** 1,846,334,000.

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ► **26f** 98.90 %

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2002) ______ (2001) ______ (2000) ______ (1999) ______

b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2),** enter the sum of these differences (the excess amounts) for each year:

(2002) ______ (2001) ______ (2000) ______ (1999) ______

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ► **27c**

d Add: Line 27a total ______ and line 27b total ______ ► **27d**

e Public support (line 27c total minus line 27d total) ► **27e**

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ► **27f**

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ► **27g** %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ► **27h** %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V Private School Questionnaire (See instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33 a		
b	Admissions policies?	33 b		
c	Employment of faculty or administrative staff?	33 c		
d	Scholarships or other financial assistance?	33 d		
e	Educational policies?	33 e		
f	Use of facilities?	33 f		
g	Athletic programs?	33 g		
h	Other extracurricular activities?	33 h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34 a		
b	Has the organization's right to such aid ever been revoked or suspended?	34 b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check ► a ☐ if the organization belongs to an affiliated group. Check ► b ☐ if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table –			
If the amount on line 40 is – / **The lobbying nontaxable amount is –**			
Not over $500,000 ... 20% of the amount on line 40			
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	41		
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			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		
Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*			

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 45 through 50.)

	Lobbying Expenditures During 4 -Year Averaging Period				
Calendar year (or fiscal year beginning in) ►	**(a)** 2003	**(b)** 2002	**(c)** 2001	**(d)** 2000	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots non-taxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers	X		
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)	X		
c Media advertisements		X	0.
d Mailings to members, legislators, or the public	X		127,000.
e Publications, or published or broadcast statements	X		4,000.
f Grants to other organizations for lobbying purposes		X	0.
g Direct contact with legislators, their staffs, government officials, or a legislative body	X		64,000.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means	X		67,000.
i Total lobbying expenditures (add lines **c** through **h.**)			262,000.

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities. See Attachment S

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	**51 a (i)**		X
(ii) Other assets	**a (ii)**		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	**b (i)**		X
(ii) Purchases of assets from a noncharitable exempt organization	**b (ii)**		X
(iii) Rental of facilities, equipment, or other assets	**b (iii)**		X
(iv) Reimbursement arrangements	**b (iv)**		X
(v) Loans or loan guarantees	**b (v)**		X
(vi) Performance of services or membership or fundraising solicitations	**b (vi)**		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	**c**		X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ► ☐ Yes ☒ No

b If 'Yes,' complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Attachment A
Reconciliation of Form 990 to Audited Financial Statements

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN # 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Direct Public Support	
Total Public Support per Audited Financial Statements	173,237
Less:	
Special Events Revenue shown on Part 1 line 9a of form 990	(73)
Contributed by CARE International Affiliates per Audited Financial Statements	(98,146)
Income from Royalties	(6)
Income from List Rental	(533)
Global Impact Proceeds	(476)
Total Direct Public Support Contributions per Part I, line 1a of form 990	**74,003**
Indirect Public Support	
Contributed by CARE International Affiliates per Audited Financial Statements	98,146
Global Impact Proceeds	476
Total Indirect Public Support Contributions as per Part I line 1b of form 990	**98,622**
Other Revenue	
Total Other Income per Audited Financial Statements	4,944
Income from List Rental (shown as Public Support in the Audited Financial Statements)	533
Income from Royalties (shown as Public Support in the Audited Financial Statements)	6
Less: Interest on Savings and Temporary Cash Investment (Part 1 Line 4 of 990)	(387)
Dividends and Interest from Securities (Part 1 line 5 of 990)	(1,706)
Rental Income (Part 1 line 6c of 990)	(540)
Total Other Revenue per Part 1 line 11 of form 990	**2,850**
Fundraising Expenses	
Fundraising Expenses per Audited Financial Statements	19,855
Less: Special Events Expenses included in Part 1 line 9b of form 990	(389)
Fundraising Expenses per Part 1 line 15 of form 990	**19,466**

		Location	
Elements Comprising Note 4 of the Audited Financial Statements		**Fin Statement**	**990**
Unrestricted Dividends and Interest	2,093	Other Revenue	Lines 4 & 5
Temporarily Restricted Dividends and Interest	779	Public Support	Line 1a
Unrestricted Support from Trust Held by Third Party	5,188	Public Support	Line 1a
Interest and Dividends on Gift Annuity Investments	1,201	Other Changes	Line 20
Unrestricted Net Realized Gains	(69)	Other Changes	Line 8c
Temporarily Restricted Net Realized Gains	(5)	Other Changes	Line 8c
Unrestricted Change in Net Unrealized Gains	1,758	Other Changes	Line 20
Temporarily Restricted Change in Net Unrealized Gains	995	Other Changes	Line 20
Net Change in Value of Trust Held by Third Party	11,801	Other Changes	Line 20
Total Returns as shown in Note 4 of the Audited Financial Statements	**23,741**		

Attachment B
Schedule of Contributors (Part 1 line 1d)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

		Non - Cash		
Donor	**Cash**	**Agricultural Commodities**	**Non-Food In-Kind**	**2004 Total**
U.S.Government	$ 232,569	$ 103,508	$ 223	$ 336,300
Public Support	74,214	-	265	74,479
CARE International	98,124	-	22	98,146
Host governments	18,310	-	65	18,375
United Nations	8,249	8	648	8,905
Others (grants,contracts)	30,268	-	66	30,334
Total Contributions	**$ 461,734**	**$ 103,516**	**$ 1,289**	**$ 566,539**

Attachment C
Schedule of Special Events Revenue (Part I Line 9)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.

IRS Form 990, EIN# 13-1685039

For the Year Ended June 30, 2004

	CARE Anniversary Ball & Dinner	CARE for the Peaceable Kingdom Zoo Event	CARE 5 Mile Run	Total
Gross Receipts	408,000	122,000	106,000	636,000
Less: Contributions	358,000	111,000	94,000	563,000
Gross Revenue	50,000	11,000	12,000	73,000
Less: Direct Expenses	230,000	56,000	103,000	389,000
Net Loss	**(180,000)**	**(45,000)**	**(91,000)**	**(316,000)**

Attachment D
Schedule of Payments to Affiliates (Part I Line 16)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

Name	Address	Cash Amount	Purpose
CARE International Secretariat	Boulevard du Regent 58 box 10 B-1000 Brussels, Belgium	13,000	Operating
CARE France	CAP 19 13 rue Georges Autric 75019 Paris France	250,000	Operating
CARE Japan	2-3-2 Zoushigaya Toshima-Ku Tokyo 171-0032 Japan	12,000	Operating
CARE Netherlands	Noordwal 10 2513 EA Den Hoag Netherlands	809,000	Operating
Total		**1,084,000**	

Attachment E
Schedule of Other Changes in Net Assets (Part 1 line 20)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Other Assets	**Total**
Minority interest in subsidiary income	528
Foreign exchange gains	915
Interest and dividends on gift annuity investments	1,201
Actuarial loss on annuity obligations	(2,182)
Actuarial gain on split interest agreements	83
Unrealized gain on investments	2,753
Increase in trust held by third party	11,801
Total other changes in net assets	**15,099**

Attachment F
Statement of Functional Expenses (Part II)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Natural Classification of Expenses	Program Activities	Management & General	Public Information	Fund Raising	Total
Personnel Costs	$ 124,246	$ 12,492	$ 2,402	$ 6,657	$ 145,797
Professional Services	15,970	1,715	283	1,597	19,565
Equipment	9,619	765	67	60	10,511
Materials and Services	108,030	1,707	363	11,026	121,126
Travel and Transportation	39,789	1,085	153	432	41,459
Occupancy	13,036	1,244	17	495	14,792
Financing/Depreciation	18,300	1,323	4	(564)	19,063
Grants/Subgrants	83,327	1	9	-	83,337
Special event expenses reported as contra revenue	-	-	-	(389)	(389)
Agricultural Commodities/Contributions-In-Kind	104,558	63	10	152	104,783
Total Operating Expenses	**$ 516,875**	**$ 20,395**	**$ 3,308**	**$ 19,466**	**$ 560,044**

Attachment G
Statement of Program Service Accomplishments (Part III)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Our Vision

We seek a world of hope, tolerance and social justice, where poverty has been overcome and people live in dignity and security.

CARE International will be a global force and a partner of choice within a worldwide movement dedicated to ending poverty. We will be known everywhere for our unshakable commitment to the dignity of people.

Our Mission

CARE International's mission is to serve individuals and families in the poorest communities in the world. Drawing strength from our global diversity, resources and experience, we promote innovative solutions and are advocates for global responsibility. We facilitate lasting change by:

- Strengthening capacity for self-help;
- Providing economic opportunity;
- Delivering relief in emergencies;
- Influencing policy decisions at all levels;
- Addressing discrimination in all its forms.

Guided by the aspirations of local communities, we pursue our mission with both excellence and compassion because the people whom we serve deserve nothing less.

Agriculture and Natural Resources $ 69,084

Includes, but is not limited to, sustainable agriculture and natural resource management techniques such as: bio-intensive crop & production technology; livestock practices; post-harvest practices (storage/processing); agriculture-based income-generation activities; recuperation/more environmentally sound use and/or conservation of natural resources; planting trees on private and community lands; integrated conservation & development; and the supply of seeds and tools (usually in relief situations).

Basic and Girl's Education $ 26,741

Includes formal education, literacy, and other forms of non-formal education activities, including school construction.

Attachment G (continued)
Statement of Program Service Accomplishments (Part III)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Children's Health $ 11,938
Includes, but is not limited to, disease prevention (e.g. malaria and pneumonia), immunization; control of diarrheal disease; integrated management of childhood illness; nutrition education; breast-feeding; addressing micronutrients deficiencies; and home gardening.

Reproductive Health $ 22,094
Includes, but is not limited to, family planning; prevention of STD/HIV/AIDS; maternal health; and newborn care.

Water, Sanitation and Environmental Health $ 13,494
Includes, but is not limited to, water supply; institutional arrangements for operation and management of water and/or sanitation systems; watershed management; environmental sanitation; hygiene education; sanitation; solid waste management; surface water; and drainage.

Integrated and Other Health $ 20,565
Includes a combination of the above health sectors, with none predominant, and/or other health interventions such as prevention of chronic and other infectious diseases.

Nutritional Support $ 87,842
Includes feeding of children under age 5; take-home food and on-site feeding; feeding of pregnant or lactating women; feeding of school children; and general feeding (such as in relief situations) including on-site and take-home dry rations.

Infrastructure $ 18,551
Includes roads; bridges; buildings; shelters; and other construction or maintenance (commonly done through food-for-work or cash-for-work).

Small Economic Activity Development (SEAD) $ 24,903
Includes, but is not limited to, finance related services such as loans to individuals; loans to solidarity or other community groups; savings programs; business development; business management training; technical training; and marketing.

Attachment G (continued)
Statement of Program Service Accomplishments (Part III)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Multi-sector and Other **$ 221,663**

Multi-sector projects include activities related to three or more sectors, none of which is predominant. Other includes certain activities that cannot be classified in any of the sectors described above. Examples are logistical support, not related to infrastructure of nutrition programs during emergencies, and land mine awareness and removal activities.

Attachment H
Reconciliation of Part IV EOY Balances with The Audited Financial Statements

Cooperative for Assistance and Relief (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Balance Sheet

Form 990 Lines	Cash & Cash Equiv	Investments	Receivables	Deposits & Other Assets	Property & Equipment	Perpetual Trust Held by 3rd Party	Total
45	85,944						85,944
46	8,748						8,748
47a				70,655			70,655
47b			(1,378)				(1,378)
48a			2,073				2,073
48b			(138)				(138)
49			41,156				41,156
52				786			786
53				2,162			2,162
54		162,341					162,341
57					9,119		9,119
58				12,386		109,130	121,516
Total	94,692	162,341	41,713	85,989	9,119	109,130	502,984

Attachment I
Schedule of Investment (Part IV Line 54)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

(in thousands)

Investments	Beginning Of Year	End Of Year
US Treasury Obligations	23,365	24,643
Mutual Funds	16,812	36,805
Marketable Equity Securities	26,017	42,989
Marketable Debt Securities	27,559	33,414
Money Market Funds	11,861	9,470
Overseas Investments	1,062	15,020
Total Investments	**106,676**	**162,341**

Attachment J
Schedule of Land, Buildings & Equipment (Part IV Line 57)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Name	Beginning Of Year	End Of Year
Land	1,342	1,342
Buildings and Improvements	8,903	8,272
Equipment and Software	10,092	10,864
Leasehold Improvements	323	303
Accumulated Depreciation	(10,514)	(11,662)
Total	**10,146**	**9,119**

Attachment K
Schedule of Other Assets (Part IV Line 58)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Other Assets	Beginning Of Year	End Of Year
Deposits	887	924
Other Assets	2,643	11,462
Perpetual trust held by third party	97,329	109,130
Total Other Assets	**100,859**	**121,516**

Attachment L
Schedule of Other Liabilities (Part IV Line 65)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Other Liabilities	Beginning Of Year	End Of Year
Benefits accrued for overseas national employees	15,351	16,325
Long term loans payable	15,179	16,976
Minority interest in subsidiary	852	767
Total	**31,382**	**34,068**

Attachment M
Reconciliation of Revenue per Audited Financial Statement And Revenue per Return (Part IV-A)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004
(in thousands)

Total Support and Revenue per Audited Financial Statements	572,095
Net realized loss on investment treated as revenue on the form 990 but treated as an "Other Change in Net Assets" on the financial statements	(74)
Special event expense treated as a contra- revenue on the form 990 but treated as "Expense" on the financial statements	(389)
Total Revenue on Form 990	571,632

Attachment N
List of Officers, Directors and Trustees (Part V)

Cooperative for Assistance and Relief (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

Name	Address	Title and Avg. hrs per week	Compensation	Contribution to Employee Benefit Plans	Other Allowance
Peter Bell	C/O CARE 151 Ellis Street Atlanta, GA 30303	President CEO 40+ hrs/wk	346,014	25,712	-
Susan Farnsworth[1]	C/O CARE 151 Ellis Street Atlanta, GA 30303	Sr. Vice President Program 40+ hrs/wk	128,323	14,566	-
Anthony Carey[2]	C/O CARE 151 Ellis Street Atlanta, GA 30303	Sr. Vice President Program 40+ hrs/wk	178,925	24,545	-
Debra Neuman	C/O CARE 151 Ellis Street Atlanta, GA 30303	Sr. Vice President External Relations 40+ hrs/wk	200,370	10,631	92,653[3]
Thaddeus Jastrzebski	C/O CARE 151 Ellis Street Atlanta, GA 30303	Sr. Vice President Finance & Admin Treasurer 40+ hrs/wk	177,625	24,763	-
Barbara Murphy-Warrington	C/O CARE 151 Ellis Street Atlanta, GA 30303	Sr. Vice President Human Resources 40+ hrs/wk	173,632	24,416	-
Milovan Stanojevich	C/O CARE 151 Ellis Street Atlanta, GA 30303	Chief of Staff 40+ hrs/wk	149,717	22,320	-
Carol Andersen	C/O CARE 151 Ellis Street Atlanta, GA 30303	Secretary 40+ hrs/wk	80,119	10,358	-

[1]Ms. Farnsworth assumed the Senior VP Program position in June, 2004. Her compensation and benefits include earnings as Director of Planning and Coordination of the Program Division from July, 2003 until assuming the SVP position.
[2]Mr. Carey passed away in May, 2004.
[3]Other allowances for Ms. Neuman are for moving expenses, which includes $21,801 for expense related to the sale of her home as explained in Attachment Q.

Attachment N
List of Officers, Directors and Trustees (Part V)

Cooperative for Assistance and Relief (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

Name	Address	Title and Avg. hrs per week	Compensation	Contribution to Employee Benefit Plans	Other Allowance
Lincoln C. Chen, M.D	C/O CARE 151 Ellis Street Atlanta, GA 30303	Chair	-	-	-
W. Bowman Cutter, III	C/O CARE 151 Ellis Street Atlanta, GA 30303	Vice Chair	-	-	-
John P. Morgridge	C/O CARE 151 Ellis Street Atlanta, GA 30303	Vice Chair	-	-	-
Bruce C. Tully	C/O CARE 151 Ellis Street Atlanta, GA 30303	Vice Chair Treasurer	-	-	-
Philip Johnston, Ph. D.	C/O CARE 151 Ellis Street Atlanta, GA 30303	President Emeritus	-	-	-
Peter Ackerman, Ph. D.	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Richard J. Almeida	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Kwesi Botchwey, Ph. D.	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Bonnie R. Cohen	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-

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Cooperative for Assistance and Relief (CARE), Inc.
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For the Year Ended June 30, 2004

Name	Address	Title and Avg. hrs per week	Compensation	Contribution to Employee Benefit Plans	Other Allowance
Joan B. Dunlop	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Katharin S. Dyer	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Maria Echaveste	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Lynn Walker Huntley	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Karen R. Johnson	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Dean Kehler	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Deborah Leff	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Kenneth Lehman	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Paul G. Matsen	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Doris Meissner	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-

Attachment N
List of Officers, Directors and Trustees (Part V)

Cooperative for Assistance and Relief (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

Name	Address	Title and Avg. hrs per week	Compensation	Contribution to Employee Benefit Plans	Other Allowance
David M. Olsen	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Roy Richards, Jr.	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
William D. Unger	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Monica Vachher	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Alan Wheat	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
A. Morris Williams, Jr.	C/O CARE 151 Ellis Street Atlanta, GA 30303	Director	-	-	-
Totals			1,434,725	157,311	92,653

Attachment O
List of States Requiring Copies of IRS Form 990 (Part VI, Line 90a)

Cooperative for Assistance and Relief Everywhere (CARE), Inc
IRS Form 990, EIN#13-1685039
For the Year Ended June 30, 2004

Name of States

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

Attachment P
Schedule of Five Highest Paid Employees
Other Than Officers, Directors and Trustees (Sch A, Part I)

Cooperative for Assistance and Relief (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

Name	Address	Title and Avg. hrs per week	Compensation	Contribution to Employee Benefit Plans	Other Allowance [1]
Jonathan Mitchell	C/O CARE 151 Ellis Street Atlanta, GA 30303	Regional Director Middle East/Europe 40+ hrs/wk	134,014	25,229	63,186
Michael Drinkwater	C/O CARE 151 Ellis Street Atlanta, GA 30303	Regional Coordinator South and West Africa 40+ hrs/wk	97,790	20,374	86,242
Adam Hicks	C/O CARE 151 Ellis Street Atlanta, GA 30303	Vice President Private Support 40+ hrs/wk	171,576	24,235	-
Christopher Conrad	C/O CARE 151 Ellis Street Atlanta, GA 30303	Regional Director South and West Africa 40+ hrs/wk	131,464	27,206	34,087
Thomas Friedeberg	C/O CARE 151 Ellis Street Atlanta, GA 30303	Country Director CARE Madagascar 40+ hrs/wk	132,939	23,725	34,488
Totals			**667,783**	**120,769**	**218,001**

[1] Other Allowance includes moving, relocation, post adjustment, quarters, and education allowances.

Attachment Q
Statements about Activities (Schedule A, Part III,2a)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

As part of her employment package, CARE agreed to purchase (for resale) the house owned by Debra Neuman if unsold by the time she purchased a home in Atlanta. In July, 2003, CARE authorized a third party to purchase and resell the home pursuant to this arrangement. The home was resold at a net cost to CARE of $21,801, including commissions paid to the third party. This amount has been included in the Other Allowance column on the List of Officers, Directors and Trustees (Attachment N).

Attachment R
Schedule of Other Income (Sch A, Line 22)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

Other Income	2002	2001	2000	1999	Totals
Proceeds from gain on					
sale of non-capital equipment	515,000	364,000	214,000	197,000	1,290,000
Proceeds from gain/loss on					
sale of securities and assets	(769,000)	(6,145,000)	2,519,000	2,093,000	(2,302,000)
Loss from special events	(345,000)	(382,000)	(128,000)	(43,000)	(898,000)
Program loan fund released					
from restrictions	-	1,323,000	-	-	1,323,000
List rental	562,000	386,000	244,000	392,000	1,584,000
Program rental income	122,000	87,000	-	-	209,000
Other rental income	-	-	1,000	-	1,000
Cause related marketing	-	3,000	15,000	-	18,000
Royalties	16,000	3,000	34,000	110,000	163,000
Sundry	-	-	784,000	352,000	1,136,000
Country office misc income	1,884,000	2,017,000	-	-	3,901,000
Totals	**1,985,000**	**(2,344,000)**	**3,683,000**	**3,101,000**	**6,425,000**

Attachment S
Description of Lobbying Activities (Schedule A, Part VI-B)

Cooperative for Assistance and Relief Everywhere (CARE), Inc.
IRS Form 990, EIN# 13-1685039
For the Year Ended June 30, 2004

CARE engages in lobbying activities that assists the organization in carrying out its mission of fighting global poverty. In the United States, lobbying activities during the 2003 tax year included the following:

- Direct meetings and phone calls with members and/or staff of Congress and the President's administration.
- Writing letters to members of Congress, President Bush and members of his administration.
- Informing CARE supporters about international issues and encouraging them to contact their legislators.

Legislation and issues that CARE's lobbying activities focused on included the following:

- Foreign Operations Appropriations
- HIV/AIDS
- Basic Education Funding

The total expenditures related to lobbying the U.S. government were $238,000.

CARE also engages in lobbying activities overseas. The overseas lobbying activities during the 2003 tax year included the following:

- In Ecuador, CARE participated in committees to influence reproductive health regulations and public subsidy management.
- In Mali, CARE held meetings with community associations to advocate for education issues.

The total expenditures related to lobbying overseas governments were $24,000.