Schedule F (Form 990)

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 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Inspection

Employer identification number

Pa	rt I General Informa "Yes" to Form 990,			e the United States	. Complete if the organi	zation answered		
1								
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 nee	ded.)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
Ta+	alo b							

Part IV, line	e 15, for any re	tance to Organizations ecipient who received m 990) if additional space	nore than \$5,000	tside the United St). Check this box if	ates. Complete if no one recipient	the organization a received more tha	answered "Yes" n \$5,000	' to Form 990, ▶ □
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)
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by the IRS, or for w	vhich the grante	nizations listed above that a e or counsel has provided ations or entities	a section 501(c)(3	3) equivalency letter		.		

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. Use Schedule F-1 (Form 990) 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)

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