

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)

2012

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 2012 calendar year, or tax year beginning OCT 1, 2012 and ending SEP 30, 2013

Header section containing organization name (WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS), EIN (23-6393344), address (7 EAST BALTIMORE STREET, BALTIMORE, MD 21202), principal officer (STEPHAN BAUMAN), website (WWW.WR.ORG), and form of organization (Corporation).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement (TO EMPOWER THE LOCAL CHURCH TO SERVE THE MOST VULNERABLE.), revenue (Total: 56,842,649), expenses (Total: 56,395,485), and net assets (Total: 20,513,755).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block containing officer signature (BARRY HOWARD, CFO/SVP FINANCE, HR AND ADMIN), preparer name (STACY CULLEN), firm name (TAIT, WELLER & BAKER LLP), and address (1818 MARKET STREET, SUITE 2400, PHILADELPHIA, PA 19103).

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
TO EMPOWER THE LOCAL CHURCH TO SERVE THE MOST VULNERABLE. IN COMMUNITY WITH THE LOCAL CHURCH, WORLD RELIEF ENVISIONS THE MOST VULNERABLE PEOPLE TRANSFORMED ECONOMICALLY, SOCIALLY AND SPIRITUALLY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **24,065,351.** including grants of \$ **10,941,275.**) (Revenue \$ **1,281,955.**)
REFUGEE ASSISTANCE - PROVIDED BASIC NEEDS AND INITIAL RESETTLEMENT SERVICES TO 6,746 REFUGEES FORCED TO FLEE PERSECUTION IN THEIR HOMELANDS. OTHER EXTENDED SERVICES WERE PROVIDED TO THESE AND 5,922 OTHERS IN PARTNERSHIP WITH CHURCHES AND VOLUNTEERS, INCLUDING EXTENDED CASE MANAGEMENT, ENGLISH LANGUAGE TRAINING, EMPLOYMENT ASSISTANCE AND OTHER SOCIAL ADJUSTMENT SERVICES. TOTAL BENEFICIARIES: 12,668

4b (Code:) (Expenses \$ **3,855,620.** including grants of \$ **694,083.**) (Revenue \$ **859,893.**)
EMERGENCY RELIEF - WORKING WITH LOCAL CHURCHES AND PARTNERS, WORLD RELIEF RESPONDS TO DISASTERS THROUGHOUT THE WORLD, MEETING URGENT NEEDS INCLUDING RESCUE, RELIEF AND TRAUMA SUPPORT. IN AREAS PRONE TO DISASTERS, WORLD RELIEF ALSO TRAINS COMMUNITIES TO PROTECT THEMSELVES FROM PERSISTENT FLOODS, DROUGHTS AND FIRES BY MAPPING OUT RISKS AND DEVELOPING SYSTEMS AND INFRASTRUCTURES TO PREVENT THE WORST EFFECTS. SUDAN, SOMALIA, INDIA, DR CONGO. 626,303 BENEFICIARIES IN DISASTER RISK REDUCTION, 42,759 BENEFICIARIES IN DISASTER RESPONSE.

4c (Code:) (Expenses \$ **5,142,477.** including grants of \$ **654,695.**) (Revenue \$)
SERVICES TO IMMIGRANTS: PROVIDED LEGAL ASSISTANCE AND OTHER INTEGRATION SERVICES TO IMMIGRANTS. SUPPORTED CHURCH-CENTERED MINISTRIES AND CHRISTIAN NON-PROFITS PROVIDING IMMIGRATION LEGAL SERVICES IN SOME OF AMERICA'S MOST VULNERABLE COMMUNITIES; SUPPORTED INDIVIDUAL CHURCHES BY PROVIDING CONSULTATIONS FOR IMMIGRATION QUESTIONS AND DIRECTLY REPRESENTING MINISTERS FOR RELIGIOUS WORKER VISAS. TOTAL BENEFICIARIES: 28,388

4d Other program services (Describe in Schedule O.)
(Expenses \$ **14,272,298.** including grants of \$ **1,434,482.**) (Revenue \$ **294,147.**)

4e Total program service expenses **47,335,746.**

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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>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	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>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		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>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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>		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>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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>	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>		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>	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>		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>		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>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		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 and XII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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>	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>	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</i>		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>		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>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

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ASSOCIATION OF EVANGELICALS**

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Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule O

Form **990** (2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
4b	If "Yes," enter the name of the foreign country: SEE SCHEDULE O See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA, CO, DC, DE, FL, GA, IL, IN, KS, KY, MA, MD**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **BARRY HOWARD - (443) 451-1900**
7 EAST BALTIMORE ST., BALTIMORE, MD 21202

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SCOTT ARBEITER CHAIR	3.00	X		X				0.	0.	0.
(2) JOHN GRIFFIN, CPA TREASURER	3.00	X		X				0.	0.	0.
(3) LEITH ANDERSON EX OFFICIO/DIRECTOR	1.00	X						0.	0.	0.
(4) KATHERINE BARNHART DIRECTOR	1.00	X						0.	0.	0.
(5) PAUL BORTHWICK DIRECTOR	1.00	X						0.	0.	0.
(6) TIM BREENE DIRECTOR	1.00	X						0.	0.	0.
(7) REV. JOHN CHUNG SECRETARY	1.00	X		X				0.	0.	0.
(8) DR. JUDITH M. DEAN DIRECTOR	1.00	X						0.	0.	0.
(9) DR. TIMOTHY EK EX OFFICIO/DIRECTOR	1.00	X						0.	0.	0.
(10) REV. DR. CASELY ESSAMAUH DIRECTOR	1.00	X						0.	0.	0.
(11) STEVE MOORE VICE CHAIR/EXECUTIVE COMMI	3.00	X						0.	0.	0.
(12) J. STEPHEN SIMMS DIRECTOR	1.00	X						0.	0.	0.
(13) DR. ROY TAYLOR EX OFFICIO/DIRECTOR	1.00	X						0.	0.	0.
(14) TIM TRAUDT DIRECTOR	1.00	X						0.	0.	0.
(15) KATHY VASELKIV DIRECTOR	1.00	X						0.	0.	0.
(16) BILL WESTRATE DIRECTOR	1.00	X						0.	0.	0.
(17) DAVID HUSBY DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) STEPHAN BAUMAN CEO/PRESIDENT	40.00			X				119,945.	0.	91,706.
(19) KEVIN SANDERSON SVP INTERNATIONAL PROGRAMS	40.00			X				115,761.	0.	30,971.
(20) SAMUEL WOLGEMUTH SVP MARKETING/CHIEF MARKET	40.00			X				31,154.	0.	0.
(21) BARRY HOWARD CFO/SVP FINANCE, HR & ADMI	40.00			X				108,831.	0.	30,971.
(22) DONALD GOLDEN VP CHURCH ENGAGEMENT	40.00			X				118,911.	0.	27,234.
(23) DAN KOSTEN SVP US PROGRAMS	40.00			X				101,187.	0.	32,397.
1b Sub-total								595,789.	0.	213,279.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								595,789.	0.	213,279.

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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	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		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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CGLIC BLOOMFIELD EASC, 900 COTTAGE GROVE ROAD, BLOOMFIELD, CT 06152	CIGNA HEALTH BENEFITS	425,420.
CONNECTICUT HEALTH & LIFE INS. CO. P.O. BOX 644546, PITTSBURGH, PA 15264-4546	BENEFITS	305,064.
RIDGE PRINTING CORPORATION 8900 YELLOW BRICK RD., ROSEDALE, MD 21237	PRINTING/MARKETING	182,731.
CRYSTAL & COMPANY, 3 BETHESDA METRO CTR, STE 709, BETHESDA, MD 20814	INSURANCE	138,586.
BROTHERHOOD INS 6400 BROTHERHOOD WAY, FORT WAYNE, IN 46825	INSURANCE	102,602.

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

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

Form 990 (2012)

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Part VIII Statement of Revenue

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

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

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12-10-12

Form 990 (2012)

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

Form 990 (2012)

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,289,055.	1,289,055.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	11,067,825.	11,067,825.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	1,367,655.	1,367,655.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	758,708.		505,744.	252,964.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	21,350,252.	17,537,167.	2,462,667.	1,350,418.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	235,817.	192,631.	28,251.	14,935.
9 Other employee benefits	3,470,000.	2,746,136.	524,404.	199,460.
10 Payroll taxes	1,367,097.	1,058,458.	205,087.	103,552.
11 Fees for services (non-employees):				
a Management				
b Legal	138,149.	55,485.	63,747.	18,917.
c Accounting	246,473.	94,742.	148,295.	3,436.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,910,921.	1,296,394.	224,320.	390,207.
12 Advertising and promotion				
13 Office expenses	3,868,465.	3,172,146.	308,243.	388,076.
14 Information technology	193,336.	103,423.	48,806.	41,107.
15 Royalties				
16 Occupancy	1,461,314.	1,264,379.	192,350.	4,585.
17 Travel	2,219,604.	1,476,054.	464,059.	279,491.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	115,539.		107,909.	7,630.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	396,688.	168,726.	227,962.	
23 Insurance	305,443.	77,234.	228,209.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM COST	3,866,943.	3,866,943.		
b MISCELLANEOUS	704,837.	499,314.	161,883.	43,640.
c BAD DEBT EXPENSE	61,364.	1,979.	59,385.	
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	56,395,485.	47,335,746.	5,961,321.	3,098,418.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

Form 990 (2012)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	6,701,977.	1	6,105,882.	
	2 Savings and temporary cash investments	51,665.	2	125,414.	
	3 Pledges and grants receivable, net	4,464,545.	3	5,719,385.	
	4 Accounts receivable, net	333,235.	4	258,676.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	34,564.	5	35,009.	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	431,816.	9	451,183.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,866,616.			
	b Less: accumulated depreciation	10b 5,570,040.	3,364,868.	10c	3,296,576.
	11 Investments - publicly traded securities	115,820.	11	113,714.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11	8,884,618.	13	9,363,748.	
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	1,549,757.	15	1,327,288.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	25,932,865.	16	26,796,875.		
Liabilities	17 Accounts payable and accrued expenses	2,818,722.	17	2,720,713.	
	18 Grants payable		18		
	19 Deferred revenue	332,605.	19	198,406.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties	3,677,522.	23	3,364,001.	
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	6,828,849.	26	6,283,120.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	15,003,046.	27	16,250,255.	
	28 Temporarily restricted net assets	4,100,970.	28	4,263,500.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	19,104,016.	33	20,513,755.		
34 Total liabilities and net assets/fund balances	25,932,865.	34	26,796,875.		

Form 990 (2012)

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

Form 990 (2012)

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Part XI Reconciliation of Net Assets

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

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

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	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	
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	

Form 990 (2012)

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

2012

Open to Public Inspection

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

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 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 to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	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?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	49878050.	54452324.	50207794.	51828435.	53218236.	259584839
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	49878050.	54452324.	50207794.	51828435.	53218236.	259584839
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						259584839

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	49878050.	54452324.	50207794.	51828435.	53218236.	259584839
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	74,365.	10,641.	62,669.	311,019.	220,721.	679,415.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	268,328.	112,472.	382,022.	138,107.	952,144.	1853073.
11 Total support. Add lines 7 through 10						262117327
12 Gross receipts from related activities, etc. (see instructions)					12	12,894,673.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	99.03	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	98.23	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<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 year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2012

Name of the organization

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

Employer identification number

23-6393344

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	U.S. DEPARTMENT OF STATE PM/DDTC, SA-1, 12TH FLOOR, 2401 E STREET NW, ROOM H1200 WASHINGTON, DC 20522-0112	\$ 14,757,274.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	DEPARTMENT OF HEALTH AND HUMAN SERVICES 200 INDEPENDENCE AVENUE SOUTHWEST WASHINGTON, DC 20201	\$ 9,829,972.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT RONALD REAGAN BUILDING WASHINGTON, DC 20523-1000	\$ 4,520,864.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	WASHINGTON STATE DSHS P.O. BOX 11699 TACOMA, WA 98411-9905	\$ 1,400,493.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public
Inspection

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

Employer identification number
23-6393344

Part I 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).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

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

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

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

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

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

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

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

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

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

Schedule D (Form 990) 2012

23-6393344 Page 3

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)		
Total. (Col. (b) must equal Form 990, Part X, col. (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) INVESTMENT IN URWEGO		
(2) OPPORTUNITY BANK	883,449.	COST
(3) INVESTMENT IN LLC	4,071,578.	COST
(4) INVESTMENT IN KREDIT	4,408,721.	COST
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	9,363,748.	

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. FIN 48 (ASC 740) Footnote. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

Schedule D (Form 990) 2012

23-6393344 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		60,120,871.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	-6,202.	
b	Donated services and use of facilities	315,154.	
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	2,969,270.	
e	Add lines 2a through 2d		3,278,222.
3	Subtract line 2e from line 1		56,842,649.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		56,842,649.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		58,700,837.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	315,154.	
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII.)	1,990,198.	
e	Add lines 2a through 2d		2,305,352.
3	Subtract line 2e from line 1		56,395,485.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		56,395,485.

Part XIII Supplemental Information

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

PART X, LINE 2: MANAGEMENT HAS REVIEWED THE TAX POSITIONS FOR EACH OF

**THE OPEN TAX YEARS (YEARS ENDED SEPTEMBER 30, 2010-2012) OR EXPECTED TO BE
TAKEN IN WORLD RELIEF'S SEPTEMBER 30, 2013 TAX RETURN AND HAS CONCLUDED
THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE
RECOGNITION IN THE FINANCIAL STATEMENTS.**

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ELIMINATION OF MICROFINANCE ACTIVITY 1,990,198.

Schedule D (Form 990) 2012

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No. 1545-0047

2012

Open to Public
Inspection

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

Employer identification number
23-6393344

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other 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 its grants and other assistance 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
CENTRAL AMERICA AND THE CARIBBEAN	2	76	PROGRAM SERVICES	AIDS (ABY), OVC, MCH, CHURCH ENGAGEMENT, CONFERENCES, DISASTER RESPONSE.	1,848,194.
EAST ASIA AND THE PACIFIC	8	180	PROGRAM SERVICES, GRANTS TO RECIPIENTS LOCATED IN THE REGION, MICROCREDIT SERVICES	HEALTH EDUCATION, HIV AIDS, DR, AGRICULTURAL VALUE CHAIN DEVELOPMENT, MATERNAL & CHILD HEALTH,	1,296,881.
SOUTH ASIA	1	5	PROGRAM SERVICES	HIV/AIDS, MICROECONOMIC DEVELOPMENT	67,698.
SUB-SAHARAN AFRICA	25	578	PROGRAM SERVICES, FUNDRAISING, MICROCREDIT SERVICES	REFUGEE SHELTER REHABILITATION, CHILD SURVIVOR, CHURCH MOBILIZATION, HIV&AIDS,	14,352,934.
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	1	MICROCREDIT SERVICES	ASSISTING LOW INCOME CLIENTS BY PROVIDING LONG-TERM ACCESS TO QUALITY FINANCIAL	0.
3 a Sub-total	37	840			17,565,707.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	37	840			17,565,707.

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

Schedule F (Form 990) 2012

SEE PART V FOR COLUMN (E) DESCRIPTIONS

WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS

23-6393344

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	PROVISION OF RELIEF MATERIALS TO EARTHQUAKE VICTIMS IN WEST SUMATRA	20,030.	WIRE FROM HEADQUARTERS	0.		
		SUB-SAHARAN AFRICA	TO BRING A LASTING IMPACT ON THE EDUCATION AND YOUTH OF SOUTH SUDAN	166,946.	WIRE FROM HEADQUARTERS	0.		
		EAST ASIA AND THE PACIFIC	UTTARAKHAND CLOUD BURST AND FLOOD RELIEF; TO CARRY OUT EMERGENCY RELIEF IN	10,000.	WIRE FROM HEADQUARTERS	0.		
		SUB-SAHARAN AFRICA	TO TRAIN LOCAL CHURCH VOLUNTEERS IN IOTU WITH CARE GROUP MODEL. IT WILL BE THE	280,103.	WIRE FROM HEADQUARTERS	0.		
		SUB-SAHARAN AFRICA	SAVING FOR LIFE WORK WITH COMMUNITY GROUP, TRAINING AGENTS, CHURCHES AND	50,728.	WIRE FROM HEADQUARTERS	0.		
		SUB-SAHARAN AFRICA	TO BRING A LASTING IMPACT ON THE HEALTH SYSTEM OF SOUTH SUDAN THROUGH THE TRAINING	179,693.	WIRE FROM HEADQUARTERS	0.		
		EAST ASIA AND THE PACIFIC	TO TRAIN LOCAL CHURCH VOLUNTEERS WITH GROUP CARE MODEL. IT WILL BE THE PROMOTERS OF	8,275.	WIRE FROM HEADQUARTERS	0.		
		SUB-SAHARAN AFRICA	TO PROVIDE TRAINING IN AGRICULTURAL PRODUCTION	63,747.	WIRE FROM HEADQUARTERS	0.		

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

3 Enter total number of other organizations or entities **▶** _____

SEE PART V FOR COLUMN (D) DESCRIPTIONS

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

23-6393344

Schedule F (Form 990)

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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)
		SUB-SAHARAN AFRICA	TO SUPPORT AGRIBUSINESS ACTIVITY IN COLLABORATION WITH A PARTNER ENTERPRISE	25,000.	WIRE FROM HEADQUARTERS	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT AGRIBUSINESS ACTIVITY IN HAITI	46,154.	WIRE FROM HEADQUARTERS	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	INVESTMENT FOR THE DEVELOPMENT OF BUSINESS INITIATIVES BASED ON AGRICULTURAL	307,610.	WIRE FROM HEADQUARTERS	0.		
		EAST ASIA AND THE PACIFIC	MOBILIZATION FOR LIFE PROTECTING PAPUA (MFLP) PROGRAM IS TO CREATE A SUSTAINABLE	10,924.	WIRE FROM HEADQUARTERS	0.		
		SUB-SAHARAN AFRICA	SUPPORT TO ORPHANS AND VULNERABLE CHILDREN AFFECTED BY HIV/AIDS (OVC)	9,996.	WIRE FROM HEADQUARTERS	0.		
		SUB-SAHARAN AFRICA	AGRICULTURAL DEVELOPMENT PROGRAM FOCUSING ON CASHEW FARMING.	82,000.	WIRE FROM HEADQUARTERS	0.		

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

23-6393344

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TUITION & FEES	CENTRAL AMERICA & THE CARIBBEAN	133	0.	WIRE TRANSFER	24,058.		
SPECIFIC ASSISTANCE	CENTRAL AMERICA & THE CARIBBEAN	1	0.		12,624.	UTILITIES	FMV
SPECIFIC ASSISTANCE	SUB SAHARAN AFRICA	9	0.		1,859.	INSTRUCTION MATERIALS	FMV

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2012

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; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

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

PART I, LINE 3, COLUMN (E):

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: HEALTH EDUCATION, HIV AIDS, DR, AGRICULTURAL VALUE CHAIN DEVELOPMENT, MATERNAL & CHILD HEALTH, CHURCH MOBILIZATION, TEMPORARY HOUSING PROJECT, MATERNAL CHILD HEALTH, TRAFFICKING PREVENTION, MICROCREDITS.

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: REFUGEE SHELTER REHABILITATION, CHILD SURVIVOR, CHURCH MOBILIZATION, HIV&AIDS, FOOD SECURITY ACTIVITIES, HEALTH EDUCATION, MATERNAL HEALTH EDUCATION, CHILD DEVELOPMENT, MICROFINANCE - MED, SUPPORTING ORPHANS AND VULNERABLE CHILDREN AFFECTED BY HIV/AIDS. DISASTER RESPONSE RELIEF. LOANS TO THE ECONOMICALLY ACTIVE POOR.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(E) SPECIFIC TYPES OF SERVICES IN REGION: ASSISTING LOW INCOME CLIENTS BY PROVIDING LONG-TERM ACCESS TO QUALITY FINANCIAL SERVICES THROUGH CREDITING ENTREPRENEURSHIP, AGRICULTURE, BASIC NEEDS AND SUSTAINABLE

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; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

LIVELIHOOD

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO BRING A LASTING IMPACT ON THE EDUCATION AND YOUTH OF SOUTH SUDAN THROUGH THE CONSTRUCTION OF NEW SCHOOLS, DEVELOPMENT OF TEACHING AND CURRICULUM MATERIALS, AND TRAINING OF 2400 TEACHERS AND LOCAL GOVERNMENT OFFICERS.

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: UTTARAKHAND CLOUD BURST AND FLOOD RELIEF: TO CARRY OUT EMERGENCY RELIEF IN RUDRAPRAYAG, CHAMOLI AND UTTARAKASHI DISTRICTS DUE TO INCIDENCE OF CLOUDBURST, FLASH FLOODS AND LANDSLIDES

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO TRAIN LOCAL CHURCH VOLUNTEERS IN IOTU WITH CARE GROUP MODEL. IT WILL BE THE PROMOTERS OF HEALTH FACILITATION TO THE COMMUNITY THROUGH PARTNERSHIP WITH OTHER HEALTH INSTITUTION SUCH AS THE COMMUNITY HEALTH CENTER

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: SAVING FOR LIFE WORK WITH COMMUNITY GROUP, TRAINING AGENTS, CHURCHES AND COMMUNITIES BASED ORGANIZATIONS TO IMPLEMENT SFL ACTIVITIES

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO BRING A LASTING IMPACT ON THE HEALTH SYSTEM OF

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; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SOUTH SUDAN THROUGH THE TRAINING AND CAPACITY BUILDING OF LOCAL FBOS AND MEDICAL PERSONNEL.

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: TO TRAIN LOCAL CHURCH VOLUNTEERS WITH GROUP CARE MODEL. IT WILL BE THE PROMOTERS OF HEALTH FACILITATION TO THE COMMUNITY THROUGH PARTNERSHIP WITH OTHER HEALTH INSTITUTIONS SUCH AS THE COMMUNITY HEALTH CENTER.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TO SUPPORT AGRIBUSINESS ACTIVITY IN COLLABORATION WITH A PARTNER ENTERPRISE IN RWANDA

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: INVESTMENT FOR THE DEVELOPMENT OF BUSINESS INITIATIVES BASED ON AGRICULTURAL PRODUCTION

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: MOBILIZATION FOR LIFE PROTECTING PAPUA (MFLP) PROGRAM IS TO CREATE A SUSTAINABLE MOVEMENT OF LOCAL PARTNERS AND VOLUNTEERS RESPONDING TO REDUCE NEW HIV INFECTIONS AND MITIGATE THE IMPACT OF AIDS ON FAMILIES AND COMMUNITIES. THE PROGRAM ALSO EQUIPS COMMUNITY VOLUNTEERS TO COUNSEL AND CARE FOR THOSE INFECTED AND AFFECTED BY HIV AND AIDS

**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, line 21 or 22.
▶ Attach to Form 990.**

OMB No. 1545-0047

2012

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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
ALBANY PARK COMMUNITY CENTER 3404 W. LAWRENCE AVE., SUITE 300 CHICAGO, IL 60625	36-2841886	501(C)(3)	27,106.	0.			WR-C SERVES AS THE LEAD AGENCY IN A CITIZENSHIP GRANT CALLED RICI. APCC PROVIDES CITIZENSHIP
COLLEGE OF DUPAGE 425 FAWELL BLVD. GLEN ELLYN, IL 60137	36-2594972	501(C)(3)	19,486.	0.			PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
EXODUS WORLD SERVICE 109 FAIRFIELD WAY, #101 BLOOMINGDALE, IL 60108	36-3604920	501(C)(3)	8,760.	0.			PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
THE EPISCOPAL CHURCH IN WESTERN WASHINGTON - 1551 10TH AVE, E. - SEATTLE, WA 98102	91-0200430	501(C)(3)	150,698.	0.			PROVIDES EMPLOYMENT, ENGLISH AS A SECOND LANGUAGE (ESL) SERVICES, AND SKILLS TRAINING TO
WEST CHICAGO HIGH SCHOOL DISTRICT 94 - 326 JOLIET ST. - WEST CHICAGO, IL 60185	36-6004531	501(C)(3)	6,735.	0.			PARTNERSHIP WITH WR-CITIZENSHIP PROGRAM TO AID REFUGEES
WORLD RELIEF MINNESOTA 1515 EAST 66TH STREET RICHFIELD, MN 55423	41-2763181	501(C)(3)	840,675.	0.			DIRECTLY FUNDED THE RESETTLEMENT AND PROCESSING OF REFUGEES

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

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

Schedule I (Form 990) (2012)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

Schedule I (Form 990)

23-6393344

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CHRISTIANVILLE FOUNDATION P.O. BOX 24598 JACKSONVILLE, FL 32241	98-0049674	501(C)(3)	32,311.	0.			PROJECT ACTIVITIES AT THE CHRISTIANVILLE DEMONSTRATION FARM INCLUDING: PRODUCTION OF
COMPASSION AND MERCY ASSOCIATES (CAMA)/CHRISTIAN & MISSIONARY ALLIANCE - 8595 EXPLORER DRIVE - COLORADO SPRINGS, CO 80935-3500	84-1234511	501(C)(3)	20,000.	0.			TO PROVIDE EMERGENCY SERVICES TO IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE
EVANGELICAL FELLOWSHIP INTERNATIONAL - 24 KING'S LANE, C/O TIMOTHY MECH - GROVE CITY, PA 16127	26-3403493	501(C)(3)	25,567.	0.			TO MOVE TOWARDS THE KINGDOM VISION OF SEEING GOD'S CHURCH MOBILIZED TO BRING HEALTH AND
HDI (WHEATON COLLEGE) 501 COLLEGE AVE WHEATON, IL 60187	36-2182171	501(C)(3)	65,000.	0.			EMERGENCY & RECOVERY NEEDS FOR PEOPLE AFFECTED BY JAPAN TSUNAMI
MEDICAL TEAMS INTERNATIONAL P.O. BOX 10 PORTLAND, OR 97207-0010	93-0878944	501(C)(3)	81,200.	0.			EMERGENCY & RECOVERY NEEDS OF AFFECTED POPULATIONS OF S. SOMALIA
WORLD RENEW 2850 KALAMAZOO SE GRAND RAPIDS, MI 49560	38-1708140	501(C)(3)	11,517.	0.			TO PROVIDE EMERGENCY SERVICES TO IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE

Schedule I (Form 990)

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

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
SPECIFIC ASSISTANCE TO INDIVIDUALS	3066	0.	234,863.	FMV	FOOD AND HOUSEHOLD ITEMS
SPECIFIC ASSISTANCE TO INDIVIDUALS	225	0.	31,043.	FMV	CLOTHING
SPECIFIC ASSISTANCE TO INDIVIDUALS	23	2,479.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	70	3,334.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	712	0.	358,691.	FMV	FURNITURE

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

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

PART II, LINE 1, COLUMN (H):

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SPECIFIC ASSISTANCE TO INDIVIDUALS	8,877.	0.	3,087,071.	FMV	HOUSING
SPECIFIC ASSISTANCE TO INDIVIDUALS	261.	34,868.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	429.	35,003.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	661.	276,149.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	5,924.	1,377,925.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	1,159.	259,268.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	26.	2,332.	0.		
SPECIFIC ASSISTANCE TO INDIVIDUALS	2,783.	291,963.	0.		
INITIAL REFUGEE GRANTS	13,566.	4,731,075.	0.		

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: ALBANY PARK COMMUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: WR-C SERVES AS THE LEAD AGENCY IN A
CITIZENSHIP GRANT CALLED RICI. APCC PROVIDES CITIZENSHIP CLASSES FOR THE
GRANT

NAME OF ORGANIZATION OR GOVERNMENT:

THE EPISCOPAL CHURCH IN WESTERN WASHINGTON

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDES EMPLOYMENT, ENGLISH AS A
SECOND LANGUAGE (ESL) SERVICES, AND SKILLS TRAINING TO REFUGEES

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIANVILLE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: PROJECT ACTIVITIES AT THE
CHRISTIANVILLE DEMONSTRATION FARM INCLUDING: PRODUCTION OF VEGETABLES
UNDER GREENHOUSES AND PROTECTED AGRICULTURE, AND IMPROVEMENT AND
MAINTENANCE OF GOAT HERD/BARN WHILE AT THE SAME TIME TRAIN FARMERS IN NEW
TECHNOLOGIES.

NAME OF ORGANIZATION OR GOVERNMENT:

COMPASSION AND MERCY ASSOCIATES (CAMA)/CHRISTIAN & MISSIONARY ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE EMERGENCY SERVICES TO
IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE FIGHTING IN
SYRIA

NAME OF ORGANIZATION OR GOVERNMENT: EVANGELICAL FELLOWSHIP INTERNATIONAL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO MOVE TOWARDS THE KINGDOM VISION
OF SEEING GOD'S CHURCH MOBILIZED TO BRING HEALTH AND WHOLENESS TO THE
MOST VULNERABLE, FLOW OUT OF THE PEACE BUILDING PROGRAM

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: WORLD RENEW

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE EMERGENCY SERVICES TO

IDPS AND HOST COMMUNITY DUE TO THE HARDSHIP CAUSED BY THE FIGHTING IN

SYRIA

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

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

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</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 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 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 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)									
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	X									
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	X									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:										
a Receive a severance payment or change-of-control payment?		X								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		X								
c Participate in, or receive payment from, an equity-based compensation arrangement?		X								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.										
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?	5a	X								
b Any related organization?	5b	X								
If "Yes" to line 5a or 5b, describe in Part III.										
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?	6a	X								
b Any related organization?	6b	X								
If "Yes" to line 6a or 6b, describe in Part III.										
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X								
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X								
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

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

Schedule J (Form 990) 2012

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

23-6393344

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2012

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 **WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS** Employer identification number **23-6393344**

Part I Types of Property

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

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

	Yes	No
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?		X
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?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
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.		

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

Schedule M (Form 990) (2012)

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

PART I, OTHER TYPES OF PROPERTY:

OFFICE SUPPLIES

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 12

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1283.

(D) METHOD OF DETERMINING REVENUE: FMV

ESL MATERIALS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 5

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 524.

(D) METHOD OF DETERMINING REVENUE: FMV

MEDIA PRODUCTS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 200.

(D) METHOD OF DETERMINING REVENUE: FMV

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization	WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number	23-6393344
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MISSION OF WORLD RELIEF, AS ORIGINATED WITHIN THE NATIONAL
ASSOCIATION OF EVANGELICALS, IS TO EMPOWER THE LOCAL CHURCH TO SERVE
THE MOST VULNERABLE. IN COMMUNITY WITH THE LOCAL CHURCH, WORLD RELIEF
ENVISIONS THE MOST VULNERABLE PEOPLE TRANSFORMED ECONOMICALLY,
SOCIALY, AND SPIRITUALLY.

WORLD RELIEF SEEKS TO ASSIST A CHARITABLE CLASS INTERNALLY REFERRED TO
AS THE "POOREST OF THE POOR". PROPOSALS FOR PROGRAMS DESIGNED TO
BENEFIT THIS GROUP ARE EVALUATED BY STAFF IN ONE OF WORLD RELIEF'S
FIELD OFFICES IN THE USA OR OVERSEAS BEFORE APPROVAL OF FUNDING BY
WORLD RELIEF'S MANAGEMENT. THESE FIELD OFFICES ARE STAFFED WITH
COMPASSIONATE INDIVIDUALS, WHO MAKE TRIPS TO THE PROPOSED SITES BEFORE
AND DURING A PROJECT TO ENSURE THAT THE FUNDING IS DIRECTED TO THE
QUALIFIED AND APPROVED CHARITABLE PURPOSES OF THE ORGANIZATION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES INCLUDE:

AGRICULTURE: WORLD RELIEF'S FINANCIAL AND AGRICULTURE PROGRAMS GIVE
PEOPLE, FAMILIES AND ENTIRE COMMUNITIES A CHANCE TO OVERCOME DEPENDENCY
AND ACHIEVE THEIR OWN SUCCESS, AN OPPORTUNITY TOO OFTEN DENIED TO THE
WORLD'S POOREST. 9,597 FARMERS IN 365 FARMER GROUPS (2,943 MEN; 4,042
WOMEN). 6,627 FARMERS AND 271 BUSINESSES GIVEN TECHNICAL AID OR
TRAINING. 1,017,228 TOTAL KG OF PRODUCE SENT TO MARKET, 7,455 NEW JOBS
CREATED, 907 NEW HECTARES FARMED, 4,450 RECULTIVATED HECTARES AFTER

Name of the organization	WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number	23-6393344
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DAMAGE FROM WAR, DISASTERS, ETC. HAITI, BURUNDI, DR CONGO, KENYA, SOUTH SUDAN, SUDAN, MALAWI, MOZAMBIQUE, INDONESIA.

ANTI-TRAFFICKING: CHURCH AND CARE GROUP MEMBERS, LOCAL LEADERS, TEENS AND CHILDREN ARE EDUCATED AND EQUIPPED WITH PREVENTION MESSAGES WHICH THEY CAN PASS ALONG TO OTHERS THROUGH MENTORSHIP, IN-HOME PRESENTATIONS, AND GENERAL WORD-OF-MOUTH. LOCAL LEADERS ARE TRAINED ON TRAFFICKING PREVENTION, COMMUNITY PROTECTION AND SAFE MIGRATION.

COMPREHENSIVE SERVICES ARE ALSO PROVIDED TO SURVIVORS. 2,991 PEOPLE TRAINED TO PREVENT HT, 7 HT VICTIMS ASSISTED, 1,315 NEW CHILDREN'S AND TEEN CLUBS WHERE 37,111 NEW CHILDREN AND YOUTH LEARN ABOUT TRAFFICKING & ITS PREVENTION. CAMBODIA. IN THE U.S., WORLD RELIEF PROVIDES COMPREHENSIVE SERVICES TO SURVIVORS OF HUMAN TRAFFICKING AND THEIR FAMILY MEMBERS, AND RAISES AWARENESS IN LOCAL COMMUNITIES TO INCREASE VICTIM IDENTIFICATION AND RESCUE. THIS IS DONE IN PARTNERSHIP WITH CHURCHES, LAW ENFORCEMENT, UNIVERSITIES, AND SERVICE PROVIDERS. 42 SURVIVORS RECEIVED RESTORATIVE SERVICES TO SUPPORT THEIR PHYSICAL, EMOTIONAL, SOCIAL AND SPIRITUAL NEEDS. 5,675 COMMUNITY MEMBERS WERE EDUCATED ABOUT TRAFFICKING IN THEIR COMMUNITY AND HOW THEY CAN BECOME INVOLVED. TOTAL U.S. BENEFICIARIES: 5,717

CHILD DEVELOPMENT: CHILDREN AND TEENS ARE ENGAGED IN VARIOUS PROGRAMS FOR PSYCHOLOGICAL DEVELOPMENT, CARETAKING, AND CHARACTER-BUILDING. 177,597 NEW CHILDREN & TEENS IN NURSERIES AND PROGRAMS. CAMBODIA, INDONESIA, MALAWI, RWANDA, KENYA, HAITI

HIV/AIDS: COUPLES ARE TAUGHT AND ENCOURAGED TO SHARE MESSAGES OF SENSITIVITY, INCREASING THEIR OWN WILLINGNESS TO RECEIVE TESTING AND

Name of the organization	WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number	23-6393344
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TREATMENT. YOUTH ARE REACHED WITH PREVENTION MESSAGES AND CHALLENGED TO COMMIT TO DISEASE-REDUCTION LIFESTYLE CHOICES. THOSE AFFECTED AND AT RISK ARE PROVIDED COMPREHENSIVE SUPPORT THROUGH BASIC SERVICES AND COMMUNITY MOBILIZATION. 79,073 TRAINED TO TEACH HIV/AIDS PREVENTION, CARE FOR THOSE LIVING WITH HIV/AIDS. 32,606 YOUTH REACHED WITH PREVENTION MESSAGES. 55,222 PEOPLE LIVING WITH HIV/AIDS, ORPHANS AND VULNERABLE CHILDREN, AND CAREGIVERS SUPPORTED. INDIA, HAITI, BURUNDI, DR CONGO, KENYA, RWANDA

LOCAL PARTNER STRENGTHENING: WORLD RELIEF WORKS TO STRENGTHEN THE LOCAL CHURCH AND OTHER ORGANIZATIONS TO MEET THE NEEDS OF THE POOR AND SUFFERING THROUGH LEADERSHIP DEVELOPMENT, TRAINING IN GENERAL PROJECT DEVELOPMENT AND IMPLEMENTATION, ACCOUNTING, FINANCIAL MANAGEMENT, DISASTER PREPAREDNESS AND RESPONSE, AND SPECIFIC TECHNICAL TRAINING IN SECTORIAL AREAS OF HEALTH, EDUCATION, SOCIAL SERVICE, PEACE-BUILDING AND ECONOMIC DEVELOPMENT. 3,430 LOCAL CHURCHES & PARTNER ORGANIZATIONS ACTIVELY WORKING WITH WR. 9,950 LOCAL CHURCH LEADERS/MEMBERS TRAINED IN WR CURRICULUM. 748 LOCAL, INDIGENOUS CHURCHES INVOLVED IN PEACE BUILDING; 563 ACTIVE PEACE BUILDING AGENTS; 21 NEW PEACE COMMITTEES ESTABLISHED. INDONESIA, CAMBODIA, INDIA, MOZAMBIQUE, SOUTH SUDAN, RWANDA, KENYA, DR CONGO, HAITI, BURUNDI.

MICROECONOMIC DEVELOPMENT: WORLD RELIEF'S FINANCIAL AND AGRICULTURE PROGRAMS GIVE PEOPLE, FAMILIES AND ENTIRE COMMUNITIES A CHANCE TO OVERCOME DEPENDENCY AND ACHIEVE THEIR OWN SUCCESS, AN OPPORTUNITY TOO OFTEN DENIED TO THE WORLD'S POOREST. 539,213 BORROWERS, SAVERS, AND CLIENTS INVOLVED IN MICROFINANCE PROGRAMMING. 81,129 SAVINGS GROUP MEMBERS CURRENTLY TRACKED. ZAMBIA, DR CONGO, BURUNDI.

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

Employer identification number
23-6393344

**MATERNAL & CHILD HEALTH: WORLD RELIEF EQUIPS THE CHURCH TO HELP THEIR
COMMUNITIES ADOPT PRACTICAL METHODOLOGIES - IN NUTRITION, HYGIENE,
SANITATION, CHILD DEVELOPMENT AND DISEASE MANAGEMENT - METHODOLOGIES
THAT DECREASE CHILD MORTALITY AND INCREASE POSITIVE HEALTH OUTCOMES.
115,348 NEW MOTHERS AND CHILDREN REACHED. 80,122 HOUSEHOLDS USING
MOSQUITO NETS. 38,045 VOLUNTEERS. HAITI, BURUNDI, RWANDA, SOUTH SUDAN,
SUDAN, MOZAMBIQUE, INDONESIA.**

INTEGRATED PROGRAMS.

EXPENSES \$ 14,272,298. INCL GRANTS OF \$ 1,434,482. REVENUE \$ 294,147.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

BURUNDI, CAMBODIA, CHINA, CONGO, DEM REP,

HAITI, INDIA, INDONESIA, KENYA,

SERBIA, MALAWI, MOZAMBIQUE, NICARAGUA,

RWANDA, SUDAN

**FORM 990, PART VI, SECTION A, LINE 6: THE NATIONAL ASSOCIATION OF
EVANGELICALS IS THE SOLE SHAREHOLDER IN WORLD RELIEF CORPORATION.**

**FORM 990, PART VI, SECTION A, LINE 7B: THE CHAIRMAN OF THE BOARD OF
DIRECTORS HAS TO BE APPROVED BY THE STOCKHOLDER.**

**FORM 990, PART VI, SECTION B, LINE 11: IT IS WORLD RELIEF'S POLICY THAT
THE CORPORATION'S BOARD OF DIRECTORS ANNUALLY REVIEW IRS FORM 990 PRIOR TO
ITS FILING WITH THE IRS. THE REVIEW IS ACCOMPLISHED THROUGH THE AUDIT
COMMITTEE OF WORLD RELIEF'S BOARD OF DIRECTORS. UPON COMPLETION, THE**

Name of the organization	WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number	23-6393344
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APPROVED FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE AND THE ENTIRE BOARD OF DIRECTORS VIA ELECTRONIC MAIL. ADDITIONALLY, THE FORM IS POSTED TO WORLD RELIEF'S INTERNAL BOARD OF DIRECTORS SHAREPOINT SITE AT LEAST FIVE DAYS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS AND ALL OFFICERS OF WORLD RELIEF CORPORATION ARE REQUIRED TO ANNUALLY SIGN A STATEMENT STATING THEY HAVE READ AND INTEND TO COMPLY WITH THE BOARD-APPROVED CONFLICT OF INTEREST STATEMENT. ALL EMPLOYEES OF WORLD RELIEF ARE REQUIRED AT THEIR TIME OF HIRE TO READ AND SIGN A BOARD-APPROVED CONFLICT OF INTEREST STATEMENT.

FORM 990, PART VI, SECTION B, LINE 15A: WORLD RELIEF ADHERES TO A BOARD-APPROVED EXECUTIVE COMPENSATION POLICY WHICH OUTLINES THE PROCESS BY WHICH COMPENSATION OF THE CEO IS REVIEWED ANNUALLY AND APPROVED BY THE BOARD.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: CA, CO, DC, DE, FL, GA, IL, IN, KS, KY, MA, MD, ME, MI, MN, MT, NC, ND, NH, NJ, NM, NV, OH, OK, OR, PA, SC, TN, UT, VA, WA, WI, WV, CT, LA

FORM 990, PART VI, SECTION C, LINE 19: WORLD RELIEF COMPLIES WITH ALL UNITED STATES FEDERAL AND STATE PUBLIC DISCLOSURE REQUIREMENTS WITH RESPECT TO ITS GOVERNING DOCUMENTS (ARTICLES OF INCORPORATION, BYLAWS AND IRS DETERMINATION LETTER), CONFLICT OF INTEREST POLICY AND OTHER CORPORATE POLICIES OF OUR ORGANIZATION EITHER BY POSTING THEM TO OUR CORPORATE WEBSITE OR BY FULFILLING ALL REQUESTS MADE IN PERSON OR IN WRITING OR BY SOME COMBINATION OF THESE AVENUES.

Name of the organization WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Employer identification number 23-6393344
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FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

EQUITY EARNINGS IN LLC	106,601.
LOSS ON DISCONTINUED OPERATIONS	-1,218,772.
GAIN ON EQUITY INVESTMENT	872,471.
GAIN ON IMPAIRMENT OF DISCONTINUED OPERATIONS	1,208,477.
TOTAL TO FORM 990, PART XI, LINE 9	968,777.

FORM 990, PART XI, LINE 2C

THE BOARD OF WORLD RELIEF HAS AN AUDIT COMMITTEE WHICH MEETS REGULARLY AND REVIEWS ISSUES RELATED TO THE ANNUAL AUDIT, THE 990 AND ANY OTHER ADDITIONAL AUDITS BEING CONDUCTED IN THE ORGANIZATION. THE AUDIT COMMITTEE IS ALSO RESPONSIBLE FOR THE SELECTION OF AN INDEPENDENT AUDIT FIRM TO CONDUCT THE ANNUAL AUDIT.

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.

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

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
WORLD RELIEF GLOBAL DEVELOPMENT LLC - 45-3236548, 7 EAST BALTIMORE STREET, BALTIMORE, MD 21202	MICROFINANCE	DELAWARE	0.	0.	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
NATIONAL ASSOCIATION OF EVANGELICALS 1023 15TH ST NW, STE. 500 WASHINGTON, DC 20005		DISTRICT OF COLUMBIA	501(C)(3)	1			X

WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS

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) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
IMF HEKIMA SOCIETE CIVILE									
GALLERIE BENEDICTION, AVENUE TOURISTES N 12		CONGO,							
GOMA, PROVINCE OF NORTH-KIVU, CONGO, DEMO.	MICROENTERPRISE	DEMO. REP		C CORP			100%		X
KREDIT LTD									
BLDG NO. 71, STREET 163, TOUL SVAY PREY 1, CH									
PHNOM PEHN, CAMBODIA	MICROENTERPRISE	CAMBODIA		C CORP			32.57%		X
TURAME COMMUNITY FINANCE, S.A.									
P.O. BOX 7537, 3673 AVENUE DE LA CROIX ROUGE									
BUJUMBURA, BURUNDI	MICROENTERPRISE	BURUNDI		C CORP			62.90%		X
BESELIDHJA ZAVET MICRO FINANCE LLC									
RR UCK, NO. 18		ST.							
PRISTINA, SERBIA	MICROENTERPRISE	KITTS		C CORP			100%		X
URWEGO OPPORTUNITY BANK									
PLOT 1230 NYARUGENGE AVENUE DE LA PAIX									
KIGALI, RWANDA	MICROENTERPRISE	RWANDA		C CORP			17.00%		X

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

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

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

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related 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-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

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

PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:

NAME AND ADDRESS OF RELATED ORGANIZATION:

IMF HEKIMA SOCIETE CIVILE

GALLERIE BENEDICTION, AVENUE TOURISTES N 12

GOMA, PROVINCE OF NORTH-KIVU, CONGO, DEMO. REP. OF

Information Return of U.S. Persons With Respect To Certain Foreign Corporations

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

▶ For more information about Form 5471, see www.irs.gov/form5471.
Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning _____, _____, and ending _____, _____, and ending _____.

Attachment
Sequence No. **121**

Name of person filing this return WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address) 7 EAST BALTIMORE STREET City or town, state, and ZIP code BALTIMORE, MD 21202	A Identifying number 23-6393344 B Category of filer (See instructions. Check applicable box(es)): 1 (repealed) <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period _____ % Filers tax year beginning OCT 1 , 20 12 , and ending SEP 30 , 20 13
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D Person(s) on whose behalf this information return is filed:

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a Name and address of foreign corporation KREDIT LTD. BLDG. NO. 71, STREET 163, TOUL SVAY PREY I PHNOM PEHN CAMBODIA	b(1) Employer identification number, if any b(2) Reference ID number (see instructions) KREDIT862571 c Country under whose laws incorporated CAMBODIA			
d Date of incorporation 06/13/03	e Principal place of business CAMBODIA	f Principal business activity code number 	g Principal business activity MICRO LENDING	h Functional currency U.S., DOLLAR

2 Provide the following information for the foreign corporation's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States 	b If a U.S. income tax return was filed, enter: <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; vertical-align: top;">(i) Taxable income or (loss)</td> <td style="width:50%; vertical-align: top;">(ii) U.S. income tax paid (after all credits)</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)		
(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)				
c Name and address of foreign corporation's statutory or resident agent in country of incorporation 	d Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different 				

Schedule A Stock of the Foreign Corporation		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	(i) Beginning of annual accounting period	(ii) End of annual accounting period
COMMON	99,414	99,414

Schedule E Income, War Profits, and Excess Profits Taxes Paid or Accrued

	(a) Name of country or U.S. possession	Amount of tax		
		(b) In foreign currency	(c) Conversion rate	(d) In U.S. dollars
1	U.S.			
2	CAMBODIA			17,410.
3				
4				
5				
6				
7				
8	Total			17,410.

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	2,970,751.	2,740,153.
2a	Trade notes and accounts receivable	380,644.	855,588.
b	Less allowance for bad debts	()	()
3	Inventories		
4	Other current assets (attach statement) SEE STATEMENT 3	45,432.	19,384.
5	Loans to shareholders and other related persons		
6	Investment in subsidiaries (attach statement)		
7	Other investments (attach statement) SEE STATEMENT 4	18,070.	18,691.
8a	Buildings and other depreciable assets	472,437.	553,632.
b	Less accumulated depreciation	(259,934.)	(340,546.)
9a	Depletable assets		
b	Less accumulated depletion	()	()
10	Land (net of any amortization)		
11	Intangible assets:		
a	Goodwill		
b	Organization costs		
c	Patents, trademarks, and other intangible assets	4,277.	7,603.
d	Less accumulated amortization for lines 11a, b, and c	()	()
12	Other assets (attach statement) SEE STATEMENT 5	15,782,608.	21,804,477.
13	Total assets	19,414,285.	25,658,982.
Liabilities and Shareholders' Equity			
14	Accounts payable	394,072.	693,985.
15	Other current liabilities (attach statement) SEE STATEMENT 6	284,241.	342,587.
16	Loans from shareholders and other related persons		
17	Other liabilities (attach statement) SEE STATEMENT 7	15,199,722.	20,213,688.
18	Capital stock:		
a	Preferred stock		
b	Common stock		
19	Paid-in or capital surplus (attach reconciliation)		
20	Retained earnings	3,536,250.	4,408,721.
21	Less cost of treasury stock	()	()
22	Total liabilities and shareholders' equity	19,414,285.	25,658,981.

Schedule G Other Information

8 questions regarding foreign corporation ownership, cost sharing arrangements, and foreign tax payments.

Schedule H Current Earnings and Profits

Important: Enter the amounts on lines 1 through 5c in functional currency.

Table with columns for Net Additions and Net Subtractions, and rows for various adjustments and earnings calculations.

Schedule I Summary of Shareholder's Income From Foreign Corporation

If item D on page 1 is completed, a separate Schedule I must be filed for each Category 4 or 5 filer for whom reporting is furnished on this Form 5471.

Table with columns for Name of U.S. shareholder and Identifying number, and rows for subpart F income, earnings, and dividends.

2 questions regarding blocked and unblocked income.

If the answer to either question is "Yes," attach an explanation.

FORM 5471 OTHER INCOME STATEMENT 1

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
MICROFINANCE INCOME			451,888.
CONTRIBUTIONS			4,918.
OTHER REVENUE			4,523.
TOTAL TO 5471, SCHEDULE C, LINE 8			461,329.

FORM 5471

OTHER DEDUCTIONS

STATEMENT 2

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
PERSONNEL BENEFITS			12,959.
TRAVEL			1,106.
OFFICE EXPENSES			
EQUIPMENT COSTS			4,978.
PERSONNEL EXPENSES			12,258.
BAD DEBT			-4,540.
PROFESSIONAL FEES			11,097.
MISCELLENAEUS			4,992.
CURRENCY EXCHANGE			245.
VEHICLE EXPENSE			12,109.
COMMUNICATIONS			3,722.
PROMOTION/RECRUIT			7,506.
LOAN PARTICIPANT EXPENSES			63.
TOTAL TO 5471, SCHEDULE C, LINE 16			66,495.

FORM 5471

OTHER CURRENT ASSETS

STATEMENT 3

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
DEFERRED TAX ASSET	45,432.	19,384.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 4	45,432.	19,384.

FORM 5471

OTHER INVESTMENTS

STATEMENT 4

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
EQUITY INVESTMENT	18,070.	18,691.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 7	18,070.	18,691.

FORM 5471

OTHER ASSETS

STATEMENT 5

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
MICROENTERPRISE AND AGRICULTURAL LOANS	15,782,608.	21,804,477.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 12	15,782,608.	21,804,477.

FORM 5471

OTHER CURRENT LIABILITIES

STATEMENT 6

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
CURRENT TAX LIABILITIES	97,673.	106,210.
DEFERRED REVENUE	49,598.	28,345.
PROVISIONS FOR EMPLOYEE BENEFITS	136,970.	208,032.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 15	<u>284,241.</u>	<u>342,587.</u>

FORM 5471

OTHER LIABILITIES

STATEMENT 7

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
MICROENTERPRISE/AG DEVELOPMENT LOANS	12,683,035.	15,737,378.
CUSTOMERS' DEPOSITS	2,516,687.	4,476,310.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 17	<u>15,199,722.</u>	<u>20,213,688.</u>

**SCHEDULE J
(Form 5471)**

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

**Accumulated Earnings and Profits (E&P)
of Controlled Foreign Corporation**

► Information about Schedule J (Form 5471) and its instructions is at www.irs.gov/form5471.
► Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

Identifying number

23-6393344

Name of foreign corporation

KREDIT LTD.

EIN (if any)

000000000

Reference ID number

KREDIT862571

Important: Enter amounts in functional currency.	(a) Post-1986 Undistributed Earnings (post-86 section 959(c)(3) balance)	(b) Pre-1987 E&P Not Previously Taxed (pre-87 section 959(c)(3) balance)	(c) Previously Taxed E&P (sections 959(c)(1) and (2) balances)			(d) Total Section 964(a) E&P (combine columns (a), (b), and (c))
			(i) Earnings Invested in U.S. Property	(ii) Earnings Invested in Excess Passive Assets	(iii) Subpart F Income	
1 Balance at beginning of year	1,086,684.					1,086,684.
2a Current year E&P						
b Current year deficit in E&P						
3 Total current and accumulated E&P not previously taxed (line 1 plus line 2a or line 1 minus line 2b)	1,086,684.					
4 Amounts included under section 951(a) or reclassified under section 959(c) in current year						
5a Actual distributions or reclassifications of previously taxed E&P						
b Actual distributions of nonpreviously taxed E&P						
6a Balance of previously taxed E&P at end of year (line 1 plus line 4, minus line 5a)						
b Balance of E&P not previously taxed at end of year (line 3 minus line 4, minus line 5b)	1,086,684.					
7 Balance at end of year. (Enter amount from line 6a or line 6b, whichever is applicable.)	1,086,684.					1,086,684.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule J (Form 5471) (Rev. 12-2012)

**SCHEDULE M
(Form 5471)**

(Rev. December 2012)

Department of the Treasury
Internal Revenue Service

**Transactions Between Controlled Foreign Corporation
and Shareholders or Other Related Persons**

▶ Information about Schedule M (Form 5471) and its instructions is at www.irs.gov/form5471.

▶ Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471 WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Identifying number 23-6393344
--	---

Name of foreign corporation KREDIT LTD.	EIN (if any) 000000000	Reference ID number KREDIT862571
---	----------------------------------	--

Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory) ...					
2 Sales of tangible property other than stock in trade					
3 Sales of property rights (patents, trademarks, etc.)					
4 Platform contribution transaction payments received					
5 Cost sharing transaction payments received					
6 Compensation received for technical, managerial, engineering, construction, or like services					
7 Commissions received					
8 Rents, royalties, and license fees received					
9 Dividends received (exclude deemed distributions under subpart F and distributions of previously taxed income)					
10 Interest received					
11 Premiums received for insurance or reinsurance					
12 Add lines 1 through 11					
13 Purchases of stock in trade (inventory)					
14 Purchases of tangible property other than stock in trade					
15 Purchases of property rights (patents, trademarks, etc.)					
16 Platform contribution transaction payments paid					
17 Cost sharing transaction payments paid					
18 Compensation paid for technical, managerial, engineering, construction, or like services					
19 Commissions paid					
20 Rents, royalties, and license fees paid					
21 Dividends paid					
22 Interest paid					
23 Premiums paid for insurance or reinsurance					
24 Add lines 13 through 23					
25 Amounts borrowed (enter the maximum loan balance during the year) - see instr.					
26 Amounts loaned (enter the maximum loan balance during the year) - see instr.					

Information Return of U.S. Persons With Respect To Certain Foreign Corporations

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

▶ For more information about Form 5471, see www.irs.gov/form5471.
Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning _____, _____, and ending _____, _____, and ending _____.

Attachment
Sequence No. **121**

Name of person filing this return WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address) 7 EAST BALTIMORE STREET City or town, state, and ZIP code BALTIMORE, MD 21202	A Identifying number 23-6393344 B Category of filer (See instructions. Check applicable box(es): 1 (repealed) 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period _____ %
Filers tax year beginning OCT 1 , 20 12 , and ending SEP 30 , 20 13	

D Person(s) on whose behalf this information return is filed:

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a Name and address of foreign corporation IMF HEKIMA SOCIETE CIVILE GALLERIE BENEDICTION, AVENUE TOURISTES N 12 GOMA, PROVINCE OF THE NORTH-KIVU CONGO, DEMO. REP. OF				b(1) Employer identification number, if any b(2) Reference ID number (see instructions) HEKIMA987203
c Country under whose laws incorporated CONGO, DEMO. REP. OF				
d Date of incorporation	e Principal place of business	f Principal business activity code number	g Principal business activity	h Functional currency
	CONGO, DEMO. REP.		MICRO LENDING	U.S., DOLLAR

2 Provide the following information for the foreign corporation's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b If a U.S. income tax return was filed, enter: <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">(i) Taxable income or (loss)</td> <td style="width:50%;">(ii) U.S. income tax paid (after all credits)</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)		
(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)					
c Name and address of foreign corporation's statutory or resident agent in country of incorporation	d Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different					

Schedule A Stock of the Foreign Corporation		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	(i) Beginning of annual accounting period	(ii) End of annual accounting period
COMMON	1,000	1,000

Schedule E Income, War Profits, and Excess Profits Taxes Paid or Accrued

	(a) Name of country or U.S. possession	Amount of tax		
		(b) In foreign currency	(c) Conversion rate	(d) In U.S. dollars
1	U.S.			
2				
3				
4				
5				
6				
7				
8	Total			

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	1,784,836.	1,518,871.
2a	Trade notes and accounts receivable		
b	Less allowance for bad debts	()	()
3	Inventories		
4	Other current assets (attach statement) SEE STATEMENT 10	61,557.	76,734.
5	Loans to shareholders and other related persons		
6	Investment in subsidiaries (attach statement)		
7	Other investments (attach statement)		
8a	Buildings and other depreciable assets	76,616.	52,786.
b	Less accumulated depreciation	()	()
9a	Depletable assets		
b	Less accumulated depletion	()	()
10	Land (net of any amortization)		
11	Intangible assets:		
a	Goodwill		
b	Organization costs		
c	Patents, trademarks, and other intangible assets		
d	Less accumulated amortization for lines 11a, b, and c	()	()
12	Other assets (attach statement) SEE STATEMENT 11	1,276,748.	1,373,779.
13	Total assets	3,199,757.	3,022,170.
Liabilities and Shareholders' Equity			
14	Accounts payable	78,029.	50,136.
15	Other current liabilities (attach statement) SEE STATEMENT 12	922,258.	888,980.
16	Loans from shareholders and other related persons		
17	Other liabilities (attach statement) SEE STATEMENT 13	931,299.	797,103.
18	Capital stock:		
a	Preferred stock		
b	Common stock		
19	Paid-in or capital surplus (attach reconciliation)		
20	Retained earnings	1,268,171.	1,442,486.
21	Less cost of treasury stock	()	()
22	Total liabilities and shareholders' equity	3,199,757.	3,178,705.

Schedule G Other Information

8 questions regarding foreign corporation ownership, cost sharing arrangements, and foreign tax payments.

Schedule H Current Earnings and Profits

Important: Enter the amounts on lines 1 through 5c in functional currency.

Table with columns for Net Additions and Net Subtractions, and rows for various adjustments and earnings calculations (lines 1-5d).

Schedule I Summary of Shareholder's Income From Foreign Corporation

If item D on page 1 is completed, a separate Schedule I must be filed for each Category 4 or 5 filer for whom reporting is furnished on this Form 5471.

Table with columns for Name of U.S. shareholder and Identifying number, and rows for subpart F income, earnings invested, and dividends received.

2 questions regarding blocked and unblocked income.

If the answer to either question is "Yes," attach an explanation.

FORM 5471 OTHER INCOME STATEMENT 8

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
MICROFINANCE INCOME			722,247.
CONTRIBUTIONS			46.
OTHER REVENUE			15,191.
TOTAL TO 5471, SCHEDULE C, LINE 8			737,484.

FORM 5471

OTHER DEDUCTIONS

STATEMENT 9

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
PERSONNEL BENEFITS			38,164.
TRAVEL			55,258.
OFFICE EXPENSES			22,966.
EQUIPMENT COSTS			10,006.
PERSONNEL EXPENSES			22,026.
PROFESSIONAL FEES			44,468.
COMPUTER EXPENSE			7,901.
BAD DEBT			-3,279.
MISCELLANEOUS			105,565.
VEHICLE EXPENSE			22,424.
COMMUNICATIONS			23,884.
PRINTING			2,928.
DUES AND ASSESSMENTS			7,257.
INSURANCE			583.
SPECIFIC ASSISTANCE			1,859.
TOTAL TO 5471, SCHEDULE C, LINE 16			362,010.

FORM 5471

OTHER CURRENT ASSETS

STATEMENT 10

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
PREPAID EXPENSES AND OTHER ASSETS	61,557.	76,734.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 4	61,557.	76,734.

FORM 5471

OTHER ASSETS

STATEMENT 11

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
MICROENTERPRISE AND AGRICULTURAL LOANS	1,276,748.	1,373,779.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 12	1,276,748.	1,373,779.

FORM 5471

OTHER CURRENT LIABILITIES

STATEMENT 12

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
OTHER LIABILITIES	838,940.	805,784.
DEFERRED REVENUE	83,318.	83,196.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 15	922,258.	888,980.

FORM 5471

OTHER LIABILITIES

STATEMENT 13

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
MICROENTERPRISE/AG DEVELOPMENT LOANS	931,299.	797,103.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 17	931,299.	797,103.

**SCHEDULE J
(Form 5471)**

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

**Accumulated Earnings and Profits (E&P)
of Controlled Foreign Corporation**

► Information about Schedule J (Form 5471) and its instructions is at www.irs.gov/form5471.
► Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

Identifying number

23-6393344

Name of foreign corporation

IMF HEKIMA SOCIETE CIVILE

EIN (if any)

000000000

Reference ID number

HEKIMA987203

Important: Enter amounts in functional currency.	(a) Post-1986 Undistributed Earnings (post-86 section 959(c)(3) balance)	(b) Pre-1987 E&P Not Previously Taxed (pre-87 section 959(c)(3) balance)	(c) Previously Taxed E&P (sections 959(c)(1) and (2) balances)			(d) Total Section 964(a) E&P (combine columns (a), (b), and (c))
			(i) Earnings Invested in U.S. Property	(ii) Earnings Invested in Excess Passive Assets	(iii) Subpart F Income	
1 Balance at beginning of year	14,139.					14,139.
2a Current year E&P						
b Current year deficit in E&P						
3 Total current and accumulated E&P not previously taxed (line 1 plus line 2a or line 1 minus line 2b)	14,139.					
4 Amounts included under section 951(a) or reclassified under section 959(c) in current year						
5a Actual distributions or reclassifications of previously taxed E&P						
b Actual distributions of nonpreviously taxed E&P						
6a Balance of previously taxed E&P at end of year (line 1 plus line 4, minus line 5a)						
b Balance of E&P not previously taxed at end of year (line 3 minus line 4, minus line 5b)	14,139.					
7 Balance at end of year. (Enter amount from line 6a or line 6b, whichever is applicable.)	14,139.					14,139.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule J (Form 5471) (Rev. 12-2012)

**SCHEDULE M
(Form 5471)**

(Rev. December 2012)

Department of the Treasury
Internal Revenue Service

**Transactions Between Controlled Foreign Corporation
and Shareholders or Other Related Persons**

▶ Information about Schedule M (Form 5471) and its instructions is at www.irs.gov/form5471.

▶ Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471 WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Identifying number 23-6393344
--	---

Name of foreign corporation IMF HEKIMA SOCIETE CIVILE	EIN (if any) 000000000	Reference ID number HEKIMA987203
---	----------------------------------	--

Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory) ...					
2 Sales of tangible property other than stock in trade					
3 Sales of property rights (patents, trademarks, etc.)					
4 Platform contribution transaction payments received					
5 Cost sharing transaction payments received					
6 Compensation received for technical, managerial, engineering, construction, or like services					
7 Commissions received					
8 Rents, royalties, and license fees received					
9 Dividends received (exclude deemed distributions under subpart F and distributions of previously taxed income)					
10 Interest received					
11 Premiums received for insurance or reinsurance					
12 Add lines 1 through 11					
13 Purchases of stock in trade (inventory)					
14 Purchases of tangible property other than stock in trade					
15 Purchases of property rights (patents, trademarks, etc.)					
16 Platform contribution transaction payments paid					
17 Cost sharing transaction payments paid					
18 Compensation paid for technical, managerial, engineering, construction, or like services					
19 Commissions paid					
20 Rents, royalties, and license fees paid					
21 Dividends paid					
22 Interest paid					
23 Premiums paid for insurance or reinsurance					
24 Add lines 13 through 23					
25 Amounts borrowed (enter the maximum loan balance during the year) - see instr.					
26 Amounts loaned (enter the maximum loan balance during the year) - see instr.					

Information Return of U.S. Persons With Respect To Certain Foreign Corporations

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

▶ For more information about Form 5471, see www.irs.gov/form5471.
Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning _____, _____, and ending _____, _____, and ending _____.

Attachment
Sequence No. **121**

Name of person filing this return WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address) 7 EAST BALTIMORE STREET City or town, state, and ZIP code BALTIMORE, MD 21202	A Identifying number 23-6393344 B Category of filer (See instructions. Check applicable box(es)): 1 (repealed) <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period _____ %
Filer's tax year beginning OCT 1 , 20 12 , and ending SEP 30 , 20 13	

D Person(s) on whose behalf this information return is filed:

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a Name and address of foreign corporation TURAME COMMUNITY FINANCE, S.A. P.O. BOX 7537, 3673 AVENUE DE LA CROIX ROUGE BUJUMBURA BURUNDI	b(1) Employer identification number, if any b(2) Reference ID number (see instructions) TURAME555123 c Country under whose laws incorporated 			
d Date of incorporation 	e Principal place of business BURUNDI	f Principal business activity code number 	g Principal business activity MICRO LENDING	h Functional currency U.S. , DOLLAR

2 Provide the following information for the foreign corporation's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States 	b If a U.S. income tax return was filed, enter: <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; vertical-align: top;">(i) Taxable income or (loss)</td> <td style="width:50%; vertical-align: top;">(ii) U.S. income tax paid (after all credits)</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)		
(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)				
c Name and address of foreign corporation's statutory or resident agent in country of incorporation 	d Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different 				

Schedule A Stock of the Foreign Corporation		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	(i) Beginning of annual accounting period	(ii) End of annual accounting period
COMMON	1,000	1,000

Schedule E Income, War Profits, and Excess Profits Taxes Paid or Accrued

	(a) Name of country or U.S. possession	Amount of tax		
		(b) In foreign currency	(c) Conversion rate	(d) In U.S. dollars
1	U.S.			
2				
3				
4				
5				
6				
7				
8	Total			

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	945,371.	1,397,349.
2a	Trade notes and accounts receivable		
b	Less allowance for bad debts	()	()
3	Inventories		
4	Other current assets (attach statement) SEE STATEMENT 16	167,743.	31,206.
5	Loans to shareholders and other related persons		
6	Investment in subsidiaries (attach statement)		
7	Other investments (attach statement)		
8a	Buildings and other depreciable assets	150,129.	141,869.
b	Less accumulated depreciation	()	()
9a	Depletable assets		
b	Less accumulated depletion	()	()
10	Land (net of any amortization)		
11	Intangible assets:		
a	Goodwill		
b	Organization costs		
c	Patents, trademarks, and other intangible assets		
d	Less accumulated amortization for lines 11a, b, and c	()	()
12	Other assets (attach statement) SEE STATEMENT 17	1,283,794.	1,142,604.
13	Total assets	2,547,037.	2,713,028.
Liabilities and Shareholders' Equity			
14	Accounts payable	124,141.	198,018.
15	Other current liabilities (attach statement) SEE STATEMENT 18	473,338.	296,721.
16	Loans from shareholders and other related persons		
17	Other liabilities (attach statement) SEE STATEMENT 19	165,117.	256,182.
18	Capital stock:		
a	Preferred stock		
b	Common stock		
19	Paid-in or capital surplus (attach reconciliation)		
20	Retained earnings	1,784,441.	1,416,720.
21	Less cost of treasury stock	()	()
22	Total liabilities and shareholders' equity	2,547,037.	2,167,641.

Schedule G Other Information

- 1 During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership?
2 During the tax year, did the foreign corporation own an interest in any trust?
3 During the tax year, did the foreign corporation own any foreign entities that were disregarded as entities separate from their owners...
4 During the tax year, was the foreign corporation a participant in any cost sharing arrangement?
5 During the course of the tax year, did the foreign corporation become a participant in any cost sharing arrangement?
6 During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations section 1.6011-4?
7 During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under section 901(m)?
8 During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?

Schedule H Current Earnings and Profits

Important: Enter the amounts on lines 1 through 5c in functional currency.

Table with columns for Net Additions and Net Subtractions, and rows for Current year net income or (loss) per foreign books of account, Net adjustments made to line 1, Capital gains or losses, Depreciation and amortization, Depletion, Investment or incentive allowance, Charges to statutory reserves, Inventory adjustments, Taxes, Other (attach statement), Total net additions, Total net subtractions, Current earnings and profits (line 1 plus line 3 minus line 4), DASTM gain or (loss) for foreign corporations that use DASTM, Combine lines 5a and 5b, Current earnings and profits in U.S. dollars (line 5c translated at the appropriate exchange rate as defined in section 989(b) and the related regulations).

Schedule I Summary of Shareholder's Income From Foreign Corporation

If item D on page 1 is completed, a separate Schedule I must be filed for each Category 4 or 5 filer for whom reporting is furnished on this Form 5471. This schedule I is being completed for:

Table with columns for Name of U.S. shareholder and Identifying number, and rows for Subpart F income (line 38b, Worksheet A in the instructions), Earnings invested in U.S. property (line 17, Worksheet B in the instructions), Previously excluded subpart F income withdrawn from qualified investments (line 6b, Worksheet C in the instructions), Previously excluded export trade income withdrawn from investment in export trade assets (line 7b, Worksheet D in the instructions), Factoring income, Total of lines 1 through 5. Enter here and on your income tax return, Dividends received (translated at spot rate on payment date under section 989(b)(1)), Exchange gain or (loss) on a distribution of previously taxed income.

- Was any income of the foreign corporation blocked?
Did any such income become unblocked during the tax year (see section 964(b))?

If the answer to either question is "Yes," attach an explanation.

FORM 5471

OTHER INCOME

STATEMENT 14

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
MICROFINANCE INCOME			1,186,800.
CONTRIBUTIONS			27,889.
OTHER REVENUE			115,158.
TOTAL TO 5471, SCHEDULE C, LINE 8			1,329,847.

FORM 5471

OTHER DEDUCTIONS

STATEMENT 15

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
PERSONNEL BENEFITS			249,530.
TRAVEL			73,925.
OFFICE EXPENSES			68,544.
EQUIPMENT COSTS			4,129.
PERSONNEL EXPENSES			20,766.
PROFESSIONAL FEES			57,777.
COMPUTER EXPENSE			1,663.
BAD DEBT			58,999.
MISCELLENAEUS			337,659.
VEHICLE EXPENSE			20,333.
TOTAL TO 5471, SCHEDULE C, LINE 16			893,325.

FORM 5471

OTHER CURRENT ASSETS

STATEMENT 16

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
PREPAID EXPENSES AND OTHER ASSETS	47,692.	27,381.
OTHER RECEIVABLES	120,051.	3,825.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 4	167,743.	31,206.

FORM 5471

OTHER ASSETS

STATEMENT 17

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
MICROENTERPRISE AND AGRICULTURAL LOANS	1,283,794.	1,142,604.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 12	1,283,794.	1,142,604.

FORM 5471

OTHER CURRENT LIABILITIES

STATEMENT 18

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
OTHER LIABILITIES	406,540.	296,721.
DEFERRED REVENUE	66,798.	0.
.		
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 15	473,338.	296,721.

FORM 5471

OTHER LIABILITIES

STATEMENT 19

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
MICROENTERPRISE/AG DEVELOPMENT LOANS	165,117.	256,182.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 17	165,117.	256,182.

**SCHEDULE J
(Form 5471)**

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

**Accumulated Earnings and Profits (E&P)
of Controlled Foreign Corporation**

► Information about Schedule J (Form 5471) and its instructions is at www.irs.gov/form5471.
► Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

Identifying number

23-6393344

Name of foreign corporation

TURAME COMMUNITY FINANCE, S.A.

EIN (if any)

000000000

Reference ID number

TURAME555123

Important: Enter amounts in functional currency.	(a) Post-1986 Undistributed Earnings (post-86 section 959(c)(3) balance)	(b) Pre-1987 E&P Not Previously Taxed (pre-87 section 959(c)(3) balance)	(c) Previously Taxed E&P (sections 959(c)(1) and (2) balances)			(d) Total Section 964(a) E&P (combine columns (a), (b), and (c))
			(i) Earnings Invested in U.S. Property	(ii) Earnings Invested in Excess Passive Assets	(iii) Subpart F Income	
1 Balance at beginning of year	- 290,209.					- 290,209.
2a Current year E&P						
b Current year deficit in E&P						
3 Total current and accumulated E&P not previously taxed (line 1 plus line 2a or line 1 minus line 2b)	- 290,209.					
4 Amounts included under section 951(a) or reclassified under section 959(c) in current year						
5a Actual distributions or reclassifications of previously taxed E&P						
b Actual distributions of nonpreviously taxed E&P						
6a Balance of previously taxed E&P at end of year (line 1 plus line 4, minus line 5a)						
b Balance of E&P not previously taxed at end of year (line 3 minus line 4, minus line 5b)	- 290,209.					
7 Balance at end of year. (Enter amount from line 6a or line 6b, whichever is applicable.)	- 290,209.					- 290,209.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule J (Form 5471) (Rev. 12-2012)

**SCHEDULE M
(Form 5471)**

(Rev. December 2012)

Department of the Treasury
Internal Revenue Service

**Transactions Between Controlled Foreign Corporation
and Shareholders or Other Related Persons**

▶ Information about Schedule M (Form 5471) and its instructions is at www.irs.gov/form5471.

▶ Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471 WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Identifying number 23-6393344
--	---

Name of foreign corporation TURAME COMMUNITY FINANCE, S.A.	EIN (if any) 000000000	Reference ID number TURAME555123
--	----------------------------------	--

Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory) ...					
2 Sales of tangible property other than stock in trade					
3 Sales of property rights (patents, trademarks, etc.)					
4 Platform contribution transaction payments received					
5 Cost sharing transaction payments received					
6 Compensation received for technical, managerial, engineering, construction, or like services					
7 Commissions received					
8 Rents, royalties, and license fees received					
9 Dividends received (exclude deemed distributions under subpart F and distributions of previously taxed income)					
10 Interest received					
11 Premiums received for insurance or reinsurance					
12 Add lines 1 through 11					
13 Purchases of stock in trade (inventory)					
14 Purchases of tangible property other than stock in trade					
15 Purchases of property rights (patents, trademarks, etc.)					
16 Platform contribution transaction payments paid					
17 Cost sharing transaction payments paid					
18 Compensation paid for technical, managerial, engineering, construction, or like services					
19 Commissions paid					
20 Rents, royalties, and license fees paid					
21 Dividends paid					
22 Interest paid					
23 Premiums paid for insurance or reinsurance					
24 Add lines 13 through 23					
25 Amounts borrowed (enter the maximum loan balance during the year) - see instr.					
26 Amounts loaned (enter the maximum loan balance during the year) - see instr.					

Information Return of U.S. Persons With Respect To Certain Foreign Corporations

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

▶ For more information about Form 5471, see www.irs.gov/form5471.
Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning _____, _____, and ending _____, _____, and ending _____.

Attachment
Sequence No. **121**

Name of person filing this return WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS <small>Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)</small> 7 EAST BALTIMORE STREET City or town, state, and ZIP code BALTIMORE, MD 21202	A Identifying number 23-6393344 B Category of filer (See instructions. Check applicable box(es)): 1 (repealed) <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input checked="" type="checkbox"/>
Filer's tax year beginning OCT 1 , 20 12 , and ending SEP 30 , 20 13	C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period _____ %

D Person(s) on whose behalf this information return is filed:

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a Name and address of foreign corporation URWEGO OPPORTUNITY BANK PLOT 1230 NYARUGENGE AVENUE DE LA PAIX KIGALI RWANDA	b(1) Employer identification number, if any b(2) Reference ID number (see instructions) URWEGO66798 c Country under whose laws incorporated RWANDA		
d Date of incorporation 06/30/07	e Principal place of business RWANDA	f Principal business activity code number g Principal business activity MICROFINANCE	h Functional currency RWANDA, FRANC

2 Provide the following information for the foreign corporation's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States 	b If a U.S. income tax return was filed, enter: <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; vertical-align: top;">(i) Taxable income or (loss)</td> <td style="width:50%; vertical-align: top;">(ii) U.S. income tax paid (after all credits)</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)		
(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)				
c Name and address of foreign corporation's statutory or resident agent in country of incorporation 	d Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different 				

Schedule A Stock of the Foreign Corporation		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	(i) Beginning of annual accounting period	(ii) End of annual accounting period

Schedule E Income, War Profits, and Excess Profits Taxes Paid or Accrued

	(a) Name of country or U.S. possession	Amount of tax		
		(b) In foreign currency	(c) Conversion rate	(d) In U.S. dollars
1	U.S.			
2				
3				
4				
5				
6				
7				
8	Total			

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	1	
2a	Trade notes and accounts receivable	2a	
b	Less allowance for bad debts	2b	() ()
3	Inventories	3	
4	Other current assets (attach statement)	4	
5	Loans to shareholders and other related persons	5	
6	Investment in subsidiaries (attach statement)	6	
7	Other investments (attach statement)	7	
8a	Buildings and other depreciable assets	8a	
b	Less accumulated depreciation	8b	() ()
9a	Depletable assets	9a	
b	Less accumulated depletion	9b	() ()
10	Land (net of any amortization)	10	
11	Intangible assets:		
a	Goodwill	11a	
b	Organization costs	11b	
c	Patents, trademarks, and other intangible assets	11c	
d	Less accumulated amortization for lines 11a, b, and c	11d	() ()
12	Other assets (attach statement)	12	
13	Total assets	13	
Liabilities and Shareholders' Equity			
14	Accounts payable	14	
15	Other current liabilities (attach statement)	15	
16	Loans from shareholders and other related persons	16	
17	Other liabilities (attach statement)	17	
18	Capital stock:		
a	Preferred stock	18a	
b	Common stock	18b	
19	Paid-in or capital surplus (attach reconciliation)	19	
20	Retained earnings	20	
21	Less cost of treasury stock	21	() ()
22	Total liabilities and shareholders' equity	22	

Schedule G Other Information

- 1 During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership?
2 During the tax year, did the foreign corporation own an interest in any trust?
3 During the tax year, did the foreign corporation own any foreign entities that were disregarded as entities separate from their owners...
4 During the tax year, was the foreign corporation a participant in any cost sharing arrangement?
5 During the course of the tax year, did the foreign corporation become a participant in any cost sharing arrangement?
6 During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations section 1.6011-4?
7 During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under section 901(m)?
8 During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?

Schedule H Current Earnings and Profits

Important: Enter the amounts on lines 1 through 5c in functional currency.

Table with columns for Net Additions and Net Subtractions, and rows for Current year net income or (loss) per foreign books of account, Net adjustments made to line 1, Total net additions, Total net subtractions, and Current earnings and profits.

Schedule I Summary of Shareholder's Income From Foreign Corporation

If item D on page 1 is completed, a separate Schedule I must be filed for each Category 4 or 5 filer for whom reporting is furnished on this Form 5471. This schedule I is being completed for:

Table with columns for Name of U.S. shareholder and Identifying number, and rows for Subpart F income, Earnings invested in U.S. property, Previously excluded subpart F income, Previously excluded export trade income, Factoring income, Total of lines 1 through 5, Dividends received, and Exchange gain or (loss).

- Was any income of the foreign corporation blocked?
Did any such income become unblocked during the tax year (see section 964(b))?

If the answer to either question is "Yes," attach an explanation.

**SCHEDULE J
(Form 5471)**

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

**Accumulated Earnings and Profits (E&P)
of Controlled Foreign Corporation**

► Information about Schedule J (Form 5471) and its instructions is at www.irs.gov/form5471.
► Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

Identifying number

23-6393344

Name of foreign corporation

URWEGO OPPORTUNITY BANK

EIN (if any)

000000000

Reference ID number

URWEGO66798

Important: Enter amounts in functional currency.	(a) Post-1986 Undistributed Earnings (post-86 section 959(c)(3) balance)	(b) Pre-1987 E&P Not Previously Taxed (pre-87 section 959(c)(3) balance)	(c) Previously Taxed E&P (sections 959(c)(1) and (2) balances)			(d) Total Section 964(a) E&P (combine columns (a), (b), and (c))
			(i) Earnings Invested in U.S. Property	(ii) Earnings Invested in Excess Passive Assets	(iii) Subpart F Income	
1 Balance at beginning of year	304,021,684.					304,021,684.
2a Current year E&P						
b Current year deficit in E&P						
3 Total current and accumulated E&P not previously taxed (line 1 plus line 2a or line 1 minus line 2b)	304,021,684.					
4 Amounts included under section 951(a) or reclassified under section 959(c) in current year						
5a Actual distributions or reclassifications of previously taxed E&P						
b Actual distributions of nonpreviously taxed E&P						
6a Balance of previously taxed E&P at end of year (line 1 plus line 4, minus line 5a)						
b Balance of E&P not previously taxed at end of year (line 3 minus line 4, minus line 5b)	304,021,684.					
7 Balance at end of year. (Enter amount from line 6a or line 6b, whichever is applicable.)	304,021,684.					304,021,684.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule J (Form 5471) (Rev. 12-2012)

Information Return of U.S. Persons With Respect To Certain Foreign Corporations

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

▶ For more information about Form 5471, see www.irs.gov/form5471.
Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning _____, _____, and ending _____, _____, and ending _____.

Attachment
Sequence No. **121**

Name of person filing this return WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address) 7 EAST BALTIMORE STREET City or town, state, and ZIP code BALTIMORE, MD 21202	A Identifying number 23-6393344 B Category of filer (See instructions. Check applicable box(es)): 1 (repealed) <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period _____ % Filers tax year beginning OCT 1 , 20 12 , and ending SEP 30 , 20 13
--	---

D Person(s) on whose behalf this information return is filed:

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a Name and address of foreign corporation BESELIDHJA ZAVET MICRO FINANCE LLC RR. UCK NR 18 10000 PRISHTINA SERBIA		b(1) Employer identification number, if any b(2) Reference ID number (see instructions) KOSOVO1976 c Country under whose laws incorporated ST. KITTS		
d Date of incorporation	e Principal place of business	f Principal business activity code number	g Principal business activity	h Functional currency
	SERBIA		MICRO LENDING	E.U., EURO

2 Provide the following information for the foreign corporation's accounting period stated above.

a Name, address, and identifying number of branch office or agent (if any) in the United States	b If a U.S. income tax return was filed, enter: <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; vertical-align: top;">(i) Taxable income or (loss)</td> <td style="width:50%; vertical-align: top;">(ii) U.S. income tax paid (after all credits)</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)		
(i) Taxable income or (loss)	(ii) U.S. income tax paid (after all credits)					
c Name and address of foreign corporation's statutory or resident agent in country of incorporation	d Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different					

Schedule A Stock of the Foreign Corporation		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	(i) Beginning of annual accounting period	(ii) End of annual accounting period
COMMON	100	100

Schedule E Income, War Profits, and Excess Profits Taxes Paid or Accrued

	(a) Name of country or U.S. possession	Amount of tax		
		(b) In foreign currency	(c) Conversion rate	(d) In U.S. dollars
1	U.S.			
2				
3				
4				
5				
6				
7				
8	Total			

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	1	
2a	Trade notes and accounts receivable	2a	
b	Less allowance for bad debts	2b	() ()
3	Inventories	3	
4	Other current assets (attach statement)	4	
5	Loans to shareholders and other related persons	5	
6	Investment in subsidiaries (attach statement)	6	
7	Other investments (attach statement)	7	
8a	Buildings and other depreciable assets	8a	
b	Less accumulated depreciation	8b	() ()
9a	Depletable assets	9a	
b	Less accumulated depletion	9b	() ()
10	Land (net of any amortization)	10	
11	Intangible assets:		
a	Goodwill	11a	
b	Organization costs	11b	
c	Patents, trademarks, and other intangible assets	11c	
d	Less accumulated amortization for lines 11a, b, and c	11d	() ()
12	Other assets (attach statement) SEE STATEMENT 22	12	2,275,828. 1,235,671.
13	Total assets	13	2,275,828. 1,235,671.
Liabilities and Shareholders' Equity			
14	Accounts payable	14	
15	Other current liabilities (attach statement)	15	
16	Loans from shareholders and other related persons	16	
17	Other liabilities (attach statement) SEE STATEMENT 23	17	467,375. 16,007.
18	Capital stock:		
a	Preferred stock	18a	
b	Common stock	18b	
19	Paid-in or capital surplus (attach reconciliation)	19	
20	Retained earnings	20	1,808,453. 1,219,664.
21	Less cost of treasury stock	21	() ()
22	Total liabilities and shareholders' equity	22	2,275,828. 1,235,671.

Schedule G Other Information

	Yes	No
1 During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "Yes," see the instructions for required statement.		
2 During the tax year, did the foreign corporation own an interest in any trust?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 During the tax year, did the foreign corporation own any foreign entities that were disregarded as entities separate from their owners under Regulations sections 301.7701-2 and 301.7701-3?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "Yes," you are generally required to attach Form 8858 for each entity (see instructions).		
4 During the tax year, was the foreign corporation a participant in any cost sharing arrangement?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 During the course of the tax year, did the foreign corporation become a participant in any cost sharing arrangement?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6 During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations section 1.6011-4?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "Yes," attach Form(s) 8886 if required by Regulations section 1.6011-4(c)(3)(i)(G).		
7 During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under section 901(m)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Schedule H Current Earnings and Profits

Important: Enter the amounts on lines 1 through 5c in functional currency.

1 Current year net income or (loss) per foreign books of account	1		-995,003.
2 Net adjustments made to line 1 to determine current earnings and profits according to U.S. financial and tax accounting standards (see instructions):			
	Net Additions	Net Subtractions	
a Capital gains or losses			
b Depreciation and amortization			
c Depletion			
d Investment or incentive allowance			
e Charges to statutory reserves			
f Inventory adjustments			
g Taxes			
h Other (attach statement)			
3 Total net additions			
4 Total net subtractions			
5a Current earnings and profits (line 1 plus line 3 minus line 4)	5a		-995,003.
b DASTM gain or (loss) for foreign corporations that use DASTM	5b		
c Combine lines 5a and 5b	5c		-995,003.
d Current earnings and profits in U.S. dollars (line 5c translated at the appropriate exchange rate as defined in section 989(b) and the related regulations)	5d		
Enter exchange rate used for line 5d ▶			

Schedule I Summary of Shareholder's Income From Foreign Corporation

If item D on page 1 is completed, a separate Schedule I must be filed for each Category 4 or 5 filer for whom reporting is furnished on this Form 5471. This schedule I is being completed for:

Name of U.S. shareholder ▶	Identifying number ▶
1 Subpart F income (line 38b, Worksheet A in the instructions)	1
2 Earnings invested in U.S. property (line 17, Worksheet B in the instructions)	2
3 Previously excluded subpart F income withdrawn from qualified investments (line 6b, Worksheet C in the instructions)	3
4 Previously excluded export trade income withdrawn from investment in export trade assets (line 7b, Worksheet D in the instructions)	4
5 Factoring income	5
6 Total of lines 1 through 5. Enter here and on your income tax return	6
7 Dividends received (translated at spot rate on payment date under section 989(b)(1))	7
8 Exchange gain or (loss) on a distribution of previously taxed income	8

• Was any income of the foreign corporation blocked?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
• Did any such income become unblocked during the tax year (see section 964(b))?	<input type="checkbox"/>		<input type="checkbox"/>	

If the answer to either question is "Yes," attach an explanation.

FORM 5471

OTHER INCOME

STATEMENT 20

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
MICROFINANCE INCOME	354,638.		466,791.
TOTAL TO 5471, SCHEDULE C, LINE 8	354,638.		466,791.

FORM 5471

OTHER DEDUCTIONS

STATEMENT 21

DESCRIPTION	FUNCTIONAL CURRENCY	EXCHANGE RATE	U.S. DOLLAR
PERSONNEL BENEFITS	34,074.		44,794.
TRAVEL	5,650.		7,398.
OFFICE EXPENSES	67,056.		96,796.
EQUIPMENT COSTS	80.		0.
PERSONNEL EXPENSES	3,644.		4,787.
COMPUTER EXPENSE	4,306.		5,629.
PROFESSIONAL FEES	539,483.		709,602.
CURRENCY EXCHANGE	0.		-88,075.
VEHICLE EXPENSE	20,333.		26,753.
BAD DEBT	237,861.		312,456.
MISCELLANEOUS	104,083.		127,219.
TOTAL TO 5471, SCHEDULE C, LINE 16	1,016,570.		1,247,359.

FORM 5471

OTHER ASSETS

STATEMENT 22

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
ASSETS OF DISCONTINUED OPERATIONS	2,275,828.	1,235,671.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 12	2,275,828.	1,235,671.

FORM 5471

OTHER LIABILITIES

STATEMENT 23

DESCRIPTION	BEG. OF ANNUAL ACCOUNTING PERIOD	END OF ANNUAL ACCOUNTING PERIOD
LIABILITIES OF DISCONTINUED OPERATIONS	467,375.	16,007.
TOTAL TO 5471, PAGE 3, SCHEDULE F, LINE 17	467,375.	16,007.

**SCHEDULE J
(Form 5471)**

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

**Accumulated Earnings and Profits (E&P)
of Controlled Foreign Corporation**

► Information about Schedule J (Form 5471) and its instructions is at www.irs.gov/form5471.
► Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471

**WORLD RELIEF CORP. OF NATIONAL
ASSOCIATION OF EVANGELICALS**

Identifying number

23-6393344

Name of foreign corporation

BESELIDHJA ZAVET MICRO FINANCE LLC

EIN (if any)

000000000

Reference ID number

KOSOVO1976

	(a) Post-1986 Undistributed Earnings (post-86 section 959(c)(3) balance)	(b) Pre-1987 E&P Not Previously Taxed (pre-87 section 959(c)(3) balance)	(c) Previously Taxed E&P (sections 959(c)(1) and (2) balances)			(d) Total Section 964(a) E&P (combine columns (a), (b), and (c))
			(i) Earnings Invested in U.S. Property	(ii) Earnings Invested in Excess Passive Assets	(iii) Subpart F Income	
1 Balance at beginning of year	-1,440,719.					-1,440,719.
2a Current year E&P						
b Current year deficit in E&P	995,003.					
3 Total current and accumulated E&P not previously taxed (line 1 plus line 2a or line 1 minus line 2b)	-2,435,722.					
4 Amounts included under section 951(a) or reclassified under section 959(c) in current year						
5a Actual distributions or reclassifications of previously taxed E&P						
b Actual distributions of nonpreviously taxed E&P						
6a Balance of previously taxed E&P at end of year (line 1 plus line 4, minus line 5a)						
b Balance of E&P not previously taxed at end of year (line 3 minus line 4, minus line 5b)	-2,435,722.					
7 Balance at end of year. (Enter amount from line 6a or line 6b, whichever is applicable.)	-2,435,722.					-2,435,722.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule J (Form 5471) (Rev. 12-2012)

**SCHEDULE M
(Form 5471)**

(Rev. December 2012)

Department of the Treasury
Internal Revenue Service

**Transactions Between Controlled Foreign Corporation
and Shareholders or Other Related Persons**

▶ Information about Schedule M (Form 5471) and its instructions is at www.irs.gov/form5471.

▶ Attach to Form 5471.

OMB No. 1545-0704

Name of person filing Form 5471 WORLD RELIEF CORP. OF NATIONAL ASSOCIATION OF EVANGELICALS	Identifying number 23-6393344
--	---

Name of foreign corporation BESELIDHJA ZAVET MICRO FINANCE LL	EIN (if any) 000000000	Reference ID number KOSOVO1976
---	----------------------------------	--

Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory) ...					
2 Sales of tangible property other than stock in trade					
3 Sales of property rights (patents, trademarks, etc.)					
4 Platform contribution transaction payments received					
5 Cost sharing transaction payments received					
6 Compensation received for technical, managerial, engineering, construction, or like services					
7 Commissions received					
8 Rents, royalties, and license fees received					
9 Dividends received (exclude deemed distributions under subpart F and distributions of previously taxed income)					
10 Interest received					
11 Premiums received for insurance or reinsurance					
12 Add lines 1 through 11					
13 Purchases of stock in trade (inventory)					
14 Purchases of tangible property other than stock in trade					
15 Purchases of property rights (patents, trademarks, etc.)					
16 Platform contribution transaction payments paid					
17 Cost sharing transaction payments paid					
18 Compensation paid for technical, managerial, engineering, construction, or like services					
19 Commissions paid					
20 Rents, royalties, and license fees paid					
21 Dividends paid					
22 Interest paid					
23 Premiums paid for insurance or reinsurance					
24 Add lines 13 through 23					
25 Amounts borrowed (enter the maximum loan balance during the year) - see instr.					
26 Amounts loaned (enter the maximum loan balance during the year) - see instr.					