

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047

2012Open to Public
Inspection**A** For the **2012** calendar year, or tax year beginning **APR 1, 2012** and ending **MAR 31, 2013****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**OXFAM-AMERICA, INC.**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

226 CAUSEWAY STREET, 5TH FLOOR

Room/suite

City, town, or post office, state, and ZIP code

BOSTON, MA 02114**F** Name and address of principal officer: **RAYMOND OFFENHEISER**
SAME AS C ABOVE**D** Employer identification number**23-7069110****E** Telephone number**617-482-1211****G** Gross receipts \$ **101,252,537.****H(a)** Is this a group returnfor affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.OXFAMAMERICA.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1974** **M** State of legal domicile: **MA****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: CREATE LASTING SOLUTIONS TO GLOBAL POVERTY, HUNGER, AND INJUSTICE.	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 20
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 20
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5 303
	6	Total number of volunteers (estimate if necessary)	6 2206
	Revenue	7a	Total unrelated business revenue from Part VIII, column (C), line 12
b		Net unrelated business taxable income from Form 990-T, line 34	7b 0.
8		Contributions and grants (Part VIII, line 1h)	Prior Year 34,993,203. Current Year 63,705,258.
9		Program service revenue (Part VIII, line 2g)	0. 0.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	689,169. 1,535,593.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	86,987. 181,473.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	35,769,359. 65,422,324.
13		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13,611,728. 20,898,248.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
Expenses		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	741,705. 1,576,916.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 10,711,344.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,827,701. 24,437,856.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	37,844,433. 77,963,886.
	19	Revenue less expenses. Subtract line 18 from line 12	-2,075,074. -12,541,562.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 102,090,256. End of Year 88,914,901.
	21	Total liabilities (Part X, line 26)	14,652,849. 11,493,975.
	22	Net assets or fund balances. Subtract line 21 from line 20	87,437,407. 77,420,926.

Part II Signature Block

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

Sign Here	Signature of officer	Date
	MARK KRIPP, CFO Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature
	CRAIG KLEIN	
Firm's EIN	Firm's name ▶ CBIZ TOFIAS	Firm's EIN ▶ 26-3753134
	Firm's address ▶ 500 BOYLSTON STREET BOSTON, MA 02116	Phone no. 617-761-0600

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

Part III Statement of Program Service Accomplishments

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

☒ X**1** Briefly describe the organization's mission:

OXFAM AMERICA IS AN INTERNATIONAL RELIEF AND DEVELOPMENT ORGANIZATION THAT CREATES LASTING SOLUTIONS TO POVERTY, HUNGER, AND INJUSTICE. WITH INDIVIDUALS AND LOCAL GROUPS IN MORE THAN 90 COUNTRIES, OXFAM SAVES LIVES, HELPS PEOPLE OVERCOME POVERTY AND FIGHTS FOR SOCIAL JUSTICE.

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 \$ 24,007,979. including grants of \$ 8,448,572.) (Revenue \$)

PROGRAMS TO OVERCOME POVERTY AND INJUSTICE: IN ETHIOPIA, OUR RURAL RESILIENCE INITIATIVE PROVIDED POOR FARMERS WITH TOOLS TO STRENGTHEN FOOD AND INCOME SECURITY THROUGH IMPROVED RESOURCE MANAGEMENT, WEATHER-INDEXED INSURANCE, MICROCREDIT, AND SAVINGS. IN HAITI, WORK HAS MOVED FROM EMERGENCY RESPONSE TO LONGER TERM DEVELOPMENT, SPECIFICALLY WITH RICE FARMERS. OXFAM AND PARTNERS CLEARED MORE THAN 60 MILES OF IRRIGATION CHANNELS IN THE ARTIBONITE VALLEY, BUILT A NEW RICE MILL TO SAVE BOTH TIME AND MONEY USUALLY SPENT ON TRANSPORT OF GRAIN, AND INTRODUCED A METHOD OF GROWING RICE TO IMPROVE RICE YIELDS. WORK ALSO CONTINUED WITH COMMUNITIES AFFECTED BY OIL, GAS, AND MINING OPERATIONS IN WEST AFRICA, LATIN AMERICA, AND SOUTHEAST ASIA.

4b (Code:) (Expenses \$ 18,399,415. including grants of \$ 8,340,724.) (Revenue \$)

SAVING LIVES: EMERGENCY RESPONSE AND PREPAREDNESS: WHEN DISASTER STRIKES, OXFAM AND ITS LOCAL PARTNERS MOVE QUICKLY TO MEET PEOPLE'S EMERGENCY NEEDS. WE ALSO WORK TO BUILD THE CAPACITY OF VULNERABLE COMMUNITIES TO BE BETTER PREPARED FOR A DISASTER. WHEN THE OCTOBER 2011 STORM STRUCK EL SALVADOR, THE READINESS OF THE COUNTRY'S OXFAM-TRAINED TEAM OF WATER, SANITATION, AND HYGIENE VOLUNTEERS WAS UNPRECEDENTED. THIS PAST YEAR WE DEVELOPED SIMILAR TEAMS IN GUATEMALA, HONDURAS, HAITI, AND PERU. WORK ALSO CONTINUED IN THE DROUGHT AFFECTED SAHEL REGION OF WEST AFRICA AND IN CAMPS OF INTERNALLY DISPLACED PEOPLE IN SUDAN - REHABILITATING WELLS, PROVIDING PEOPLE WITH CASH TO BUY FOOD, AND TRAINING COMMUNITIES IN WATER, SANITATION, AND HYGIENE ACTIVITIES.

4c (Code:) (Expenses \$ 13,443,644. including grants of \$ 3,978,808.) (Revenue \$)

CAMPAIGNING FOR SOCIAL JUSTICE: WE SUPPORT THE RIGHT OF PEOPLE LIVING IN POOR COMMUNITIES TO PARTICIPATE MEANINGFULLY IN DISCUSSIONS ABOUT ISSUES AFFECTING THEIR FAMILIES, THEIR LIVELIHOODS, AND THEIR LAND. THE GROW CAMPAIGN CONTINUED TO ADVOCATE FOR INVESTMENT IN SMALL-SCALE FOOD PRODUCERS. THE PLIGHT OF SMALL-SCALE FOOD PRODUCERS - IN THIS CASE WOMEN COCOA FARMERS - WAS THE CENTERPIECE OF OUR INTERNATIONAL WOMEN'S DAY ACTIVITIES - MOBILIZING AN INTERNATIONAL CONSTITUENCY AND RAISING AWARENESS ABOUT THE CORPORATE POLICIES OF THREE OF THE LARGEST FOOD AND BEVERAGE COMPANIES AND THE EFFECTS OF THOSE POLICIES ON THESE WOMEN FARMERS. ALL THREE COMPANIES HAVE COMMITTED TO PUT A PLAN OF ACTION IN PLACE TO IMPROVE POOR CONDITIONS FOR COCOA GROWERS.

4d Other program services (Describe in Schedule O.)(Expenses \$ 5,629,870. including grants of \$ 130,144.) (Revenue \$)**4e** Total program service expenses **61,480,908.**

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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	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? If "Yes," complete Schedule C, Part III		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? 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, 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? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	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 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? If "Yes," complete Schedule F, Parts I and IV	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, Parts II and IV	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, Parts III and IV		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? If "Yes," complete Schedule G, Part 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? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		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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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? If "Yes," complete Schedule I, Parts I and II	21 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? If "Yes," complete Schedule I, Parts I and III	22	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? If "Yes," complete Schedule J	23 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
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	25a	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? If "Yes," complete Schedule L, Part I	25b	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? If "Yes," complete Schedule L, Part II	26	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? If "Yes," complete Schedule L, Part III	27	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? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	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? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	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? If "Yes," complete Schedule R, Part I	33 X	
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 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)? If "Yes," complete Schedule R, Part V, line 2	35b X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36 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? If "Yes," complete Schedule R, Part VI	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38 X	

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

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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	1a 166	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	
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	2a 303	
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 (see instructions)	2b X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
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)?	4a X	
b 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?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
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?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a 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?	7a X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
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?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?	9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a 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.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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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 1a 20 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.		
b Enter the number of voting members included in line 1a, above, who are independent 1b 20		
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? 2		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? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		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? 7a		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? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	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 9		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? 10a	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? 10b	X	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	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 12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	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 12c	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy? 14	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 15a	X	
b Other officers or key employees of the organization 15b	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? 16a		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? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **MA, AL, AK, AZ, AR, CA, CT, DE, FL, GA, HI, ID**

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: ►
MARK KRIPP - 617-728-2558
226 CAUSEWAY STREET, 5TH FLOOR, BOSTON, MA 02114-2206

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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) GABERMAN, BARRY CHAIR	3.00	X		X				0.	0.	0.
(2) HAMILTON, JOE H. TREASURER AND SECRETARY	2.50	X		X				0.	0.	0.
(3) BAPNA, MANISH DIRECTOR	1.50	X						0.	0.	0.
(4) BECKER, ELIZABETH DIRECTOR	0.40 0.10	X						0.	0.	0.
(5) BERMANZOHN, FRAN DIRECTOR	1.00	X						0.	0.	0.
(6) BROWN, L. DAVID DIRECTOR	1.00	X						0.	0.	0.
(7) CONWAY, ROSALIND DIRECTOR	2.00	X						0.	0.	0.
(8) DONIGER, DAVID DIRECTOR	0.80	X						0.	0.	0.
(9) DOWN, JAMES DIRECTOR	2.00	X						0.	0.	0.
(10) FOX, JONATHAN DIRECTOR	0.50	X						0.	0.	0.
(11) GARRELS, ANNE L. DIRECTOR	0.50	X						0.	0.	0.
(12) GLANTZ, GINA DIRECTOR	1.00	X						0.	0.	0.
(13) GLICKMAN, DAN DIRECTOR	0.50	X						0.	0.	0.
(14) LOUGHREY, JOSEPH DIRECTOR	1.50	X						0.	0.	0.
(15) MAKINO, SHIGEKI DIRECTOR	1.50	X						0.	0.	0.
(16) NGUYEN, MINH-CHAU DIRECTOR	0.50	X						0.	0.	0.
(17) REISS, STEVEN DIRECTOR	0.50	X						0.	0.	0.

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) SEWALL, SARAH DIRECTOR	2.00	X						0.	0.	0.
(19) SINGH, SMITA DIRECTOR	1.00	X						0.	0.	0.
(20) WIDMANN, ROGER DIRECTOR	2.00	X						0.	0.	0.
(21) OFFENHEISER, RAYMOND PRESIDENT (NON-VOTING)	39.90 0.10			X				523,164.	0.	36,274.
(22) KRIPP, MARK CFO & ASSISTANT TREASURER	39.30 0.70			X				212,142.	0.	34,386.
(23) JACOBS, DIDIER ASSISTANT SECRETARY	39.90 0.10			X				93,412.	0.	28,374.
(24) DANIELL, JAMES CHIEF OPERATING OFFICER	40.00				X			311,534.	0.	39,277.
(25) LANGEVIN, ADELE SR DIRECTOR OF HUMAN RESOURCES	40.00				X			186,977.	0.	8,736.
(26) KURZINA, STEPHANIE O. VP, DEVELOPMENT & COMUNICATIONS	39.70 0.30				X			266,657.	0.	25,672.
1b Sub-total								1,593,886.	0.	172,719.
c Total from continuation sheets to Part VII, Section A								1,175,008.	0.	180,640.
d Total (add lines 1b and 1c)								2,768,894.	0.	353,359.

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 **38**

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

	Yes	No
3		X
4	X	
5		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

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

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
INNOVATIONS FOR POVERTY ACTION 85 WILLOW ST., NEW HAVEN, CT 06511	CONSULTING	549,525.
O'BRIEN, MCCONNELL & PEARSON, INC., 1133 19TH ST., NW, SUITE 300, WASHINGTON, DC	FUNDRAISING	490,109.
GRASSROOTS CAMPAIGNS 1321 15TH ST., SUITE 100, DENVER, CO 80202	FUNDRAISING	380,256.
REDHEAD MEDIA, LLC 80 STANDISH AVENUE, QUINCY, MA 02170	ADVERTISING & PUBLICITY	271,251.
M+R STRATEGIC SERVICES 1901 L ST., NW, WASHINGTON, DC 20036	FUNDRAISING	180,260.

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 **9**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2012)

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>
-----------------	--

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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			
(27) O'BRIEN, DANIEL PAUL VP, POLICY & CAMPAIGNS	40.00				X			202,009.	0.	33,679.
(28) TETER, DARIUS VP OF PROGRAMS	40.00				X			227,905.	0.	32,985.
(29) AMBLER, JOHN S. VICE PRESIDENT OF STRATEGY	40.00					X		202,458.	0.	17,945.
(30) DELANEY, MICHAEL HUMANITARIAN RESPONSE DIRECTOR	40.00					X		131,038.	0.	31,625.
(31) DELGADO, LINDA DIRECTOR OF GOVERNMENT AFFAIRS	40.00					X		129,989.	0.	19,182.
(32) HAYES, RACHEL SR DIRECTOR OF COMMUNICATIONS	40.00					X		141,231.	0.	30,621.
(33) MURIU, MUTHONI SR DIRECTOR OF REGIONAL PROGRAMS	40.00					X		140,378.	0.	14,603.
Total to Part VII, Section A, line 1c								1,175,008.		180,640.

Part VIII Statement of RevenueCheck 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			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	63,705,258.		
	g	Noncash contributions included in lines 1a-1f: \$		1,506,091.		
	h	Total. Add lines 1a-1f		63,705,258.		
Program Service Revenue	2 a	Business Code				
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,264,466.	
4		Income from investment of tax-exempt bond proceeds				
5		Royalties		169,792.		169,792.
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)		271,127.		271,127.
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 REVENUE	900099	11,681.		11,681.	
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d		11,681.			
12	Total revenue. See instructions.		65,422,324.	0.	0.	1,717,066.

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	903,176.	903,176.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	19,995,072.	19,995,072.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,352,649.	651,562.	1,445,795.	255,292.
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	20,400,960.	16,941,278.	1,374,047.	2,085,635.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,113,333.	894,044.	109,456.	109,833.
9 Other employee benefits	5,505,502.	4,067,345.	784,307.	653,850.
10 Payroll taxes	1,678,422.	1,253,942.	221,669.	202,811.
11 Fees for services (non-employees):				
a Management				
b Legal	229,337.	147,517.	79,804.	2,016.
c Accounting	132,691.	25,291.	107,400.	
d Lobbying	315,663.	315,663.		
e Professional fundraising services. See Part IV, line 17	1,576,916.			1,576,916.
f Investment management fees	122,593.		92,034.	30,559.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	5,630,097.	4,998,741.	308,077.	323,279.
12 Advertising and promotion	1,001,585.	532,182.	2,497.	466,906.
13 Office expenses	2,441,214.	323,007.	59,157.	2,059,050.
14 Information technology	1,998,188.	1,351,242.	167,777.	479,169.
15 Royalties				
16 Occupancy	2,617,484.	2,053,242.	319,815.	244,427.
17 Travel	3,909,272.	3,639,042.	171,379.	98,851.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	941,217.	883,092.	35,993.	22,132.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,048,701.	878,149.	93,458.	77,094.
23 Insurance	108,386.	57,048.	48,735.	2,603.
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 DESIGN AND PRINTING	1,254,657.	296,620.	4,417.	953,620.
b MEMBERSHIPS/DUES/SUBS.	908,419.	678,522.	75,675.	154,222.
c MAILING/POSTAGE	624,872.	168,885.	1,141.	454,846.
d				
e All other expenses	1,153,480.	426,246.	269,001.	458,233.
25 Total functional expenses. Add lines 1 through 24e	77,963,886.	61,480,908.	5,771,634.	10,711,344.
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)

Part X Balance SheetCheck 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	4,506,618.	1	6,069,928.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	13,162,695.	3	14,830,128.
	4 Accounts receivable, net	223,030.	4	376,407.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	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	502,832.	7	513,473.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,611,000.	9	1,527,779.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,317,909.		
	b Less: accumulated depreciation	10b 6,010,905.	10c	2,307,004.
	11 Investments - publicly traded securities	78,043,185.	11	63,019,163.
	12 Investments - other securities. See Part IV, line 11	700,865.	12	96,271.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	232,571.	15	174,748.
16 Total assets. Add lines 1 through 15 (must equal line 34)	102,090,256.	16	88,914,901.	
Liabilities	17 Accounts payable and accrued expenses	4,831,042.	17	5,540,846.
	18 Grants payable	6,002,651.	18	2,517,458.
	19 Deferred revenue	156,747.	19	180,500.
	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		23	
	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	3,662,409.	25	3,255,171.
	26 Total liabilities. Add lines 17 through 25	14,652,849.	26	11,493,975.
	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		46,253,633.	27	41,847,542.
28 Temporarily restricted net assets		39,388,774.	28	33,777,484.
29 Permanently restricted net assets		1,795,000.	29	1,795,900.
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		87,437,407.	33	77,420,926.
34 Total liabilities and net assets/fund balances		102,090,256.	34	88,914,901.

Form 990 (2012)

Part XI Reconciliation of Net AssetsCheck 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	65,422,324.
2	Total expenses (must equal Part IX, column (A), line 25)	2	77,963,886.
3	Revenue less expenses. Subtract line 2 from line 1	3	-12,541,562.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	87,437,407.
5	Net unrealized gains (losses) on investments	5	2,525,081.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	77,420,926.

Part XII Financial Statements and ReportingCheck 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	2a	X
b 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	2b	X
c 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.	2c	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? _____	3a	X
b 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 _____	3b	

Form 990 (2012)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

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).

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2012

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.")	51329359.	84320475.	77158483.	34993203.	63705258.	311506778
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	51329359.	84320475.	77158483.	34993203.	63705258.	311506778
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)						39085523.
6 Public support. Subtract line 5 from line 4.						272421255

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	51329359.	84320475.	77158483.	34993203.	63705258.	311506778
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1169147.	672,225.	1286218.	620,834.	1434258.	5182682.
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.)	15,891.	2,582.	6,617.	5,466.	11,681.	42,237.
11 Total support. Add lines 7 through 10						316731697
12 Gross receipts from related activities, etc. (see instructions)					12	
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	86.01	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	83.70	%
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"/>		

Schedule A (Form 990 or 990-EZ) 2012

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

Employer identification number

OXFAM-AMERICA, INC.

23-7069110

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 foundationCheck 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)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2012

**Open to Public
Inspection**

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

▶ **See separate instructions.**

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

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

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

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

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

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

Name of organization

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours ▶

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

232041
01-07-13

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

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		149,602.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		166,061.													
c Total lobbying expenditures (add lines 1a and 1b)		315,663.													
d Other exempt purpose expenditures		66,936,879.													
e Total exempt purpose expenditures (add lines 1c and 1d)		67,252,542.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	478,618.	364,401.	481,468.	315,663.	1,640,150.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	184,885.	114,342.	125,654.	149,602.	574,483.

Schedule C (Form 990 or 990-EZ) 2012

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

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

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

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

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

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

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

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

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

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

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

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

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

☐ Yes ☐ No

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

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

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

☐ Yes ☐ No

9 In Part 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other

c ☐ Preservation for future generations

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	5,545,695.	4,964,139.	4,905,162.	3,928,515.	3,901,202.
b Contributions		76,968.		667,410.	
c Net investment earnings, gains, and losses	705,321.	513,492.	83,402.	376,925.	270,221.
d Grants or scholarships					
e Other expenditures for facilities and programs				35,689.	214,133.
f Administrative expenses	14,398.	8,904.	24,425.	31,998.	28,775.
g End of year balance	6,236,618.	5,545,695.	4,964,139.	4,905,163.	3,928,515.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☒ 23.00 %

b Permanent endowment ☒ 29.00 %

c Temporarily restricted endowment ☒ 48.00 %

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:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐

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				
b Buildings				
c Leasehold improvements		1,538,858.	1,003,262.	535,596.
d Equipment		6,688,869.	5,007,643.	1,681,226.
e Other		90,182.		90,182.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,307,004.

Schedule D (Form 990) 2012

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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

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) GIFT ANNUITIES PAYABLE	2,610,091.
(3) DEFERRED RENT	624,080.
(4) OTHER LIABILITIES	21,000.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	3,255,171.

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 ☒

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

1	Total revenue, gains, and other support per audited financial statements	1	68,918,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,525,081.
b	Donated services and use of facilities	2b	503,397.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	467,198.
e	Add lines 2a through 2d	2e	3,495,676.
3	Subtract line 2e from line 1	3	65,422,324.
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 XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	65,422,324.

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

1	Total expenses and losses per audited financial statements	1	78,971,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	503,397.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	503,717.
e	Add lines 2a through 2d	2e	1,007,114.
3	Subtract line 2e from line 1	3	77,963,886.
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 XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	77,963,886.

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 V, LINE 4: OXFAM UTILIZES A TOTAL RETURN SPENDING POLICY,

SPENDING FROM ITS ENDOWMENT TO SUPPORT OPERATIONS. UNDER THE POLICY, UP TO

5% OF THE THREE YEAR ROLLING MARKET VALUE MAY BE UTILIZED. THE MARKET

VALUE OF THE ENDOWMENT INCLUDES PERMANENTLY RESTRICTED NET ASSETS PLUS

ACCUMULATED UNSPENT GAINS INCLUDED IN TEMPORARILY RESTRICTED NET ASSETS.

PART X, LINE 2: OXFAM ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX

POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. INTEREST AND PENALTIES ASSESSED, IF ANY, ARE ACCRUED AS INCOME TAX EXPENSE.

OXFAM HAS IDENTIFIED ITS TAX STATUS AS A TAX EXEMPT ENTITY AS A TAX POSITION; HOWEVER, OXFAM HAS DETERMINED THAT SUCH TAX POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. IN ADDITION TO ITS TAX STATUS, OXFAM HAS OTHER TAX POSITIONS THAT HAVE BEEN DETERMINED TO BE HIGHLY CERTAIN AND, THEREFORE, NO RESERVE FOR UNRECOGNIZED TAX LIABILITY IS DEEMED NECESSARY. OXFAM IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION. ITS FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

OXFAM AMERICA ADVOCACY FUND REVENUE	468,374.
ROUNDING ADJUSTMENT	-1,176.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	467,198.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

OXFAM AMERICA ADOCACTY FUND EXPENSES	505,939.
ROUNDING ADJUSTMENT	-2,222.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	503,717.

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

2012Open to Public
Inspection

Name of the organization

Employer identification number

OXFAM-AMERICA, INC.**23-7069110****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	42	PROGRAM SERVICES	PROGRAMS TO SAVE LIVES AND OVERCOME POVERTY AND INJUSTICE	3,301,528.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS/PARTNER SUPPORT		4,733,224.
EAST ASIA AND THE PACIFIC	2	21	PROGRAM SERVICES	PROGRAMS TO SAVE LIVES AND OVERCOME POVERTY AND INJUSTICE	1,403,180.
EAST ASIA AND THE PACIFIC	0	0	GRANTS/PARTNER SUPPORT		1,318,163.
SOUTH AMERICA	1	17	PROGRAM SERVICES	PROGRAMS TO SAVE LIVES AND OVERCOME POVERTY AND INJUSTICE	1,837,658.
SOUTH AMERICA	0	0	GRANTS/PARTNER SUPPORT		1,361,927.
SUB-SAHARAN AFRICA	5	111	PROGRAM SERVICES	PROGRAMS TO SAVE LIVES AND OVERCOME POVERTY AND INJUSTICE	6,109,397.
SUB-SAHARAN AFRICA	0	0	GRANTS/PARTNER SUPPORT		8,965,733.
3 a Sub-total	10	191			29,030,810.
b Total from continuation sheets to Part I	0	0			3,712,297.
c Totals (add lines 3a and 3b)	10	191			32,743,107.

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

Schedule F (Form 990) 2012

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(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
SOUTH ASIA	0	0	GRANTS/PARTNER SUPPORT		390,843.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS/PARTNER SUPPORT		2,949,086.
NORTH AMERICA	0	0	GRANTS/PARTNER SUPPORT		88,640.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS/PARTNER SUPPORT		48,826.
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	GRANTS/PARTNER SUPPORT		138,631.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENTS		96,271.
Totals					3,712,297.

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)
		SOUTH AMERICA	RESOURCE MANAGEMENT	141,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	56,091.	WIRE	0.		
		SUB-SAHARAN AFRICA	DISASTER RISK REDUCTION OR REHABILITATION	144,930.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	66,677.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	50,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WATER AND AGRICULTURE	126,180.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	70,146.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESOURCE MANAGEMENT	55,000.	WIRE	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

127

3 Enter total number of other organizations or entities

30

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)
		CENTRAL AMERICA AND THE CARIBBEAN	MICOFINANCE	34,200.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	132,048.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	25,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	OTHER HUMANITARIAN INTERVENTION	180,200.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	112,592.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	24,986.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESOURCE MANAGEMENT	15,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MICOFINANCE	149,770.	WIRE	0.		
		SOUTH AMERICA	CLIMATE CHANGE	68,200.	WIRE	0.		

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)
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	154,605.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MICOFINANCE	30,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	OTHER HUMANITARIAN INTERVENTION	186,700.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	12,902.	WIRE	0.		
		SOUTH AMERICA	RESOURCE MANAGEMENT	35,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MICOFINANCE	35,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	50,209.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESOURCE MANAGEMENT	35,000.	WIRE	0.		
		SOUTH AMERICA	GENERAL ADVOCACY	42,600.	WIRE	0.		

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)
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	75,050.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WATER AND AGRICULTURE	131,887.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WATER AND AGRICULTURE	45,600.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	116,405.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	OTHER HUMANITARIAN INTERVENTION	173,479.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	393,408.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	11,650.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	10,269.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	41,277.	WIRE	0.		

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)
		CENTRAL AMERICA AND THE CARIBBEAN	WATER AND AGRICULTURE	115,380.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	223,224.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	277,185.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	73,030.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	RESOURCE MANAGEMENT	72,920.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	OTHER HUMANITARIAN INTERVENTION	130,019.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GENERAL ADVOCACY	21,460.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESOURCE MANAGEMENT	40,000.	WIRE	0.		
		SOUTH AMERICA	RESOURCE MANAGEMENT	54,000.	WIRE	0.		

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)
		SOUTH AMERICA	CLIMATE CHANGE	30,000.	WIRE	0.		
		SOUTH AMERICA	DISASTER RISK REDUCTION	75,500.	WIRE	0.		
		SOUTH AMERICA	DISASTER RISK REDUCTION	30,924.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESOURCE MANAGEMENT	58,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	CLIMATE CHANGE	19,631.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL ADVOCACY	50,000.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	34,240.	WIRE	0.		
		SUB-SAHARAN AFRICA	DISASTER RISK REDUCTION	99,996.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	50,000.	WIRE	0.		

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)
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	17,000.	WIRE	0.		
		SOUTH AMERICA	RESOURCE MANAGEMENT	3,000.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	10,685.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	92,937.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	43,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	GENERAL ADVOCACY	30,000.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	47,000.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	48,415.	WIRE	0.		
		SOUTH AMERICA	RESOURCE MANAGEMENT	15,000.	WIRE	0.		

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)
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	70,000.	WIRE	0.		
		SOUTH AMERICA	CLIMATE CHANGE	36,000.	WIRE	0.		
		SOUTH AMERICA	RESOURCE MANAGEMENT	24,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	RESOURCE MANAGEMENT	63,498.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	28,577.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	363,197.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	15,334.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	178,679.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	12,386.	WIRE	0.		

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	RESOURCE MANAGEMENT	40,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL ADVOCACY	39,771.	WIRE	0.		
		SUB-SAHARAN AFRICA	DISASTER RISK REDUCTION	65,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	1238690.	WIRE	0.		
		SOUTH AMERICA	RESOURCE MANAGEMENT	10,662.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	72,800.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	OTHER HUMANITARIAN INTERVENTION	15,000.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	30,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESOURCE MANAGEMENT	40,000.	WIRE	0.		

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)
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	50,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	18,247.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CORPORATE ENGAGEMENT	6,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	201,405.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MICOFINANCE	25,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESOURCE MANAGEMENT	40,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MICOFINANCE	58,106.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	40,000.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	30,000.	WIRE	0.		

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)
		SOUTH AMERICA	RESOURCE MANAGEMENT	25,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	30,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	65,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	28,577.	WIRE	0.		
		SUB-SAHARAN AFRICA	DISASTER RISK REDUCTION	56,477.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	281,359.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	63,264.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	87,710.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	10,820.	WIRE	0.		

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	LIVELIHOODS (NON AGRICULTURE)	13,989	WIRE	0.		
		SUB-SAHARAN AFRICA	DISASTER RISK REDUCTION	28,687	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	20,153	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	10,269	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	900	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	970	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	28,577	WIRE	0.		
		EAST ASIA AND THE PACIFIC	CLIMATE CHANGE	32,600	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	OTHER HUMANITARIAN INTERVENTION	300,005	WIRE	0.		

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)
		CENTRAL AMERICA AND THE CARIBBEAN	DISASTER RISK REDUCTION	15,100.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	26,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MICOFINANCE	82,694.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	8,300.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	30,000.	WIRE	0.		
		EUROPE	AID EFFECTIVENESS	978,120.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	12,000.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	62,000.	WIRE	0.		
		EUROPE	RESOURCE MANAGEMENT	55,000.	WIRE	0.		

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)
		EUROPE	GENERAL ADVOCACY	16,200.	WIRE	0.		
		EUROPE	WATER AND AGRICULTURE	40,442.	WIRE	0.		
		EUROPE	DISASTER RISK REDUCTION	16,291.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	16,200.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	62,121.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	OTHER HUMANITARIAN INTERVENTION	30,959.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS RECOVERY	41,850.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	7,404.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS RECOVERY	69,085.	WIRE	0.		

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	OTHER HUMANITARIAN INTERVENTION	100,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	29,682.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	20,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WOMENS EMPOWERMENT	50,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	DISASTER RISK REDUCTION	74,205.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS (NON AGRICULTURE)	166,846.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	35,000.	WIRE	0.		

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	LIVELIHOODS RECOVERY	50,500.	WIRE	0.		
		SUB-SAHARAN AFRICA	MICRO-INSURANCE	202,506.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	92,957.	WIRE	0.		
		EUROPE	CLIMATE CHANGE	63,840.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	RESOURCE MANAGEMENT	30,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	42,857.	WIRE	0.		
		CANADA	WOMENS EMPOWERMENT	20,000.	WIRE	0.		
		EUROPE	AID EFFECTIVENESS	159,607.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	10,000.	WIRE	0.		

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)
		EUROPE	AID EFFECTIVENESS	182,600.	WIRE	0.		
		EUROPE	DISASTER RISK REDUCTION	1,950.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	169,286.	WIRE	0.		
		EUROPE	LIVELIHOODS (NON AGRICULTURE)	6,000.	WIRE	0.		
		EUROPE	OTHER HUMANITARIAN INTERVENTION	48,826.	WIRE	0.		
		EUROPE	POLICY AND ADVOCACY	562,429.	WIRE	0.		
		EUROPE	CLIMATE CHANGE	159,000.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	20,000.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	186,211.	WIRE	0.		

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)
		EUROPE	POLICY AND ADVOCACY	14,500.	WIRE	0.		
		EUROPE	WOMENS EMPOWERMENT	75,000.	WIRE	0.		
		EUROPE	WOMENS EMPOWERMENT	117,460.	WIRE	0.		
		EUROPE	LIVELIHOODS (NON AGRICULTURE)	44,599.	WIRE	0.		
		EUROPE	POLICY AND ADVOCACY	188,000.	WIRE	0.		
		EUROPE	CLIMATE CHANGE	79,903.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	45,000.	WIRE	0.		
		EUROPE	CLIMATE CHANGE	79,500.	WIRE	0.		
		EUROPE	CLIMATE CHANGE	85,914.	WIRE	0.		

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)
		EAST ASIA AND THE PACIFIC	GENERAL ADVOCACY	52,325.	WIRE	0.		
		SOUTH ASIA	POLICY AND ADVOCACY	201,424.	WIRE	0.		
		EUROPE	POLICY AND ADVOCACY	50,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	AID EFFECTIVENESS	107,851.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	GENERAL ADVOCACY	12,711.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	OTHER HUMANITARIAN INTERVENTION	399,004.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	POLICY AND ADVOCACY	56,784.	WIRE	0.		
		NORTH AMERICA AND MEXICO	POLICY AND ADVOCACY	68,640.	WIRE	0.		
		EUROPE	CORPORATE ENGAGEMENT	15,000.	WIRE	0.		

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)
		EUROPE	GENERAL ADVOCACY	25,000.	WIRE	0.		
		EUROPE	RESOURCE MANAGEMENT	10,000.	WIRE	0.		
		EUROPE	WOMENS EMPOWERMENT	73,000.	PENDING	0.		
		EUROPE	OTHER HUMANITARIAN INTERVENTION	30,419.	WIRE	0.		
		EUROPE	DISASTER RISK REDUCTION	1,266.	WIRE	0.		
		EUROPE	OTHER HUMANITARIAN INTERVENTION	9,880.	WIRE	0.		
		EUROPE	WOMENS EMPOWERMENT	12,000.	WIRE	0.		
		NORTH AMERICA AND MEXICO	RESOURCE MANAGEMENT	35,000.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	6,000.	WIRE	0.		

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)
		EUROPE	WOMENS EMPOWERMENT	186,900.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS RECOVERY	38,270.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	9,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	1,200.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	AID EFFECTIVENESS	18,500.	WIRE	0.		
		SOUTH AMERICA	DISASTER RISK REDUCTION	33,500.	WIRE	0.		
		SOUTH AMERICA	INDIGENOUS PEOPLES RIGHTS	6,700.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GENERAL ADVOCACY	2,100.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	CLIMATE CHANGE	44,268.	WIRE	0.		

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)
		EAST ASIA AND THE PACIFIC	GENERAL ADVOCACY	7,844.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	55,240.	WIRE	0.		
		SUB-SAHARAN AFRICA	MICRO-INSURANCE	230,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	66,919.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	MICROFINANCE	58,284.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	220,090.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	271,741.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WATER AND AGRICULTURE	219,487.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	MICROFINANCE	41,716.	WIRE	0.		

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)
		CENTRAL AMERICA AND THE CARIBBEAN	WATER AND AGRICULTURE	299,994.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	WATER AND AGRICULTURE	21,836.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	93,146.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	362,223.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	182,045.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	127,042.	WIRE	0.		
		EUROPE	AID EFFECTIVENESS	620,000.	WIRE	0.		
		EUROPE	GENERAL ADVOCACY	56,748.	WIRE	0.		
		EUROPE	POLICY AND ADVOCACY	598,915.	WIRE	0.		

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	GENERAL ADVOCACY	44,839.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	700.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL ADVOCACY	26,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	WATER AND AGRICULTURE	69,783.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	WATER AND AGRICULTURE	16,870.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	42,080.	WIRE	0.		
		SUB-SAHARAN AFRICA	RESOURCE MANAGEMENT	39,350.	WIRE	0.		
		SUB-SAHARAN AFRICA	LIVELIHOODS RECOVERY	156,258.	WIRE	0.		
		SUB-SAHARAN AFRICA	OTHER HUMANITARIAN INTERVENTION	178,695.	WIRE	0.		

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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[illegible]

Part III can be duplicated if additional space is needed.

[illegible]

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: PROGRAM OFFICERS MEET WITH PARTNERS AND VISIT THE PROJECT REGULARLY TO ASSESS WHETHER THE FUNDS HAVE BEEN USED FOR THE INTENDED PURPOSE. PROGRAM AND FINANCIAL EXPENDITURE REPORTS ARE ALSO PREPARED BY THE PARTNERS IN CONJUNCTION WITH LOCAL PROGRAM OFFICERS. FINAL REPORTS ARE COMPLETED BY PARTNERS AND SUBMITTED TO OXFAM AMERICA UPON COMPLETION OF THE PROJECT. PROJECTS MAY BE AUDITED AS NEEDED OR AS REQUIRED BY CONTRACT PROVISION. THERE ARE NO AUDIT THRESHOLDS EXCEPT AS REQUIRED BY CONTRACT, AND AUDITS ARE CONDUCTED AT THE DISCRETION OF THE REGIONAL OFFICE AND ARE BASED ON THE REGIONAL DIRECTOR'S AND REGIONAL OFFICE STAFF'S COMFORT LEVEL WITH THE PARTNER AND PROJECT OVERALL. ALL FINANCIAL AND NARRATIVE REPORTS ARE STORED IN OXFAM AMERICA'S GRANT MANAGEMENT SYSTEM.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No. 1545-0047

2012

Open To Public
Inspection

Name of the organization

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

Part I

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

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

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

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
O'BRIEN, MCCONNELL & PEARSON, INC. - 1133 19TH ST. NW,	FUNDRAISING & CONSULTING		X	0.	431,400.	0.
GRASSROOTS CAMPAIGNS, INC. - 1321 15TH ST., DENVER, CO	FUNDRAISING		X	0.	411,205.	0.
DONOR SERVICES GROUP - 6715 SUNSET BLVD, LOS ANGELES, CA	TELEMARKETING		X	0.	208,598.	0.
M + R STRATEGIC SERVICES - 2120 L STREET NW, WASHINGTON,	FUNDRAISING & CONSULTING		X	0.	166,314.	0.
COMMUNITY COUNSELING SERVICE CO. LLC - 10 HIGH STREET,	FUNDRAISING & CONSULTING		X	0.	161,266.	0.
TELEFUND, INC. - PO BOX 2366, DENVER, CO 80201	TELEMARKETING		X	0.	156,019.	0.
HARRIS DIRECT - 6800 OWENSMOUTH AVE., CANOGA PARK,	TELEMARKETING		X	0.	57,978.	0.
PDR II DBA SHARE - PO BOX 400600, CAMBRIDGE, MA 02140	TELEMARKETING		X	0.	48,316.	0.
INFOGROUP NONPROFIT - PO BOX 3243, OMAHA, NE 68103	TELEMARKETING		X	0.	25,166.	0.
SD&A TELESERVICES, INC. - 5757 WEST CENTURY BLVD., LOS	TELEMARKETING		X	0.	10,070.	0.
Total					1,676,332.	

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

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, DC, WV, WI, WY

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

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

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
- ☐
- Yes
- ☐
- No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

- 16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: O'BRIEN, MCCONNELL & PEARSON, INC.

(I) ADDRESS OF FUNDRAISER: 1133 19TH ST. NW, WASHINGTON, DC 20036

(I) NAME OF FUNDRAISER: GRASSROOTS CAMPAIGNS, INC.

(I) ADDRESS OF FUNDRAISER: 1321 15TH ST., DENVER, CO 80202

(I) NAME OF FUNDRAISER: DONOR SERVICES GROUP

Part IV Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: 6715 SUNSET BLVD, LOS ANGELES, CA 90028

(I) NAME OF FUNDRAISER: M + R STRATEGIC SERVICES

(I) ADDRESS OF FUNDRAISER: 2120 L STREET NW, WASHINGTON, DC 20037

(I) NAME OF FUNDRAISER: COMMUNITY COUNSELING SERVICE CO. LLC

(I) ADDRESS OF FUNDRAISER: 10 HIGH STREET, SUITE 503, BOSTON, MA 02110

(I) NAME OF FUNDRAISER: HARRIS DIRECT

(I) ADDRESS OF FUNDRAISER: 6800 OWENSMOUTH AVE., CANOGA PARK, CA 91303

(I) NAME OF FUNDRAISER: SD&A TELESERVICES, INC.

(I) ADDRESS OF FUNDRAISER: 5757 WEST CENTRURY BLVD., LOS ANGELES, CA 90045

SCHEDULE G, PART I, LINE 2B:

THE PAYMENT TO O'BRIEN, MCCONNELL & PEARSON, INC. INCLUDES \$15,365

CONSIDERED AS PAYMENT FOR CONSULTING SERVICES.

THE PAYMENT TO M+R STRATEGIC SERVICES INCLUDES \$46,093 CONSIDERED AS
PAYMENT FOR CONSULTING SERVICES.

THE PAYMENT TO COMMUNITY COUNSELING SERVICES CO., LLC INCLUDES \$36,266
CONSIDERED AS PAYMENT FOR CONSULTING SERVICES.

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

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

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
AMERICAN VALUES NETWORK C/O KAREN STRIDER, 3711 ALBEMARLE WASHINGTON, DC 20016	26-4222057	501(C)(4)	57,000.	0.			GENERAL ADVOCACY
APHA FOOD AND ENVIR WORKING GROUP THE INSTITUTE FOR AGRICULTURE AND TRADE - 2105 1ST AVE SOUTH - MINNEAPOLIS, MN 55404	36-3501938	501(C)(3)	3,000.	0.			GENERAL ADVOCACY
BELOVED COMMUNITY CENTER 417 ARLINGTON ST GREENSBORO, NC 27406	56-1877250	501(C)(3)	20,000.	0.			WORKER RIGHTS
CENTER FOR AMERICAN PROGRESS 1333 H STREET NW, 10TH FLOOR WASHINGTON, DC 20005	30-0126510	501(C)(3)	27,013.	0.			LIVELIHOODS (NON AGRICULTURE)
CHURCH WORLD SERVICE 110 MARYLAND AVE, N.E. SUITE 108 WASHINGTON, DC 20002	13-4080201	501(C)(3)	25,000.	0.			GENERAL ADVOCACY
CORNELL UNIVERSITY ON BEHALF OF ATKINSON CENTER FOR A SUSTAINABLE FUTURE - 373 PINE TREE ROAD - ITHACA, NY 14853	15-0532082	501(C)(3)	60,000.	0.			WATER AND AGRICULTURE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **23.**

3 Enter total number of other organizations listed in the line 1 table **3.**

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

Schedule I (Form 990) (2012)

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
DINING FOR WOMEN P.O. BOX 25633 GREENVILLE, SC 29616	20-0031928	501(C)(3)	20,318.	0.			WATER AND AGRICULTURE
EARTHRIGHTS INTERNATIONAL 1612 K STREET NW SUITE 401 WASHINGTON, DC 20006	04-3265555	501(C)(3)	55,000.	0.			RESOURCE MANAGEMENT
EAT FOR EQUITY 31660 COUNTY 12 LANESBORO, MN 55949	27-3386905	501(C)(3)	5,000.	0.			GENERAL ADVOCACY
GULF ORGANIZED FISHERIES IN SOLIDARITY & HOPE - 1717 TCHOUPITOU LAS ST. - NEW ORLEANS, LA 70130	56-2613407	501(C)(3)	10,000.	0.			LIVELIHOODS (NON AGRICULTURE)
GULF RESTORATION NETWORK 338 BARONNE ST STE 200 NEW ORLEANS, LA 70112	74-1447742	501(C)(3)	50,000.	0.			LIVELIHOODS (NON AGRICULTURE)
INTERFAITH SPONSORING COMMITTEE (BISCO), INC. - 402 WEST 2ND ST - THIBODAU, LA 70301	72-1260542	501(C)(3)	80,000.	0.			LIVELIHOODS (NON AGRICULTURE)
MARY QUEEN OF VIETNAM COMMUNITY DEVELOPMENT - 4626 ALCEE FORTIER BLVD. SUITE E - NEW ORLEANS, LA 70129	20-4929600	501(C)(3)	80,000.	0.			LIVELIHOODS (NON AGRICULTURE)
NATIONAL ASSOCIATION OF EVANGELICALS - 701 G. STREET SW - WASHINGTON, DC 20024	53-0218653	501(C)(3)	5,000.	0.			GENERAL ADVOCACY
NATIONAL FARM WORKER MINISTRY 438 N. SKINKER BLVD. ST. LOUIS, MO 63130	95-2692880	501(C)(3)	55,000.	0.			WORKER RIGHTS

Schedule I (Form 990)

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
PINEROS Y CAMPESINOS UNIDOS DEL NOROESTE - 300 YOUNG ST. - WOODBURN, OR 97071	93-0939941	501(C)(5)	25,000.	0.			WORKER RIGHTS
SLOW FOOD USA 68 SUMMIT ST, SUITE 2B BROOKLYN, NY 11231	13-4100161	501(C)(3)	20,000.	0.			GENERAL ADVOCACY
SOJOURNERS 3333 14 TH STREET NW, SUITE 200 WASHINGTON, DC 20010	23-7380554	501(C)(3)	15,000.	0.			WORKER RIGHTS
SRI GLOBAL, INC. 1157 EAST SHORE DR. ITHACA, NY 14850	27-4749893	501(C)(3)	20,000.	0.			WATER AND AGRICULTURE
STEPS COALITION 610 WATER STREET BILOXI, MS 39530	11-3790429	501(C)(3)	20,000.	0.			LIVELIHOODS (NON AGRICULTURE)
STUDENT ACTION WITH FARMWORKERS 1317 W PETTIGREW STREET DURHAM, NC 27705	56-1789014	501(C)(3)	20,000.	0.			WORKER RIGHTS
THE JAMES BEARD FOUNDATION 167 WEST 12TH STREET NEW YORK, NY 10011	13-2752108	501(C)(3)	30,000.	0.			GENERAL ADVOCACY
TRUMAN NATIONAL SECURITY INSTITUTE 1050 17TH STREET, SUITE 375 WASHINGTON, DC 20036	52-1080919	501(C)(4)	20,000.	0.			GENERAL ADVOCACY
TRUSTEES OF COLUMBIA UNIV IN THE CITY OF NEW YORK - 622 WEST 113TH STREET, MAIL CODE 4524 - NEW YORK, NY 10025	13-5598093	501(C)(3)	40,676.	0.			MICRO-INSURANCE

Schedule I (Form 990)

[illegible]

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

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: PROGRAM OFFICERS MEET WITH PARTNERS AND VISIT THE PROJECT REGULARLY TO ASSESS WHETHER THE FUNDS HAVE BEEN USED FOR THE INTENDED PURPOSE. PROGRAM AND FINANCIAL EXPENDITURE REPORTS ARE ALSO PREPARED BY THE PARTNERS IN CONJUNCTION WITH LOCAL PROGRAM OFFICERS. FINAL REPORTS ARE COMPLETED BY PARTNERS AND SUBMITTED TO OXFAM AMERICA UPON COMPLETION OF THE PROJECT. PROJECTS MAY BE AUDITED AS NEEDED OR AS REQUIRED BY CONTRACT PROVISION. THERE ARE NO AUDIT THRESHOLDS EXCEPT AS REQUIRED BY CONTRACT, AND AUDITS ARE CONDUCTED AT THE DISCRETION OF THE REGIONAL OFFICE AND ARE BASED ON THE REGIONAL DIRECTOR'S AND REGIONAL OFFICE STAFF'S

Part IV Supplemental Information

COMFORT LEVEL WITH THE PARTNER AND PROJECT OVERALL. ALL FINANCIAL AND
NARRATIVE REPORTS ARE STORED IN OXFAM AMERICA'S GRANT MANAGEMENT SYSTEM.

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

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

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.

- | | |
|--|--|
| <input 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 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

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?

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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

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?
- b** Any related organization?
- 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?
- b** Any related organization?
- 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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in
Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2012

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) OFFENHEISER, RAYMOND PRESIDENT (NON-VOTING)	(i)	338,830.	183,938.	396.	12,500.	23,774.	559,438.	99,633.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KRIPP, MARK CFO & ASSISTANT TREASURER	(i)	165,346.	46,508.	288.	9,099.	25,287.	246,528.	19,775.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DANIELL, JAMES CHIEF OPERATING OFFICER	(i)	255,441.	56,000.	93.	12,500.	26,777.	350,811.	30,333.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) LANGEVIN, ADELE SR DIRECTOR OF HUMAN RESOURCES	(i)	153,714.	32,852.	411.	7,736.	1,000.	195,713.	17,675.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KURZINA, STEPHANIE O. VP, DEVELOPMENT & COMMUNICATIONS	(i)	219,097.	47,164.	396.	11,034.	14,638.	292,329.	25,375.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) O'BRIEN, DANIEL PAUL VP, POLICY & CAMPAIGNS	(i)	165,301.	36,615.	93.	8,687.	24,992.	235,688.	19,833.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) TETER, DARIUS VP OF PROGRAMS	(i)	190,543.	37,269.	93.	9,708.	23,277.	260,890.	22,167.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) AMBLER, JOHN S. VICE PRESIDENT OF STRATEGY	(i)	202,200.	0.	258.	10,172.	7,773.	220,403.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) DELANEY, MICHAEL HUMANITARIAN RESPONSE DIRECTOR	(i)	130,900.	0.	138.	6,851.	24,774.	162,663.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) HAYES, RACHEL SR DIRECTOR OF COMMUNICATIONS	(i)	140,973.	0.	258.	7,244.	23,377.	171,852.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MURIU, MUTHONI SR DIRECTOR OF REGIONAL PROGRAMS	(i)	140,240.	0.	138.	7,074.	7,529.	154,981.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7: ALL COMPENSATION DISCLOSED IN PART VII ON FORM 990 AND ON SCHEDULE J IS REPORTED ON A CALENDAR YEAR BASIS FOR THE CALENDAR YEAR ENDED 12/31/2012.

THE COMPENSATION COMMITTEE REGULARLY ENGAGES QUALIFIED INDEPENDENT CONSULTANTS TO ENSURE THAT TOTAL EXECUTIVE COMPENSATION IS BOTH COMPETITIVE AND REASONABLE AS COMPARED TO MARKET AND THAT IT CONFORMS TO IRS GUIDELINES. THE INDEPENDENT COMPENSATION CONSULTANTS THE COMMITTEE ENGAGED IN 2011 FOR THE EXECUTIVE COMPENSATION ANALYSES DETERMINED THAT COMPENSATION OF EXECUTIVES WAS REASONABLE AND COMPETITIVE AS COMPARED TO MARKET, AND WOULD NOT BE CONSIDERED EXCESSIVE UNDER INTERMEDIATE SANCTIONS PROVISIONS CONTAINED IN SECTION 4958 OF THE INTERNAL REVENUE CODE. THE COMMITTEE DECIDED TO TERMINATE THE EXECUTIVE BONUS PLAN AS OF NOVEMBER 1, 2010, AND THE INDEPENDENT CONSULTANTS SUGGESTED THE COMMITTEE CONSIDER A SUPPLEMENTAL BENEFIT IN ORDER TO BE MORE COMPETITIVE IN THE MARKET YET STILL WITHIN REASONABLENESS STANDARDS. ACCORDINGLY, IN 2012 THE COMPENSATION COMMITTEE ADDED A PROGRAM WHICH REQUIRES EXECUTIVES TO INVEST AFTER TAX INCOME INTO A LIMITED NUMBER OF BENEFIT PLANS. THE PROGRAM WAS MADE RETROACTIVE TO NOVEMBER 1, 2010.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

THEREFORE, DURING CALENDAR 2012 OXFAM INVESTED, ON BEHALF OF THE EXECUTIVES PARTICIPATING IN THE PROGRAM, BOTH THE RETROACTIVE AMOUNTS EARNED FROM NOVEMBER 2010 TO DECEMBER 2011 PLUS THE AMOUNTS EARNED IN CALENDAR 2012. THESE COMBINED AMOUNTS, COVERING TWENTY-SIX MONTHS (26), WERE REPORTED AS W-2 COMPENSATION FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2012 AND ARE INCLUDED AS REPORTABLE COMPENSATION IN PART VII. THEY ALSO APPEAR IN SCHEDULE J COLUMN B (II) (BONUS AND INCENTIVE COMPENSATION). THE AMOUNTS EARNED IN THE PROGRAM FROM NOVEMBER 2010 THROUGH DECEMBER 2011 CAN BE FOUND IN COLUMN F OF SCHEDULE J.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	202	1,316,018.	NET OF FEES
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 ► (MUTUAL FUNDS)	X	16	190,073.	NET OF FEES
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

0

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

	Yes	No
30a		X
31	X	
32a		X
33		

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

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

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

b If "Yes," describe in Part II.

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

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.

SCHEDULE M, PART I, COLUMN (B): THE NUMBER REPORTED ON SCHEDULE M, COLUMN B, REPRESENTS THE NUMBER OF CONTRIBUTIONS OF EACH ITEM.

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

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

FORM 990:

PRIOR YEAR REFERS TO THE 5 MONTH PERIOD ENDED MARCH 31, 2012. THE
FISCAL YEAR OF THE ORGANIZATION WAS CHANGED TO MARCH 31, EFFECTIVE
MARCH 31, 2012 WHICH IS THE REASON FOR THE SHORT PRIOR YEAR.

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

PUBLIC EDUCATION

POLICY & ADVOCACY

CAMPAIGNS

PROGRAM EVALUATION

OTHER DEVELOPMENT PROGRAMS

EXPENSES \$ 5,629,870. INCLUDING GRANTS OF \$ 130,144. REVENUE \$ 0.

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

CAMBODIA, EL SALVADOR, PERU, SUDAN,

ETHIOPIA, SENEGAL, MALI, SOUTH AFRICA,

HAITI, GUATEMALA

FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS PREPARED BY AN
INDEPENDENT ACCOUNTING FIRM WITH INFORMATION PROVIDED BY OA'S FINANCE
DEPARTMENT UNDER DIRECTION OF THE CHIEF FINANCIAL OFFICER. THE COMPLETED
RETURN IS REVIEWED BY OA'S CHIEF FINANCIAL OFFICER, AND SUBMITTED FOR
REVIEW TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. FORM 990 WAS
PROVIDED TO THE FULL BOARD BEFORE FILING.

Name of the organization

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS, OFFICER, AND KEY EMPLOYEES ARE EXPECTED TO REVEAL ANY POTENTIAL CONFLICT OF INTEREST. ALL BOARD MEMBERS, OFFICERS, AND KEY EMPLOYEES SIGN A STATEMENT ANNUALLY, VERIFYING THAT THEY HAVE REVIEWED OA'S CONFLICT OF INTEREST POLICY AND HAVE DISCLOSED ANY ACTIVITY WHICH CONTRAVENES THE POLICY. DURING THE COURSE OF DELIBERATIONS, IF A DIRECTOR FINDS THAT HE HAS A CONFLICT OF INTEREST ON A MATTER AT HAND, HE/SHE MUST DECLARE IT AND EXCUSE THEMSELVES FROM THE DELIBERATIONS TO ALLOW THE OTHER DIRECTORS PRESENT TO DETERMINE THE BEST COURSE OF ACTION.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR OXFAM AMERICA EXECUTIVES IS SET BY A COMPENSATION COMMITTEE COMPRISED OF INDEPENDENT MEMBERS OF THE BOARD OF DIRECTORS. THE COMPENSATION COMMITTEE REGULARLY ENGAGES QUALIFIED INDEPENDENT CONSULTANTS TO ENSURE THAT TOTAL EXECUTIVE COMPENSATION IS BOTH COMPETITIVE AND REASONABLE AS COMPARED TO MARKET AND THAT IT CONFORMS TO IRS GUIDELINES. THE INDEPENDENT COMPENSATION CONSULTANTS THE COMMITTEE ENGAGED IN 2011 FOR THE EXECUTIVE COMPENSATION ANALYSES DETERMINED THAT COMPENSATION OF EXECUTIVES WAS REASONABLE AND COMPETITIVE AS COMPARED TO MARKET, AND WOULD NOT BE CONSIDERED EXCESSIVE UNDER INTERMEDIATE SANCTIONS PROVISIONS CONTAINED IN SECTION 4958 OF THE INTERNAL REVENUE CODE. THE COMMITTEE DECIDED TO TERMINATE THE EXECUTIVE BONUS PLAN AS OF NOVEMBER 1, 2010, AND THE INDEPENDENT CONSULTANTS SUGGESTED THE COMMITTEE CONSIDER A SUPPLEMENTAL BENEFIT IN ORDER TO BE MORE COMPETITIVE IN THE MARKET YET STILL WITHIN REASONABLENESS STANDARDS. ACCORDINGLY, IN 2012 THE COMPENSATION COMMITTEE ADDED A PROGRAM WHICH REQUIRES EXECUTIVES TO INVEST AFTER TAX INCOME INTO A LIMITED NUMBER OF BENEFIT PLANS. THE PROGRAM WAS MADE RETROACTIVE TO NOVEMBER 1, 2010.

Name of the organization	Employer identification number
OXFAM-AMERICA, INC.	23-7069110

THEREFORE, DURING CALENDAR 2012 OXFAM INVESTED, ON BEHALF OF THE EXECUTIVES PARTICIPATING IN THE PROGRAM, BOTH THE RETROACTIVE AMOUNTS EARNED FROM NOVEMBER 2010 TO DECEMBER 2011 PLUS THE AMOUNTS EARNED IN CALENDAR 2012. THESE COMBINED AMOUNTS, COVERING TWENTY-SIX MONTHS (26), WERE REPORTED AS W-2 COMPENSATION FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2012 AND ARE INCLUDED AS REPORTABLE COMPENSATION IN PART VII. THEY ALSO APPEAR IN SCHEDULE J COLUMN B (II) (BONUS AND INCENTIVE COMPENSATION). THE AMOUNTS EARNED IN THE PROGRAM FROM NOVEMBER 2010 THROUGH DECEMBER 2011 CAN BE FOUND IN COLUMN F OF SCHEDULE J.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: MA, AL, AK, AZ, AR, CA, CT, DE, FL, GA, HI, ID, IL, IA, KS, KY, LA, ME, MD, MI, MN, MS, MO, MT, NE NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SD, TN, TX, UT, VT, VA, WA, DC, WV, WI, WY

FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS ARE AVAILABLE ON THE OXFAM AMERICA (OA) WEBSITE AT [HTTP://WWW.OXFAMAMERICA.ORG](http://www.oxfamamerica.org) IN THE "WHO WE ARE" SECTION OF THE SITE. FINANCIAL INFORMATION IS ALSO AVAILABLE AT [WWW.GUIDESTAR.ORG](http://www.guidestar.org) AND [WWW.CHARITYNAVIGATOR.ORG](http://www.charitynavigator.org). OA WILL PROVIDE COPIES OF ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY UPON REQUEST.

FORM 990, SCHEDULE L, PART III:

THE PRESIDENT OF OXFAM AMERICA, INC. (OA) AND ONE OTHER MEMBER OF THE OA BOARD OF DIRECTORS ARE MEMBERS OF THE BOARD OF DIRECTORS OF OXFAM INTERNATIONAL. OXFAM INTERNATIONAL'S BOARD MEMBERS CONSISTED OF REPRESENTATIVES FROM THE VARIOUS OXFAM ORGANIZATIONS THROUGHOUT THE WORLD. THIS RELATIONSHIP ENSURES THAT THE MISSION OF OXFAM IS CLEAR AND CONSISTENT AMONG ITS MEMBER ORGANIZATIONS. IN THE 12 MONTHS ENDED MARCH 31, 2013, OA MADE PAYMENTS OF \$9,039,000 TO OXFAM INTERNATIONAL

Name of the organization

OXFAM-AMERICA, INC.

Employer identification number

23-7069110

ET ALL, AND RECEIVED \$956,000 FROM OXFAM INTERNATIONAL ET ALL.

IN AN AGREEMENT DATED JULY 21, 2006, OXFAM PROVIDED GUARANTEES OF \$1,000,000 FOR A LOAN FROM A BANK TO MICRO CREDIT ENTERPRISES (HEREIN "MCE"), A 501(C)(3) IRS NON-PROFIT ORGANIZATION, AND \$1,000,000 FOR LOANS MADE BY MCE TO MICROCREDIT ORGANIZATIONS IN DEVELOPING COUNTRIES. MCE'S PURPOSE IS TO LEVERAGE PRIVATE CAPITAL TO HELP FINANCE MICRO-BUSINESSES OF IMPOVERISHED ENTREPRENEURS IN THE DEVELOPING WORLD. IN THE EVENT OF A DEFAULT, THE ALLOCATION OF LOSSES IS CALCULATED ON A PRO RATA BASIS AMONG ALL GUARANTORS. IN 2008, OXFAM RECORDED \$100,000 IN ACCRUED GRANT EXPENSE TO RECOGNIZE THE FAIR VALUE OF THE GUARANTY. A DRAW OF \$7,600 WAS MADE IN THE FISCAL YEAR ENDED OCTOBER 31ST, 2010. OXFAM TERMINATED THE GUARANTEE EFFECTIVE APRIL 22, 2012

THE FORMER CHAIRPERSON OF THE OA BOARD AND ANOTHER MEMBER OF THE OA BOARD ARE GUARANTORS OF MCE.

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047

2012
Open to Public
Inspection

Name of the organization

OXFAM-AMERICA, INC.

Employer identification number
23-7069110

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
OXFAM AMERICA REAL ESTATE, LLC - 06-1509938 226 CAUSEWAY STREET, 5TH FLOOR BOSTON, MA 02114-2206	RECEIVE AND HOLD DONATED REAL ESTATE	MASSACHUSETTS	0.		N/A

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
OXFAM AMERICA ADVOCACY FUND - 20-1971032 226 CAUSEWAY STREET, 5TH FLOOR BOSTON, MA 02114-2206	LOBBYING	MASSACHUSETTS	501(C)(4)		N/A	X	

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

Schedule R (Form 990) 2012

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.)

[illegible]

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.)

[illegible]

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) OXFAM AMERICA ADVOCACY FUND	O	93,666.	FAIR VALUE
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII Supplemental Information

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