

Return of Organization Exempt From Income Tax

2008

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

Open to Public Inspection

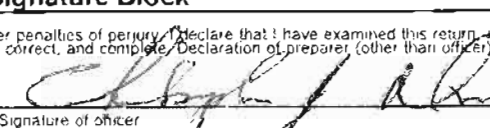
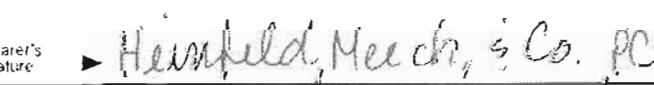
Department of the Treasury
Internal Revenue Service

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

For the 2008 calendar year, or tax year beginning **10/01**, 2008, and ending **9/30**, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See specific instructions.	INTERNATIONAL FOUNDATION FOR EDUCATION AND SELF HELP (IFESH) 5040 E. SHEA BLVD. #260 SCOTTSDALE, AZ 85254-4687	D Employer Identification Number 52-1265061 E Telephone number 480-443-1800 G Gross receipts \$ 8,134,116.
F Name and address of principal officer: DR. JULIE H. SULLIVAN SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number	
J Website: WWW.IFESH.ORG		K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
L Year of formation: 1981		M State of legal domicile: AZ	

Part I Summary			
1 Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.			
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	11
	4	Number of independent voting members of the governing body (Part VI, line 1b)	8
	5	Total number of employees (Part V, line 2a)	26
	6	Total number of volunteers (estimate if necessary)	46
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	0.
Revenue			Prior Year
			Current Year
	8	Contributions and grants (Part VIII, line 1h)	8,645,752.
	9	Program service revenue (Part VIII, line 2g)	635,717.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	106.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	110.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,281,575.	8,134,116.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,034,484.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	303,955.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,312,510.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	2,933,704.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	163,567.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	4,754,485.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,101,479.	5,167,275.
19 Revenue less expenses. Subtract line 18 from line 12		-819,904.	8,404,934.
Net Assets or Fund Balances			Beginning of Year
			End of Year
	20	Total assets (Part X, line 16)	4,641,947.
21	Total liabilities (Part X, line 26)	7,356,333.	
22 Net assets or fund balances. Subtract line 21 from line 20		4,292,845.	7,278,049.
22		349,102.	78,284.

Part II Signature Block			
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	Date 8/13/2008	
	Signature of officer:  CHRISTOPHER J. MARSH, CPA Type or print name and title	VP OF FIN./HR	
Paid Preparer's Use Only	Preparer's signature:  Firm's name (or yours if self-employed), address, and ZIP + 4: HEINFELD, MEECH & CO, PC 3033 N. CENTRAL AVE. SUITE 300 PHOENIX, AZ 85012-2928	Date: 8-13-10	Check if self-employed: <input type="checkbox"/> Preparer's identifying number (see instructions): EIN: 86-0558065 Phone no.: 602-277-9449

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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

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

4a (Code:) (Expenses \$ 3,674,818. including grants of \$ 13,918.) (Revenue \$)

SEE SCHEDULE O

4b (Code:) (Expenses \$ 1,263,888. including grants of \$ 7,613.) (Revenue \$)

SEE SCHEDULE O

4c (Code:) (Expenses \$ 1,190,378. including grants of \$ 206,831.) (Revenue \$)

SEE SCHEDULE O

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

SEE SCHEDULE O

(Expenses \$ 365,127. including grants of \$ 75,593.) (Revenue \$)

4e Total program service expenses ▶ \$ 6,494,211. (Must equal Part IX, Line 25, column (B).)

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)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I		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? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part 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? If 'Yes,' complete Schedule F, Part II	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? If 'Yes,' complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III		X
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25		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? If 'Yes,' complete Schedule L, Part I		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If 'Yes,' complete Schedule L, Part IV.</i>	X	
b Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <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, Parts II, III, IV, and V, line 1.</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		X
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

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Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1 a	52		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1 b	0		
1 c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2 a	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		
2 a	26		
2 b	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 this return. (see instructions)	X	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3 b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
4 a	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	
4 b	If 'Yes,' enter the name of the foreign country: SEE SCHEDULE O See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 c	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6 a	Did the organization solicit any contributions that were not tax deductible?		X
6 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7 a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
7 b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7 c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 d	If 'Yes,' indicate the number of Forms 8282 filed during the year		
7 e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7 h	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9 a	Did the organization make any taxable distributions under section 4966?		
9 b	Did the organization make any distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10 a	Initiation fees and capital contributions included on Part VIII, line 12		
10 b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11 a	Gross income from other members or shareholders		
11 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12 b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1 a Enter the number of voting members of the governing body.		
1 b Enter the number of voting members that are independent		
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? SEE SCHEDULE O.	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 organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7 a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		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 a Does the organization have local chapters, branches, or affiliates?		X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990. SEE SCHEDULE O.	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.		X

Section B. Policies

	Yes	No
12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13.	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. SEE SCHEDULE O.	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does 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 of key employees of the organization? SEE SCHEDULE O. Describe the process in Schedule O. (see instructions)	X	
16 a 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,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosures

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ AZ
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. SEE SCHEDULE O
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ▶ CHRISTOPHER J. MARSH, CPA 5040 E. SHEAD BLVD., STE 260 SCOTTS, AZ 85254 480-443-1800

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ALAN DETHERIDGE DIRECTOR	37.5	X					21,755.	0.	12,038.	
DR. FAIDA M. MITIFU, AMB. DIRECTOR	1	X					0.	0.	0.	
DR. BERNARD E. ANDERSON DIRECTOR	1	X					0.	0.	0.	
DR. C.T. WRIGHT DIRECTOR	1	X					0.	0.	0.	
DR. EAMON M. KELLY CHAIRMAN	1	X					0.	0.	0.	
HONORABLE EDMUND M. REGGIE DIRECTOR	1	X					0.	0.	0.	
ESTHER B. FERGUSON SECRETARY	1	X					0.	0.	0.	
GRACE BANKS SULLIVAN DIRECTOR	1	X					0.	0.	0.	
BETTYE JACKSON DIRECTOR	1	X					0.	0.	0.	
DR. JULIE H. SULLIVAN PRESIDENT & CEO	37.5			X			164,482.	0.	15,702.	
DR. MAC A. STEWART VICE PRESIDENT	1	X					0.	0.	0.	
CHRISTOPHER MARSH, CPA VP FIN/HR	37.5			X			111,446.	0.	34,809.	
DR. CONNIE MANNINGS VP COMM DEV PRG	37.5			X			82,816.	0.	33,663.	
DR. EMMANUEL OJAMERUAYE VP R/D	37.5			X			183,287.	0.	23,589.	
BRENDA DRAKE ASSIST. SECR.	37.5			X			49,601.	0.	11,938.	

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a					
	b Membership dues	1 b					
	c Fundraising events	1 c					
	d Related organizations	1 d					
	e Government grants (contributions)	1 e	5,418,099.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f	2,709,789.				
	g Noncash contribns included in lns 1a-1f: .. \$		1,300,710.				
	h Total. Add lines 1a-1f.		8,127,888.				
PROGRAM SERVICE REVENUE	2 a TRAINING/WKSHOP	Business Code	6,118.	6,118.			
	b -----						
	c -----						
	d -----						
	e -----						
	f All other program service revenue						
	g Total. Add lines 2a-2f.		6,118.				
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		110.			110.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	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 -----							
	b -----						
	c -----						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e.			8,134,116.	6,118.	0.	110.	

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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 U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	303,955.	303,955.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	613,387.	0.	613,387.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	1,716,698.	1,374,064.	240,336.	102,298.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	39,693.	12,156.	24,521.	3,016.
9 Other employee benefits	464,928.	223,816.	223,888.	17,224.
10 Payroll taxes	98,998.	30,884.	60,674.	7,440.
11 Fees for services (non-employees):				
a Management				
b Legal	9,654.	2,093.	7,561.	
c Accounting	30,196.	5,696.	24,500.	
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17.				
f Investment management fees				
g Other	2,473.		2,473.	
12 Advertising and promotion				
13 Office expenses	556,343.	460,572.	85,097.	10,674.
14 Information technology				
15 Royalties				
16 Occupancy	348,175.	199,592.	148,583.	
17 Travel	1,618,575.	1,426,327.	169,620.	22,628.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	442,568.	442,568.		
20 Interest	1,607.	1,557.		50.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	21,139.	21,139.		
23 Insurance	42,175.	733.	41,442.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>DONATED BOOKS</u>	1,300,710.	1,300,710.		
b <u>MEDICAL</u>	321,445.	319,835.	1,610.	
c <u>ORIENTATION</u>	215,539.	215,539.		
d <u>EQUIPMENT RENTAL/MAINTENANCE</u>	87,187.	12,270.	74,917.	
e <u>SETTLEMENT</u>	49,470.	49,470.		
f All other expenses	120,019.	91,235.	28,547.	237.
25 Total functional expenses. Add lines 1 through 24f	8,404,934.	6,494,211.	1,747,156.	163,567.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	448,537.	1	437,833.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	1,091,983.	3	1,076,132.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	299,168.	9	91,327.
	10a Land, buildings, and equipment: cost basis	10a 381,186.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 365,331.	36,994.	10c 15,855.
	11 Investments — publicly-traded securities	6,165.	11	5,995.
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,759,100.	15	5,729,191.
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,641,947.	16	7,356,333.	
LIABILITIES	17 Accounts payable and accrued expenses	649,218.	17	867,525.
	18 Grants payable		18	
	19 Deferred revenue	3,609,627.	19	6,410,524.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	34,000.	25	
	26 Total liabilities. Add lines 17 through 25	4,292,845.	26	7,278,049.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	236,710.	27	-272,104.
	28 Temporarily restricted net assets	112,392.	28	350,388.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, 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, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances.	349,102.	33	78,284.	
34 Total liabilities and net assets/fund balances.	4,641,947.	34	7,356,333.	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

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

c If 'Yes' to 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?

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?

b If 'Yes,' did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization: INTERNATIONAL FOUNDATION FOR EDUCATION AND SELF HELP (IFESH)
Employer identification number: 52-1265061

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: (Please check only one organization.)

- 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).
3 A hospital or 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).
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).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X 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).
8 A community trust described in section 170(b)(1)(A)(vi).
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...
10 An organization organized and operated exclusively to test for public safety.
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations...
a Type I b Type II c Type III - Functionally integrated d Type III - Other
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons...
f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

Table with 2 columns: Yes, No. Rows for 11g(i), 11g(ii), 11g(iii).

Table with 7 columns: (i) Name of Supported Organization, (ii) EIN, (iii) Type of organization, (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 Support.

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	11207998.	10711572.	10270840.	8,645,752.	6,827,178.	47,663,340.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 Total. Add lines 1-3.	11207998.	10711572.	10270840.	8,645,752.	6,827,178.	47,663,340.
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).						0.
6 Public support. Subtract line 5 from line 4.						47,663,340.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4.	11207998.	10711572.	10270840.	8,645,752.	6,827,178.	47,663,340.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	93,847.	120.	1,161.	106.	110.	95,344.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV.	88.	3,193.	25,669.			28,950.
11 Total support. Add lines 7 through 10.						47,787,634.
12 Gross receipts from related activities, etc. (see instructions).					12	0.
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 2008 (line 6, column (f) divided by line 11, column (f))	14	99.7%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	0.0%
16 a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b 33-1/3 support test – 2007. 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"/>		
17 a 10%-facts-and-circumstances test – 2008. 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 – 2007. 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.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 1-5.						
7a Amounts included on lines 1, 2, 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 lns 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h.	18	%

19a 33-1/3 support tests – 2008. 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 – 2007. If the organization did not check a box on line 14 or 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.

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2008	2007	2006	2005	2004
SALE OF OLD FURNITURE (NIGERIA)				3,193.	
MISCELLARY (UNIV OF CAL)			25,669.		88.
WNDDP					
TOTAL	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 25,669.</u>	<u>\$ 3,193.</u>	<u>\$ 88.</u>

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization

Employer identification number

INTERNATIONAL FOUNDATION FOR EDUCATION

52-1265061

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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other 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 pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 8/17/06	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easement it holds? Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 170(h)(4)(B)(ii)? Yes No

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

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

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

b If the organization elected, as permitted under SFAS 116, 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 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 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 accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

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

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

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

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

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 XIV and complete the following table:

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

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

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

Part V Endowment Funds Complete if 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 Investment earnings or 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 year end balance held as:

- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ _____ %
- c Term endowment ▶ _____ %

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 XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		376,543.	360,688.	15,855.
e Other		4,643.	4,643.	0.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				15,855.

BAA

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)		8,134,116.
2	Total expenses (Form 990, Part IX, column (A), line 25)		8,404,934.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-270,818.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4-8		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		-270,818.

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

1	Total revenue, gains, and other support per audited financial statements		1	9,954,310.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	1,820,194.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d		2e	1,820,194.
3	Subtract line 2e from line 1		3	8,134,116.
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	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		5	8,134,116.

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

1	Total expenses and losses per audited financial statements		1	10,225,128.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	1,820,194.	
b	Prior year adjustments	2b		
c	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d		2e	1,820,194.
3	Subtract line 2e from line 1		3	8,404,934.
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	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5	8,404,934.

Part XIV Supplemental Information

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

Part XIV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

Statement of Activities Outside the United States

2008

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

INTERNATIONAL FOUNDATION FOR EDUCATION

52-1265061

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

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

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

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
MIDDLE EAST AND NORTH AFRICA	1	3	PROGRAM SERVICE	AEFA, UNFPA, AND UNICEF	52,012.
SUB-SAHARAN AFRICA	14	109	PROGRAM SERVICES	SEE SCHEDULE F, PART IV	3,037,204.
Totals	15	112			3,089,216.

Part IV Supplemental Information

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

PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR GRANTS OUTSIDE US

IFESH OPERATES IN MULTIPLE COUNTRIES IN AFRICA. IN EACH COUNTRY THERE IS MINIMALLY ONE COUNTRY DIRECTOR AND AN OFFICE. DEPENDING ON THE SIZE OF IFESH OPERATIONS IN THE COUNTRY, THERE WILL BE OFFICE AND FIELD EMPLOYEES. EACH COUNTRY DIRECTOR IS RESPONSIBLE FOR SUBMITTING TO IFESH HEADQUARTERS IN PHOENIX ORIGINAL TRANSACTIONAL DOCUMENTS, BANK STATEMENTS, AND ACCOUNT SOFTWARE REPORTS AT THE END OF EACH MONTH. THESE ARE REVIEWED WITHIN 10 TO 30 DAYS BY AN IFESH ACCOUNTANT FOR ACCURACY, COMPLETENESS AND PROPER AUTHORIZATION AND THEN RECORDED IN MONTHLY SUMMARY JOURNAL ENTRIES IN THE HEADQUARTERS ACCOUNTING SYSTEM. BEFORE MONTHLY REQUESTS FOR FUNDS ARE SENT TO THE COUNTRY, HEADQUARTER'S ACCOUNTANTS CONSIDER REQUESTS AGAINST COUNTRY BUDGETS AND EXPENSES TO DATE.

ADDITIONAL SUPPLEMENTAL INFORMATION

SCHEDULE F, PART 1, 3E - SPECIFIC SERVICES IN REGION FOR SUB-SAHARAN AFRICA:
 MARS IMPACT, STARBUCKS, ECHOES, OLAM, JACOBS, CBTEP, CALM, CDC-HIV/AIDS

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No 1545-0047

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

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, line 23.

Open to Public Inspection

Name of the organization

INTERNATIONAL FOUNDATION FOR EDUCATION

Employer identification number

52-1265061

Part I Questions Regarding Compensation

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. **SEE PART III**

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input 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 line 1a is 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

	Yes	No
1a		
1b	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?

2	X	
---	---	--

3 Indicate which, if any, of the following organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input 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:

- a** Receive a severance payment or change of control payment? **4a** X
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b** X
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c** X
- If 'Yes' to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III.

4a		X
4b		X
4c		X

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

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.

5a		X
5b		X

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.

6a		X
6b		X

7 For person 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

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 Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III **8** X

8		X
---	--	---

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

Schedule J (Form 990) 2008

Part III Supplemental Information

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

PART J LINE 1A - RELEVANT INFORMATION REGARDING COMPENSATION BENEFITS

DR. JULIE SULLIVAN IS PROVIDED WITH FIRST OR BUSINESS CLASS TRAVEL WHEN AVAILABLE. DR. SULLIVAN IS PROVIDED

FIRST CLASS TRAVEL BASED ON THE ORGANIZATION'S ACCOUNTING POLICIES REGARDING TRAVEL. THE TRAVEL POLICY

STATES THAT EMPLOYEES AND CONSULTANTS WILL TRAVEL COACH CLASS EXCEPT IN THE FOLLOWING SITUATIONS: COACH

CLASS IS UNAVAILABLE. THEY HAVE A DISABILITY THAT REQUIRES THEM TO TAKE FIRST CLASS AND THIS IS VERIFIED BY

A PHYSICIANS NOTE. COACH CLASS ON FOREIGN CARRIERS DOES NOT PROVIDE ADEQUATE SANITATION OR HEALTH STANDARDS

AND SO BUSINESS CLASS IS PERMITTED. IT WOULD BE CHEAPER TO TAKE OTHER THAN COACH, I.E. IT WOULD SAVE A NIGHT

OF HOTEL ACCOMMODATIONS. SCHEDULED FLIGHT TIME EXCEEDS 14 HOURS UNINTERRUPTED BY LAYOVERS OR THE EMPLOYEE

WILL PAY THE EXTRA COST OF NON-COACH CLASS. THE ACCOUNTING POLICY ALSO STATES THAT ON DOMESTIC TRAVEL WHEN

THERE IS NO BUSINESS CLASS TRAVEL THEN FIRST CLASS TRAVEL IS PERMITTED.

DR. SULLIVAN HAS A DISABILITY THAT HAS BEEN VERIFIED BY A PHYSICIANS NOTE.

**SCHEDULE M
(Form 990)**

Non-Cash Contributions

OMB No. 15-15-0047

2008

Open to Public Inspection

► To be completed by organizations that answered 'Yes'
on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization **INTERNATIONAL FOUNDATION FOR EDUCATION
AND SELF HELP (IFESH)**

Employer identification number
52-1265061

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		1,300,710.	COST
5 Clothing and household goods				
6 Cars and other vehicles				
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

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

29	
----	--

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

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
 b If 'Yes,' describe in Part II.

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

	Yes	No
30a		X
31	X	
32a		X
33		

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Department of the Treasury
Internal Revenue Service

Name of the organization: INTERNATIONAL FOUNDATION FOR EDUCATION
AND SELF HELP (IFESH)

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FORM 990 PART I & PART III ORG. MISSION

THE EXEMPT PURPOSE OF THE INTERNATIONAL FOUNDATION FOR EDUCATION AND SELF-HELP IS:

- 1) TO ADDRESS THE CHALLENGES OF DEVELOPING NATIONS THROUGH DEVELOPMENTAL PROGRAMS AND INSTITUTIONS THAT PROVIDE MOTIVATION AND TRAINING BASED ON SELF-HELP PRINCIPLES;
- AND 2) TO SUPPORT THE PROVISION OF TECHNICAL AND LIFE SKILLS FOR ALL PEOPLE, REGARDLESS OF RACE, COLOR, CREED, OR GENDER SO THROUGH THE REALIZATION OF THEIR POTENTIAL THEY CAN RAISE THEIR LIFE STANDARD.

FORM 990, PART V, 4B COMPLIANCE

THE ORGANIZATION HAD AN INTEREST IN, OR A SIGNATURE OR OTHER AUTHORITY OVER FINANCIAL ACCOUNTS IN THE FOLLOWING FOREIGN COUNTRIES: CDI, DJIBOUTI, DRC, ETHIOPIA, GHANA, GUINEA, LIBERIA, MALAWI, NAMIBIA, NIGERIA, SENEGAL, SOUTH AFRICA.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

INTERNATIONAL EDUCATORS FOR AFRICA PROGRAM
THROUGH OUR INTERNATIONAL EDUCATORS FOR AFRICA (IEFA) PROGRAM, MORE THAN 1,115 AMERICAN VOLUNTEER EDUCATORS HAVE BEEN ASSIGNED SINCE 1992 TO 15 COUNTRIES, DIRECTLY IMPACTING MORE THAN 500,000 AFRICAN TEACHERS WHO HAVE, IN TURN, IMPACTED THE LIVES OF MILLIONS OF STUDENTS.

EACH YEAR, WE ASSIGN SOME 50 AMERICAN VOLUNTEER EDUCATORS TO EDUCATIONAL INSTITUTIONS TO ASSIST IN IMPROVING THE QUALITY OF TEACHING AND LEARNING AND TO INFLUENCE BEHAVIORAL CHANGE FOR SUSTAINABLE EDUCATIONAL REFORM. THE "TRAIN THE TRAINER" CONCEPT IS KEY TO OUR ABILITY TO IMPACT SUBSTANTIAL NUMBERS OF AFRICAN SCHOOL CHILDREN. THROUGH TRAINING GIVEN TO LECTURERS, THE 50 VOLUNTEERS EXPOSE THOUSANDS OF AFRICAN TEACHERS EACH YEAR TO NEW AND INNOVATIVE TEACHING METHODOLOGIES. IN TURN, OVER 3 MILLION STUDENTS ANNUALLY BENEFIT FROM THE TRAINING PROVIDED TO THOSE AFRICAN TEACHERS.

Name of the organization INTERNATIONAL FOUNDATION FOR EDUCATION
AND SELF HELP (IFESH)

Employer identification number
52-1265061

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)

OUR VOLUNTEER EDUCATORS ASSIST IN PEDAGOGICAL DESIGN, CURRICULUM DEVELOPMENT, ENGLISH AS A SECOND LANGUAGE, PRE AND IN-SERVICE WORKSHOPS, EDUCATIONAL ADMINISTRATIVE MANAGEMENT, DEVELOPING LIBRARY RESOURCE CENTERS AND ASSISTING IN THE DEVELOPMENT OF TRAINING MODULES. THEY ALSO ADVISE MINISTRIES OF EDUCATION ON IMPROVING THEIR EDUCATIONAL POLICIES TO MEET THEIR GOVERNMENTS' STRATEGIC GOALS.

THROUGH SPONSORING READING PROJECTS AND STRENGTHENING PARENT ASSOCIATIONS, WE INCREASE PARENTAL INVOLVEMENT IN EDUCATION WHILE HELPING SCHOOL SYSTEMS TO BECOME MORE ACCOUNTABLE AND RESPONSIVE TO THE NEEDS OF THE COMMUNITY AND IN ACCORDANCE WITH THEIR GOVERNMENT POLICY. HEALTH IS AN IMPORTANT COMPONENT OF THE PROGRAM AND OUR VOLUNTEERS FOCUS ON MINIMIZING THE IMPACT OF HIV/AIDS THROUGH INTRODUCING AFRICAN TEACHERS TO HIV/AIDS CURRICULUM. IN ADDITION, THROUGH SPONSORING READING PROJECTS AND STRENGTHENING PARENT ASSOCIATIONS, WE INCREASE PARENTAL INVOLVEMENT IN EDUCATION WHILE HELPING SCHOOL SYSTEMS TO BECOME MORE ACCOUNTABLE AND RESPONSIVE TO THE NEEDS OF THE COMMUNITY AND IN ACCORDANCE WITH THEIR GOVERNMENT POLICY.

THE IEFA PROGRAM IS FUNDED BY THE UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT UNDER ITS AMERICAN EDUCATORS FOR AFRICA PROGRAM THAT FOCUSES ON INCREASING ACCESS TO QUALITY BASIC EDUCATION IN AFRICA THROUGH SCHOLARSHIPS, TEXTBOOKS, ESTABLISHING TEACHER RESOURCE CENTERS, COLLABORATION WITH LOCAL NGOS AND TEACHER-TRAINING PROJECTS. WE ALSO RECEIVE SUPPORT FOR OUR EDUCATION PROGRAM FROM THE WORLD COCOA FOUNDATION, MARS, INC., STARBUCKS, THE ALCOA FOUNDATION AND OTHER PRIVATE SECTOR ENTITIES.

IN 2009, IFESH ASSIGNED A TOTAL OF 47 AMERICAN VOLUNTEER EDUCATORS TO NINE AFRICAN

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FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)

COUNTRIES DIRECTLY IMPACTING 10,600 BENEFICIARIES COMPRISED OF PRE- AND IN-SERVICE TEACHERS, SCHOOL ADMINISTRATORS, STUDENTS, PERSONNEL OF THE MINISTRIES OF EDUCATION AND LOCAL NGOS.

FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS

HIV/AIDS

IN ADDITION TO INCORPORATING HIV/AIDS CURRICULA INTO IFESH EDUCATION PROJECTS, OUR HIV/AIDS TREATMENT AND PREVENTION PROJECTS ARE CURRENTLY OPERATING IN THE IMO AND RIVERS STATES OF NIGERIA THROUGH FUNDING FROM THE U.S. CENTERS FOR DISEASE CONTROL. THESE PROJECTS FOCUS ON PREGNANT WOMEN, YOUTH, ORPHANS AND VULNERABLE CHILDREN. WE ADMINISTER LIFE-SAVING ANTIRETROVIRAL MEDICATION TO PREGNANT WOMEN TO PREVENT THEM FROM TRANSFERRING THE VIRUS DURING CHILDBIRTH. IN 2009, OVER 6,000 EXPECTANT MOTHERS RECEIVED MEDICATION AND HEALTHCARE FROM IFESH FIELD OFFICES IN THE TWO STATES. MORE THAN 10,000 PEOPLE RECEIVED HIV COUNSELING AND TESTING SERVICES AND OVER 2,700 ADULTS AND 1,500 CHILDREN WERE NEWLY ENROLLED TO RECEIVE IFESH HIV BASIC CARE AND SUPPORT SERVICES.

BECAUSE OF THE PSYCHOLOGICAL EFFECTS AND STIGMA ASSOCIATED WITH BEING HIV POSITIVE, WE FORM SUPPORT GROUPS FOR CLIENTS AND THEIR FAMILIES. IN ADDITION, WE PROVIDE PATIENTS WITH QUALITY CLINICAL SERVICES, PSYCHOSOCIAL SUPPORT, HOME-BASED CARE, AND FOOD AND NUTRITIONAL SUPPLEMENTS.

OUR PROJECTS PROMOTE ABSTINENCE, HIV AWARENESS AND SAFE SEX PRACTICES AMONGST YOUTH. BY MAKING TEENS AND OTHER HIGH RISK GROUPS AWARE OF THE DANGERS ASSOCIATED WITH UNSAFE SEX, WE ARE EQUIPPING THEM WITH THE KNOWLEDGE TO PROTECT THEMSELVES AND OTHERS FROM THE VIRUS. WE FORM YOUTH CLUBS AND, USING A "PEER-TO-PEER" APPROACH, WE CREATE AN ATMOSPHERE WHERE TEENS CAN TALK FREELY AMONGST EACH OTHER ABOUT SAFE SEX

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FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)

AND ABSTINENCE.

FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS

CONFLICT MITIGATION

OUR CONFLICT ABATEMENT THROUGH LOCAL MITIGATION PROJECT (CALM), FUNDED BY USAID SEEKS TO REDUCE THE INCIDENCES OF VIOLENT CONFLICT IN FIVE NIGERIAN STATES (DELTA, KADUNA, KANO, PLATEAU AND RIVERS) BY STRENGTHENING THE CAPACITY OF NIGERIAN SOCIETY TO ADDRESS THOSE FACTORS CAUSING VIOLENT CONFLICT. THE PROJECT FOCUSES ON:

-DEVELOPING A COMMUNITY-BASED EARLY WARNING AND EARLY RESPONSE SYSTEMS

-TRAINING LOCAL ORGANIZATIONS TO MAINSTREAM CONFLICT MANAGEMENT AND MITIGATION TECHNIQUES IN THEIR TRADITIONAL DEVELOPMENT WORK

-PROVIDING YOUTH WITH ALTERNATIVE FORMS OF SOCIAL AND ECONOMIC ENGAGEMENT IN ORDER TO REDUCE VIOLENT TENDENCIES

TO MAXIMIZE OUR IMPACT AND ENSURE PROGRAM SUSTAINABILITY, WE WORKED WITH 42 NONGOVERNMENTAL ORGANIZATIONS COMPRISING YOUTH, WOMEN AND CIVIL SOCIETY GROUPS. ADDITIONALLY, WE ESTABLISHED AND TRAINED FIVE CONFLICT MANAGEMENT AND MITIGATION REGIONAL COUNCILS (CMMRCS) IN THE FOCAL STATES TO FUNCTION AS COMMUNITY CHANGE AGENTS.

A SIGNIFICANT CALM PROJECT ACHIEVEMENT IS THE TRANSFORMATION OF 9,700 AT-RISK YOUTH BY PROVIDING THEM WITH CONSTRUCTIVE FORMS OF SOCIAL AND POLITICAL ENGAGEMENT. ADDITIONALLY 5,000 YOUTHS WERE TRAINED IN BECOMING CHANGE AGENTS WITHIN THEIR COMMUNITIES. WITH SUPPORT FROM THE ORGANIZATION BASKETBALL FOR PEACE, 35 BASKETBALL PEACE ZONES WERE ESTABLISHED IN COMMUNITIES, AS WERE 105 PEACE CLUBS IN SECONDARY SCHOOLS. THE PEACE CLUBS AND PEACE ZONES ARE RECOGNIZED BY YOUTH AS A SAFE HAVEN

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FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)

AND A PLACE TO SET ASIDE THEIR DIFFERENCES.

IN 2009, WE TRAINED OVER 1,200 PEOPLE IN CONFLICT MITIGATION AND MANAGEMENT SKILLS, ENGAGED 38 YOUTH GROUPS IN CIVIC ACTIVITIES (SUCH AS COMMUNITY OUTREACH, PREVENTION OF ELECTORAL VIOLENCE AND ADVOCACY ON HOLDING ELECTED LEADERS ACCOUNTABLE) AND ESTABLISHED OR IMPROVED 248 PEACE BUILDING STRUCTURES. THE CALM PROJECT, WHICH WILL COME TO A CLOSE IN JUNE 2010, WILL CONTINUE TO IMPACT NIGERIA THROUGH THE CMMRCS, THE EARLY WARNING SYSTEMS AND THROUGH YOUTH PARTICIPATION IN PEACE CLUB AND PEACE ZONE RELATED ACTIVITIES.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

MISCELLANEOUS - OTHER IFESH PROJECTS INCLUDE: A UNICEF-SPONSORED PROJECT IN THE DEMOCRATIC REPUBLIC OF THE CONGO (DRC) TO REINTEGRATE CHILD SOLDIERS INTO SOCIETY, A UNFPA PROJECT REGARDING REPRODUCTIVE HEALTH EDUCATION IN DJIBOUTI, AND A UNICEF PROJECT REGARDING EARLY CHILDHOOD DEVELOPMENT ALSO IN DJIBOUTI.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECT

JULIE H. SULLIVAN (PRESIDENT & CEO) IS THE DAUGHTER OF GRACE SULLIVAN (DIRECTOR).

FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS

THIS FORM 990 WILL BE COMPLETED AND SENT TO ALL BOARD MEMBERS FOR REVIEW AND COMMENT BEFORE IT IS SIGNED.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF C

AT EACH QUARTERLY BOARD MEETING THE SECRETARY CIRCULATES A CONFLICT OF INTEREST STATEMENT AND QUESTIONNAIRES. ADDITIONALLY, AT EACH QUARTERLY BOARD MEETING, THE BOARD SECRETARY CIRCULATES THE QUESTIONNAIRE AND STATEMENT AND MEMBERS OF THE BOARD ARE REQUESTED TO FILL ONE OUT IF ANY CHANGES HAVE TAKEN PLACE IN THE QUARTER.

Name of the organization INTERNATIONAL FOUNDATION FOR EDUCATION AND SELF HELP (IFESH)

Employer identification number 52-1265061

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF C

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES

PERIODICALLY STAFF POSITIONS ARE COMPARED TO INDUSTRY AVERAGES. LONGEVITY OF EMPLOYMENT WITH THE ORGANIZATION IS ALSO A SECOND FACTOR CONSIDERED IN CALCULATING SALARIES.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THESE DOCUMENTS ARE AVAILABLE FOR PUBLIC INSPECTION BY APPOINTMENT AT IFESH HEADQUARTERS OFFICES.



Department of the Treasury
Internal Revenue Service
OGDEN UT 84201-0074

For assistance, call:
1-877-829-5500

Notice Number: CP211A
Date: March 15, 2010

Taxpayer Identification Number:
52-1265061
Tax Form: 990
Tax Period: September 30, 2009

134224.701988.0430.009 1 AT 0.357 375



INTERNATIONAL FOUNDATION FOR
I F E S H
5040 E SHEA BLVD STE 260
PHOENIX AZ 85254-4687605

134224

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **May 15, 2010**.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

