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 private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Public Inspection

A For the 2018 calendar year, or tax year beginning and ending C Name of organization D Employer identification number B Check if applicable INTERACTION THE AMERICAN COUNCIL FOR Address change VOLUNTARY INTERNATIONAL ACTION Name 13-3287064 Doing business as innual return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 1400 16TH STREET NW 1210 202-667-8227 termin-ated 6,483,673. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ WASHINGTON, DC 20036 H(a) is this a group return Applica-tion pending F Name and address of principal officer. SAMUEL WORTHINGTON Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Yes No 1 Tax-exempt status X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list (see instructions) J Website: WWW.INTERACTION.ORG H(c) Group exemption number K Form of organization: X Corporation Association Other > Year of formation, 1984 M State of legal domicile; NY Part I Summary Briefly describe the organization's mission or most significant activities **BLIMINATE EXTREME POVERTY AND** Governance VULNERABILITY, STRENGTHEN HUMAN RIGHTS AND CITIZEN PARTICIPATION. if the organization discontinued its operations or disposed of more than 25% of its net assets. 29 Number of voting members of the governing body (Part VI, line 1a) 29 Number of independent voting members of the governing body (Part VI, line 1b) 60 Total number of individuals employed in calendar year 2018 (Part //, line 2a) 5 47 6 Total number of volunteers (estimate if necessary) 6 39,957. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line[38[[0]]] 27,998. Prior Year **Current Year** O 3,008,292. Contributions and grants (Part VIII, line 1h) 6,433,053. Š DEC 1 7 2020 3,413,327. 3,104,683. Program service revenue (Part VIII, line 2g) F3S 59,000. 128,761. Investment income (Part VIII, column (A), lines 3, 4, and 17 d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 11e) 74,023. 43,273. 9,979,403. 6,285,009. Total revenue - add lines 8 through 11 (must equal Pa  $\overline{40}0,617.$ Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Ω. Benefits paid to or for members (Part IX, column (A), line 4) 5,819,585. 5,075,382. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 8.315. b Total fundraising expenses (Part IX, column (D), line 25) 2,705,727. 3,512,997. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,733,199. 7,781,109. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,496,100.246,204. Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 6,634,120. 6,493,307. 20 Total assets (Part X, line 16) 2,361,904. 3,927,438. Total liabilities (Part X, line 26) 4,272,216. 2,565,869. Net assets or fund balances Subtract line 21 from line 20 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 Signature of office Sign SAMUEL WORTHINGTON, CHIEF EXECUTIVE OFFICER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature YUNG-HEE GALLINARO 06/29/20 P00035293 Paid Firm's name CLIFTONLARSONALLEN (LPV 41-0746749 Preparer Firm's EIN Firm's address 901 N. GLEBE ROAD, SUITE 200 **Use Only** Phone no 571-227-9500 ARLINGTON, VA 22203 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

13-3287064 Page 2 VOLUNTARY INTERNATIONAL ACTION Part III | Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission TO BE A LEADER IN THE GLOBAL QUEST TO ELIMINATE EXTREME POVERTY AND VULNERABILITY, STRENGTHEN HUMAN RIGHTS AND CITIZEN PARTICIPATION, PROMOTE PEACE, SAFEGUARD A SUSTAINABLE PLANET, AND ENSURE DIGNITY FOR ALL PEOPLE Did the organization undertake any significant program services during the year which were not listed on the Yes X No prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O 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 0.) 4,883,447. including grants of \$ \_ 0 . ) (Revenue \$ \_ ) (Expenses \$ FEDERAL AND NON-FEDERAL AWARDS: AWARDS FROM THE FEDERAL GOVERNMENT, FOUNDATIONS, PRIVATE SECTOR COMPANIES, AND OTHER PARTNERS SUPPORT INTERACTION'S WORK WITH ITS MEMBERS IN SEVERAL AREAS: HUMANITARIAN ACTION - SAVING LIVES ALLEVIATING SUFFERING, AND MAINTAINING HUMAN DIGNITY WITHOUT REGARD FOR RACE, ETHNICITY, RELIGION OR POLITICAL AFFILIATION. ASPECTS OF THIS WORK INCLUDE: CURRENT CRISIS; HUMANITARIAN POLICY; HUMANITARIAN PRACTICE; NGO SECURITY; PREVENTION OF SEXUAL EXPLOITATION AND ABUSE; PROTECTION AND SHELTER FOR THOSE AFFECTED BY HUMANITARIAN CRISIS; THE TRANSITION FROM RELIEF. 2,148,790. including grants of \$ 0 . ) (Revenue \$ \_ 3,104,683. 4b ) (Expenses \$ MEMBER SERVICES: INTERACTION HAS MORE THAN 180 MEMBER ORGANIZATIONS WORKING IN EVERY DEVELOPING COUNTRY. MEMBERS ARE FAITH-BASED AND SECULAR, LARGE AND SMALL, WITH A FOCUS ON THE WORLD'S MOST POOR AND VULNERABLE POPULATIONS. INTERACTION SERVES AS THE LARGEST ALLIANCE OF U.S. PRIVATE VOLUNTARY ORGANIZATIONS AND PARTNERS. MEMBERS SHARE COMMON COMMITMENT THAT DEFINE THEIR WORK, AND INTERACTION WORKS CLOSELY WITH ITS MEMBERS SOMETIMES INDIVIDUALLY, SOMETIMES IN SMALL GROUPS, AND SOMETIMES IN LARGE GROUPS. 17,012. including grants of \$ 0.) ) (Expenses \$ LEGISLATIVE ACTIVITIES: LEGISLATIVE ACTIVITIES: IN ADDITION TO GENERAL ADVOCACY AS DESCRIBED ABOVE, INTERACTION ENGAGES IN LOBBYING FOR PARTICULAR LEGISLATION ON A LIMITED SCALE. THIS REPRESENTS TIME SPENT ON CAPITOL HILL MEETING WITH MEMBERS OF CONGRESS, OR MEMBERS OF THEIR STAFF, TO DISCUSS PARTICULAR PIECES OF LEGISLATION. THESE DISCUSSIONS MAY FOCUS ON THE LANGUAGE OF POTENTIAL LEGISLATION WHEN IT IS IN THE DRAFTING STAGE; THEY MAY ALSO FOCUS ON LEGISLATION THAT HAS BEEN PROPOSED IN ONE OF THE HOUSES OF CONGRESS. 4d Other program services (Describe in Schedule O ) 7,049,249. Total program service expenses Form 990 (2018)

# 13-3287064 Page 3

## INTERACTION THE AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION

Form 990 (2018) VOLUNTARY INTO Checklist of Required Schedules

•				
4	is the organization described in section 501(a)(2) or 4047(a)(1) (other than a private foundation)?	٠	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	х	
2	If "Yes," complete Schedule A  Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	- <del>-</del> -		
_	public office? If "Yes," complete Schedule C, Part I	3		Х
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	4	Х	
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	5		Х
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	6_		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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> X</u>
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	9		<u> </u>
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	10		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11c		Х
ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
6	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1.0	1	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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	14b		<u>x</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			3.5
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	'	1	<b>T.F</b>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		Λ_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
20-	complete Schedule G, Part III	19 20a	_	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		-23
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
- '	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х
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# 13-3287064

Page 4

INTERACTION THE AMERICAN COUNCIL FOR Form 990 (2018) VOLUNTARY INTERNAT
Part V Checklist of Required Schedules (continued) VOLUNTARY INTERNATIONAL ACTION

•			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		,	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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	Х	
24 a	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	ł	·	
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ļ	}	
	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		<u> </u>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	2 <u>5</u> b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			İ
	former officers, directors, trustees, key employees highest compensated employees, or disqualified persons? #"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			i
	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)			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a_	11	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		┢ᢚ
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-	'	x
00	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		<del>-^</del> -
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		х
31	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
JZ	Schedule N. Part II	32		х
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	-	Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	<u> </u>		
٠.	Part V, line 1	34	•	Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		
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?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pa	Statements Regarding Other IRS Filings and Tax Compliance	_		
	Check if Schedule O contains a response or note to any line in this Part V		١	
		لــــــا	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 38			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		Į

Form **990** (2018)

ı aı	Statements Regarding Other Into Filings and Tax Compliance (continued)			
•			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1	
	filed for the calendar year ending with or within the year covered by this return  2a 60		- <del>-</del>	لـــــا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	ļ <sub>1</sub>
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		¥,	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<del> </del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4		х
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		
Þ	If "Yes," enter the name of the foreign country			
e-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	5a		X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
		5c		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	- 30		
6a	any contributions that were not tax deductible as charitable contributions?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
ь	were not tax deductible?	6b	,	
7	Organizations that may receive deductible contributions under section 170(c).			1
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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
•	to file Form 8282?	7c		Χ_
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
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. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-	<u> </u>	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	i _	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	1 7	ļ
10	Section 501(c)(7) organizations. Enter		' '	
а	Initiation fees and capital contributions included on Part VIII, line 12	,	).	:
b	Gross receipts included on Form 990, Part VIII, line 12, for public use of club facilities		ļ.* -	
11	Section 501(c)(12) organizations. Enter		ľ	]
а	Gross income from members or shareholders	ļ		'
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	120	R	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes." enter the amount of tax-exempt interest received or accrued during the year	12a		
	, , , , , , , , , , , , , , , , , , , ,			;
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	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	100		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
D	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	ļ <u>.</u>	Х
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	<u> </u>	X
	If "Yes," complete Form 4720, Schedule O	L		
		Fora	ı 990	(2018)

13-3287064 Page 6

Form 990 (2018)

VOLUNTARY INTERNATIONAL ACTION \_\_\_\_

	tion A. Governing Body and Management				X		
	tion 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	29			<u> </u>		
	If there are material differences in voting rights among members of the governing body, or if the governing			1			
	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	29					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			نا	i		
	officer, director trustee, or key employee?	l	2	1	X		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			, —	1		
	of officers, directors, or trustees, or key employees to a management company or other person?	Į	3	1	Х		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х		
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?	Į	7a	Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	ĺ					
	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						
а	The governing body?		8a	X	Ĺ		
b	Each committee with authority to act on behalf of the governing body?		8b	Х			
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	1	9	·	X		
<u>ec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			`	, –		
				Yes	N		
0a	Did the organization have local chapters, branches, or affiliates?	1	10a		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	ĺ			ĺ		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	ļ	10b	Х	L.		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	Ь		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	-	12b	Х			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	ın Schedule O how this was done	}	12c	X	_		
3	Did the organization have a written whistleblower policy?	}	13	X	<u> </u>		
4	Did the organization have a written document retention and destruction policy?	- 1	14	<u> X</u>	⊢		
5	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?						
	The organization's CEO, Executive Director, or top management official	}	<u>15a</u>	,X	_		
b	Other officers or key employees of the organization	ŀ	15b	X	-		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			1			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	-			<del>-</del>		
	taxable entity during the year?	ŀ	16a		Х		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	ĺ			ĺ		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements? tion C. Disclosure		16b	<u>.                                    </u>	<u> </u>		
7	List the states with which a copy of this Form 990 is required to be filed NY	-1(0)+	I. A		-1-		
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501) for public respective. Indicate how you made those available. Check all that apply	ا کاری)زن	orny) a	avallat ,	лe		
	for public inspection. Indicate how you made these available. Check all that apply.  X Own website. Another's website. X Upon request. Other (explain in Schedule O).			•			
	(0.00.00.00.00.00.00.00.00.00.00.00.00.0	004		اد			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy	, and f	manc	ıdı			
9				• *			
<b>∌</b> O	statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records			• •			

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

Check if Schedule O contains a response or note to any line in this Part VII

X

### 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 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

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an						( <b>D</b> )  Reportable  compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director				Highest compensated of endinger	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) CAROLYN MILES	5.00									·
CHAIR		X		Х				0.	0.	0.
(2) SHAWNA BADER-BLAU	5.00					Г				
VICE CHAIR		Х		X		<u> </u>		0.	0.	0.
(3) NANCY WILSON	5.00									_
TREASURER		X		Х			<u> </u>	0.	0.	0.
(4) WILLIAM M. ABRAMS	5.00								_	
DIRECTOR		X				$oxed{oxed}$		0.	0.	0,
(5) AMY COUGHENOUR BETANCOURT	5.00							_		
DIRECTOR		X				<u> </u>		0.	0.	0.
(6) J RON BYLER	5.00	ļ								
DIRECTOR		Х	_			┖		0.	0.	0.
(7) DIANNE CALVI	5.00									
DIRECTOR		X	_			┡	<u> </u>	0.	0.	0.
(8) STEVE DAVIS	5.00									_
DIRECTOR		X			_	┡	ļ	0.	0.	0.
(9) THOMAS DENTE	5.00						ĺ		_	_
DIRECTOR		X				⊢	<u> </u>	0.	0.	0.
(10) JONATHAN DUFFY	5.00	,,						0.	0.	0.
DIRECTOR	- F 00	X	<b>-</b>			├	-	U •	0.	
(11) ANNE LYNAM GODDARD DIRECTOR	5.00	x						0.	0.	0.
(12) JOB C. HEINTZ	5.00	^			-	$\vdash$	$\vdash$	0.	- 0.	
DIRECTOR	3.00	X						0.	0.	0.
(13) CARRIE HESSLER-RADELET	5.00	^	-	_	-	$\vdash$	-		•	
DIRECTOR	3.00	X				ŀ		0.	0.	0.
(14) MOHAMED S. IDRIS	5.00	-			┢	$\vdash$	$\vdash$	•		
DIRECTOR		x						0.	٥.	΄ ο.
(15) W. DOUGLAS JACKSON, PHD, JD	5.00	<del>                                     </del>					T	1		
DIRECTOR		x						0.	0.	0.
(16) CAROL JENKINS	5.00	<u> </u>				T				-
DIRECTOR		x						0.	0.	0.
(17) ABBY MAXMAN	5.00									
DIRECTOR		X			İ			0.	0.	0.

832007 12-31-18

Form 990 (2018)

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orm 990 (2018)	VOLUNTARY	INTER	NATIONAL	A

Form 990 (2018) VOLUNTAR	Y INTERN	IAI	'I0	NA	L	AC	TI	ON	13-3287	064 Page 8
Part VII Section A Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	1 Hig	ghes	st Co	ompensated Employee	es (continued)	
(A)	(B)			((	C)			(D)	(E)	/ (F)
Name and title	Average hours per week	box	not ci unles	ss per	more son i	than o s both r/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highesi compensated emplovee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) ESKINDER NEGASH	5,00						İ		_	
DIRECTOR	<del> </del>	X				_	Ļ	0.	0.	0.
(19) MICHELLE NUNN	5,00									
DIRECTOR	<u> </u>	Х			<u> </u>		<u> </u>	0.	0.	0.
(20) MICHAEL NYENHUIS	5.00	ļ								_
DIRECTOR		Х			<u> </u>		<u> </u>	0.	0.	0.
(21) LOYCE PACE	5,00									_
DIRECTOR		Х		_			<u> </u>	0.	_ 0.	0.
(22) SARINA PRABASI	5.00							_		
DIRECTOR		Х				L.,	_	0.	0.	0.
(23) DOUGLAS RUTZEN	5.00									
DIRECTOR		X		Щ		L		0.	0.	0.
(24) KATHY SPAHN	5.00									_
DIRECTOR	ļ—	X					L	0.	0.	0.
(25) SUSAN SYGALL	5.00							ĺ		
DIRECTOR		X						0.	0.	0.
(26) ANDREA TAMBURINI	5.00									
DIRECTOR		X				<u> </u>	<u> </u>	0.	0.	0.
1b Sub-total					_			0.	0.	0.
c Total from continuation sheets to Part VI	l, Section A						▶	1,507,693.	0.	80,736.
d Total (add lines 1b and 1c)							▶	1,507,693.	0.	80,736.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	ceived more than \$100.	000 of reportable	

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

- 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
- 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
- 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

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
ANSWERWARE, 200 N GLEBE ROAD, SUITE 1050,		
ARLINGTON, VA 22205	IT SUPPORT	137,967.
COMPROBASE, INC.		
21351 GENTRY DRIVE, STERLING, VA 20166	BUSINESS ANALYST	112,900.
2 Total number of independent contractors (including but not limited to those lis	ted above) who received more than	

\$100,000 of compensation from the organization SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2018)

Yes No

Form 990 VOLUNTARY									13-328	7064
Part VII Section A. Officers, Directors, Tru										. • •
, Cookers, a concert, Bureaters, 112	(A) (B)							(D)	(E)	(F)
Name and title	Average			(C Pos				Reportable	Reportable	Estimated
Tumo uno uno	hours	(cł	(check all that app				compensation	compensation	amount of	
	per	Ì						from	from related	other
	week					ovee		the	organizations	compensation
	(list any	icclo				етрі		organization	(W-2/1099-MISC)	from the
	hours for	D to e	tee			sated		(W-2/1099-MISC)		organization and related
	related organizations	ruste	ll trus		yee.	шреп				organizations
	below	Individual trustee or director	Institutional trustee	<u>.</u>	Key employee	Highest compensated emplovee	-a			3
	line)	Indiv	Instit	Officer	Key	Hg.	Former			
(27) TOSCA BRUNO-VAN VIJFEIJKEN	5.00									
DIRECTOR		X			<u> </u>			0.	0.	0.
(28) ALEEM WALJI	5.00									
DIRECTOR		X			<u> </u>	ļ		0.	0.	0.
(29) JEFF WHISENANT	5.00	,,						_ `	<u>,</u>	
DIRECTOR (200)	E 00	Х	<u> </u>	H	_	$\vdash$		0.	0.	0.
(30) BRIAN CUTE	5.00	х						0.	0.	. 0.
DIRECTOR UNTIL 06/2018 (31) ANWAR KHAN	5.00	^		<del> </del>				0.	<u> </u>	<u></u>
DIRECTOR UNTIL 06/2018	3.00	х						0.	0.	O.
(32) DONALD STEINBERG	5.00	<u> </u>			$\vdash$	$\vdash$		•		,
DIRECTOR UNTIL 06/2018	3.00	x						0.	0.	0.
(33) SAMUEL WORTHINGTON	40.00		<b></b>							
CHIEF EXECUTIVE OFFICER				х				342,111.	0.	<u>24,437.</u>
(34) PETER HENDY	40.00									
VP, FINANCE & ADM			L.	Х				134,404.	0.	1,367.
(35) PATRICIA MCILREAVY	40.00									
VP, HUMANITARIAN POLICY & PRACTICE		L		X		L_		185,124.	0.	13,194.
(36) CAROLYN AEBY-HEALEY	40.00							450 405	0	C 017
VP, MEMBERSHIP & PUBLIC ENGAGEMENT	40.00			X	_			152,495.	0.	6,217.
(37) JULIEN SCHOPP	40.00					\ <del>,</del>		140 226	0.	10,430.
HUMANITARIAN POLICY & PRACTICE	40 00	<u> </u>	-	-		Х		149,336.		10,430.
(38) KATE PHILLIPS - BARRASSO DIRECTOR, HUMANITARIAN POLICY	40.00	-				х		133,678.	0.	0.
(39) JENNY MCAVOY	40.00	-	$\vdash$	$\vdash$	$\vdash$	Δ.		133,070.		
DIRECTOR, HUMANITARIAN PROTECTION	40.00	1				х		139,184.	0.	9,755.
(40) TRAVIS ADKINS	40.00		<u> </u>		$\vdash$	-	<b></b>	233,2320		
DIRECTOR GLOBAL GOVERNANCE & CIVIC	2000	1				х	ĺ	136,561.	0.	5,829.
(41) MOHAMAD HILMI	40.00									•
SENIOR COORDINATOR & TECHNICAL SPECI	,,,,,,,					Х		134,800.	0.	9,507.
				<u> </u>		_	_			
		Į					ŀ			<i>'</i>
		▙	├	<del> </del>	_	<u> </u>	-			
		$\mathbf{I}$								
		$\vdash$	┼	$\vdash$		$\vdash$	$\vdash$			
	-	1						1		
	-		$t^-$	t —			H			
		1						l		
										_ <u>.</u>
Total to Part VII, Section A, line 1c								1,507,693.		80,736.

# INTERACTION THE AMERICAN COUNCIL FOR Form 990 (2018) VOLUNTARY INTERNATIONAL ACTION Part VIII Statement of Revenue

	,	Check if Schedule O contains a re-	sponse (	or note to any lin		VIII			
				entrages abliq	(A) Total reve	,	(B) 'Related or exempt function revenue	(C) · Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
S	.1 a	Federated campaigns	1a	7		14.33 4344 / 14.33 4344 /	VOYENS AND	Y W. And Shield Conference	
ant	-	Membership dues	1b						
Grai		Fundraising events							
fts,		<u>.</u>	1c	···					
Gift Ilar		Related organizations	1d	152,910.		14 July 10 1			
ns,	e	Government grants (contributions)	1e 4 ,	132,910.					
Contributions and Other Sir	, f	All other contributions, gifts, grants, and	`	055 300					
ngi.	•	similar amounts not included above	<u>1f</u>	<u>855,382.</u>					
d C	ç	Noncash contributions included in lines 1a-1f \$	٠.						
<u>2</u> g	<u> </u>	Total. Add lines 1a-1f		<u> </u>	3,008,	292.		ACCEPTANT OF THE PROPERTY OF T	\$255 0"E325350" 124 \$255 0"E325350" 124
	,			Búsiness Code					<u> </u>
e :	2 a	MEMBERSHIP DUES					2,674,525.		150 215
ž e	t		·	900099	390,		239,886.	,	150,315.
Se		NGO JOB BOARD	<u> </u>	541800	39,	957.		39′, 957`.	· · · · · · · · · · · · · · · · · · ·
Program Service Revenue	, c	1 <u>*                                     </u>							. ;
60.	e	•					-		1)
<u>a</u>	f	All other program service revenue			2 4 2 4	500	activity of the second	DOMEST STEWNS A MARKOTATURATE	in do 122 à bassa de la constitución
	9	Total. Add lines 2a-2f			3,104,	683.	XCHPSSSS	nzaczeneck	*# 15 TO 15
	, 3	Investment income (including dividend	s, intere	st, and				, ,	44.010
		other similar amounts)	-	.▶	44,	819.			44, 819.
	4	Income from investment of tax-exempt	bond p	roceeds	<u></u>				
	5,	Royalties		<u> </u>	colone magazini, ilima, sopila, ilitate	neneka wada	TOURNAMES OF A STREET OF THE S	**************************************	ANTICOTO L'ORGANICA MARIA
		( <u>)</u> F	Real	(ii) Personal					
	6 a	Gross rents							
	t	· · · · · · · · · · · · · · · · · · ·		,					20 Avge
	٠ ،	Rental income or (loss)			74882'11				
		Net rental income or (loss)		, <u> </u>	08.08****\$0\$67.7*** o	18856, 2 5956	national managed of the son the states	43022.487. 215 c68883.79750°	Selendreiner Ausbergereit
	7 a		urities	(ii) Other					
		assets other than inventory 282,	606.				8 K. J. J. S. S. S. S. S. S. S. S. S. S. S. S. S.		
	. t	Less cost or other basis							
1		and sales expenses 198,							
		,	942.	- 1				<u>1 </u>	02 042
		Net gain or (loss)	•	<b>_</b> _	83,	942.	925e201 A 8968860 8151 178836	TOWNSHIELD TO SERVICE STREET	83,942.
<u>a</u>	8 8	Gross income from fundraising events	(not						
evenue			of						
ě	1,	contributions reported on line 1c) See							
ē		Part IV, line 18	а	<i>:</i>					
Other		Less direct expenses	b	<u> </u>					
		Net income or (loss) from fundraising e			45573325577	****************************	94194124107 PARTIANTER (	North Co. Marie Co.	Para de Cara de Frances de Cara de Cara de Cara de Cara de Cara de Cara de Cara de Cara de Cara de Cara de Car Cara de Cara de
•	9 a	Gross income from gaming activities							
		Part IV, line 19	a						
	٠	Less direct expenses	b		3.50	37.0x 100°			
		Net income or (loss) from gaming activ	ities ,	<b>_</b> _	SPECIAL CONTRACTOR OF THE	35.833310.10.1	PACABAGANANA 16284		
,	10 a	Gross sales of inventory, less returns	•	•					
` •		and allowances	a b						
	i	Less cost of goods sold		erakan k					
	<del>.                                      </del>	Net income or (loss) from sales of inve	ntory	Punim O-	法等な性的心証的	(14.04SF		TISTO, XXXXIII.A	
	<b>-</b> -	Miscellaneous Revenue  MISCELLANEOUS		Business Code 900099	4 3	273.		<u> </u>	43,273.
		· · · · · · · · · · · · · · · · · · ·		700033	, =,,	<i>i i i i</i>	<del>· ·-</del>	·	13,273.
		, <u>, , , , , , , , , , , , , , , , , , </u>			,				10
	'	d All other revenue	•	·					1 4 4
	'	e Total. Add lines 11a-11d		<u> </u>	43	273.	THE STREET	<b>145/0</b> /1/2/1985/07/2	
	12	Total revenue See instructions					2,914,411.	39,957.	322,349.
92200	9 12-3				<u> –</u>		<u> </u>	<u>,,,-</u>	Form <b>990</b> (2018)

	Check if Schedule O contains a respon			100	, ,
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ). Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals See Part IV line 22			インスの基本での「大学」 とくない インスの基本では、多数学者が必要など	
3	Grants and other assistance to foreign	•			
	organizations, foreign governments, and foreign		ļ		
٠,	individuals See Part IV, lines 15 and 16 Benefits paid to or for members	<del> </del>			
, 4 5	Compensation of current officers, directors,			35. 194 St. 1. 1 to 40 5 5 5 50 67	" " " " " " " " " " " " " " " " " " "
9	trustees, and key employees	859;347.	712,878.	145,484.	, 985
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	3,297,196.	2,717,754.	575,782.	3,660
8		•			
	'section 401(k) and 403(b) employer contributions)	155,079.	132,224.	22,654.	201
9	Other employee benefits	464,084.	393,442.	70,054.	, 588
10	Payroll taxes	299,676.	254,027.	45,269.	: 380
11	· Fees for services (non-employees)				
a	Management				
t	Legal	11,270.	368.	10,902.	1,
c	Accounting	72,999.	8,946.	64,053.	'n
c	l Lobbying `		4 Mas. 2005 1. November		· · · · · · · · · · · · · · · · · · ·
e			14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		· · · · · · · · · · · · · · · · · · ·
f	5	13,349.		13,349.	
ē	-	200 (52	366 505	24 060	
•	column (A) amount, list line 11g expenses on Sch O)	390,653.	366,585.	24,068.	
12	Advertising and promotion	221 442	125,007.	. 06 200	38
13	Office expenses	221,443. 178,846.	125,007.	96,398. 178,846.	- 30
14	Information technology	1/0,040.		170,040.	<del></del>
15 · 16	Royalties	770,918.	39,800.	731,118.	· ·
17	Occupancy Travel	268,493.	267,241.	1,252.	
18	Payments of travel or entertainment expenses	200,133.	2017224		
,,,	for any federal, state, or local public officials		٠	•	(,
19	Conferences, conventions, and meetings	423,439.	403,772.	19,667.	1,
20	Interest		· · · · · · · · · · · · · · · · · · ·		
21	Payments to affiliates		· · · · · · · · · · · · · · · · · · ·		),
22	Depreciation, depletion, and amortization	156,939.	1	156,939.	
23	Insurance	67,915.	2,104.	65,811.	
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 0)	FO OF T	E1 ECE	O V V	O V O
a	MENUDOD A DAY ALERT D	53,3 <u>57</u> . 17,142.	51,565.	844. 17,142.	948.
b	EDUCATION AND THEM	4,587.	3,978.	609.	0
c	ALLOCAMION OF MAC TIPET	4,307.	1,554,411.	-1,555,571.	1,160
e		54,377.	15,147.	38,875.	355
	Total functional expenses Add lines 1 through 24e	7,781,109.	7,049,249.	723,545.	8,315
<u>25</u> 26	Joint costs Complete this line only if the organization		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 23,3=3.	3,515
_0	reported in column (B) joint costs from a combined				1
	educational campaign and fundraising solicitation	_			, t <sub>h</sub>
	Check here If following SOP 98-2 (ASC 958-720)		•		1

Form 990 (2018)
Part X Balance Sheet

Pa	<u>``````````</u>	Balance Sneet			<u> </u>
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B); <sup>†</sup> End of year
	1	Cash - non-interest-bearing	1,131,098.	1	1,842,100.
	2	Savings and temporary cash investments	851,457.	12	857:, 436.
	3	Pledges and grants receivable, net	1,617,234.	3	970,527.
	4	Accounts receivable, net	11,880.	4	6,519.
	5	Loans and other receivables from current and former officers, directors,		1000 A	
		trustees, key employees, and highest compensated employees. Complete		26 ( ) ( )	
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under		Sec	
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		1	
y)	ĺ	employees' beneficiary organizations (see instr). Complete Part II of Sch L	,	6	
Assets	7	Notes and loans receivable, net		7	الَّه
As	8.	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	187,542.	9	175,134.
	10a	Land, buildings, and equipment cost or other			
	]	basis Complete Part VI of Schedule D 10a 2,274,000.			
	Ь	Less accumulated depreciation 10b 1,090,515.	1,272,940.	10c	1,183,485.
	11	Investments - publicly traded securities	1,486,659.	11	1,382,796.
	-12	Investments - other securities' See Part IV, line 11	, ,	12_	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	75,310.	15	75,310.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,634,120.	16	6,493,307.
	17	Accounts payable and accrued expenses	529,948.	17	239,670.
	18	Grants payable		18	ļ
	19	Deferred revenue		19	il
	20	Tax-exempt bond liabilities		20	2 1
	21	Escrow or custodial account liability Complete Part IV of Schedule D	The state of the s	21	line constitution of the second state of the s
es	22	Loans and other payables to current and former officers, directors, trustees,			
Ħ,	ļ	key employees, highest compensated employees, and disqualified persons	<u> </u>	22	
Liabilities		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	<del> </del>
	25	Other liabilities (including federal income tax, payables to related third			h.
		parties, and other liabilities not included on lines 17-24) Complete Part X of	1,831,956.	O.E.	3 687 768
	26	Schedule D  Total liabilities. Add lines 17 through 25	2,361,904.	25 26	3,687,768.
	20	Organizations that follow SFAS 117 (ASC 958), check here X and			NO SECURITION OF
		complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets	1,469,720.	27	1,108,270.
lan	28	Temporarily restricted net assets	2,802,496.	28	1,457,599.
, B	29	Permanently restricted net assets	, -=,,	29	· ·
ŭ.		Organizations that do not follow SFAS 117 (ASC 958), check here		200	<b>新教育</b>
Y.		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	AND ASSESSMENT OF THE PROPERTY	30	- I-
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ĭ A	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	4,272,216.	33	2,565,869.
	34	Total liabilities and net assets/fund balances	6,634,120.	34	6,493,307.
_			-		Form 990 (2018)

Form **990** (2018)

Form 990 (2018)

+orm	990 (2018) VOLUNTARY INTERNATIONAL ACTION		3207	00 =	Га	<u>ye - </u>
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					_
1	Total revenue (must equal Part VIII, column (A), line 12)	1_		, 28		
2	Total expenses (must equal Part IX, column (A) line 25)	2				09.
3	Revenue less expenses Subtract line 2 from line 1	3				00.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				16.
5	Net unrealized gains (losses) on investments	5		<u>-21</u>	<u>0,2</u>	<u>47.</u>
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	2	<u>, 56</u>	<u>5,8</u>	69.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			ſ		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	2				<del> </del> _
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	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				,	
	Separate basis Consolidated basis Both consolidated and separate basis				~ <del></del>	
b	Were the organization's financial statements audited by an independent accountant?			2b	X	<u> </u>
	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		-			
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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?			2c	Х	₩
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Au	dit		7.7	
	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	ed au	dıt		.,	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X	<u></u>

### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

INTERACTION THE AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION

Employer identification number 13-3287064

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 12, 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 (Form 990 or 990-EZ)) 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 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 ) 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 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) Is the organization listed (III) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (n) EIN (described on lines 1 10 organization support (see instructions) support (see instructions) Yes above (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

Total

13-3287064 Page 2

Schedule A (Form 990 or 990 EZ) 2018 VOLUNTARY INTERNATIONAL ACTION 13-3287

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)

Ser	talls to qualify under the tests						
		( ) 0014	T #1.0045	4 ) 2046	(4) 0047		(O.T.)
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and		·		,		,
	membership fees received (Do not include any "unusual grants")	5680349.	6669744.	3963336.	6433053.	3008202	25754774.
_	• •	3000343.	0003/44.		0433033.	3000292.	23/34//4.
2	Tax revenues levied for the organ-						3
	ization's benefit and either paid to or expended on its behalf			٠	r		;
2	The value of services or facilities						<del></del>
3	fumished by a governmental unit to	]	٠,				1 :
	the organization without charge			ı		•	, ;
4	Total. Add lines 1 through 3	5680349.	6669744.	3963336.	6433053.	3008292	25754774.
5	The portion of total contributions	748875 CMAR	· `:: 從:: *		-2422033.	3000272.	:
3	by each person (other than a						í í
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the	standards commentative					
	amount shown on line 11,						,
	column (f)						7807983.
6	Public support. Subtract line 5 from line 4	1 10 2 10 10 10 10 10 10 10 10 10 10 10 10 10	12 martin and the contract of		SASSANC DIEGOS	C(2/1/2/2) 1.758(2)	17946791
	etion B. Total Support	6 17 40 No. 1 111 4 4	W ADMINITE HINDER	The second second	- A 12 1 18468 V	C 6 8376 S 7075	<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	5680349.	6669744.	3963336.	6433053.		25754774.
•	Gross income from interest,		0003,111	,	0100	0000222	
Ū	dividends, payments received on	,	,			,	,
	securities loans, rents, royalties,						,
	and income from similar sources	99,638.	73,735.	73,734.	39,789.	44,819.	3,31,715.
9	Net income from unrelated business	•			,		
	activities, whether or not the					, .	, 4
	business is regularly carried on		27,578.	37,201.	33,438.	28,178.	126,395.
10	Other income Do not include gain						, ,
	or loss from the sale of capital				٠		
	assets (Explain in Part VI)	35,868.	6,661.	50,408.	74,023.	43,273.	210,233.
11	Total support. Add lines 7 through 10	Si Miranganiya				CONTRACTOR OF THE PARTY OF THE	26423117.
12	Gross receipts from related activities,	etc (see instruction	ons)			12 16	,566,997.
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	•
500	organization, check this box and storetion C. Computation of Publi		contage				<u>`</u>
					1	Taa i	67.92 %
	Public support percentage for 2018 (I			olumn (t))		14.	C4 :0 E
15	Public support percentage from 2017			, , , , , , , , , , , , , , , , , , , ,	14 22 1/20/	15	
162	33 1/3% support test - 2018 If the c			i line 13, and line i	14 IS 33 1/3% Or M	ore, check this bo	x and <sup>™</sup>
٠.	stop here The organization qualifies	as a publicly suppl	orted organization		line 15 to 22 1/20/	aa.a abaali th	io boy
D	33 1/3% support test - 2017 If the condition have The appropriate and the condition of the condition and the condition of the	organization did no	t check a box on i	ne is or ioa, and	line 15 is 33 1/3%	or more, check in	IS DOX
47	and stop here. The organization qual	•		1	12 16a a-16b a	nd line 14 is 1006	or more
17a	10% -facts-and-circumstances test	· · · · · · · · · · · · · · · · · · ·					
	and if the organization meets the "fact					t villow the organ	nzation ,
-	meets the "facts-and-circumstances"	•			•	7a and line 15 :	10% or
a	10% -facts-and-circumstances test	-					
	more, and if the organization meets the				•		<del>,</del>
19	organization meets the "facts-and-circ Private foundation. If the organization		-				
10	Tivate loundation. If the organization	ar did not check a l	OUR OFFICE TO, TO	i, 100, 17a, 01 170			, ——
	Schedule A (Form 990 or 990-EZ) 2018						

Schedule A (Form 990 or 990 EZ) 2018 VOLUNTARY INTERNATIONAL ACTION
Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

qualify under the tests listed b	elow, please comp	olete Part II )				
Section A. Public Support						, <u> </u>
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<ol> <li>Gifts, grants, contributions, and</li> </ol>		1	1			
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
iness under section 513				ļ		
4 Tax revenues levied for the organ- ization 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						l 
6 Total. Add lines 1 through 5			<u> </u>			
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				ļ		
8 Public support. (Subtract line 7c from line 6) Section B. Total Support				<u>L</u>		
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(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>b</b> Unrelated business taxable income				1		
(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 VI)						
13 Total support (Add lines 9, 10c, 11 and 12)			l	<u></u>	l	
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiza	ition,
check this box and stop here Section C. Computation of Publi	c Support Per	centage				
15 Public support percentage for 2018 (li			column (fl)	<del>-</del>	15	%
16 Public support percentage from 2017	• • •	•	(1)		16	%
Section D. Computation of Inves			<del></del>		<u>, .v ,</u>	<del></del>
17 Investment income percentage for 20			ne 13. column (fl)		17	%
18 Investment income percentage from (	•	• • • • • • • • • • • • • • • • • • • •	(7)		18	_ ' %
19a 33 1/3% support tests - 2018. If the			on line 14, and line	15 is more than 3		
more than 33 1/3%, check this box ar						<b>•</b>
b 33 1/3% support tests - 2017. If the	•	-	-			nd
line 18 is not more than 33 1/3%, che	_					•
20 Private foundation. If the organization		· .			-	<b>•</b>
22023 10-11-18			,		edule A (Form 990	or 990-E7\ 2019

# Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. Al	Supporting	<b>Organizations</b>
---------------	------------	----------------------

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only Was, the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
  If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		V	Ala
-	W8441 1 C	Yes	No.
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<u>S</u> che	edule A (Form 990 or 990-EZ) 2018 VOLUNTARY INTERNATIONAL ACTION	13-3287064. Page 5
Pa	Supporting Organizations (continued)	
		Yes No
11	Has the organization accepted a gift or contribution from any of the following persons?	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	
	below, the governing body of a supported organization?	11a /
b	A family member of a person described in (a) above?	11b Y
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c
	tion B. Type I Supporting Organizations	¥ 1
	- Special production	Yes No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	
'		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	
	controlled the organization's activities. If the organization had more than one supported organization,	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1 360×50×160 × 2.×405
2	Did the organization operate for the benefit of any supported organization other than the supported	
,	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	
<u>~</u>	supervised, or controlled the supporting organization.	
Sec	tion C. Type II Supporting Organizations	<del> </del>
		Yes No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	
	or management of the supporting organization was vested in the same persons that controlled or managed	
	the supported organization(s).	1
Sec	tion D. All Type III Supporting Organizations	
		Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	
	the organization maintained a close and continuous working relationship with the supported organization(s)	2 .
3	By reason of the relationship described in (2), did the organization's supported organizations have a	
	significant voice in the organization's investment policies and in directing the use of the organization's	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	
	supported organizations played in this regard.	3
Sec	tion E. Type III Functionally Integrated Supporting Organizations	,
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structions).
а	The organization satisfied the Activities Test Complete line 2 below	, .
b	The organization is the parent of each of its supported organizations. Complete line 3 below	
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity	ity (see instructions)
2	Activities Test Answer (a) and (b) below.	Yes No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	
	how the organization was responsive to those supported organizations, and how the organization determined	
		2a
h	that these activities constituted substantially all of its activities.  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	
b	•	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	
	reasons for the organization's position that its supported organization(s) would have engaged in these	Barrell Market
_	activities but for the organization's involvement	2b
3	Parent of Supported Organizations Answer (a) and (b) below.	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	
	trustees of each of the supported organizations? Provide details in Part VI	3a   ·
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Standard Statement Statement
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b   .
0		A (Earm 990 or 990-E7) 2018

	edule A (Form 990 or 990-EZ) 2018 VOLUNTARY INTERNATIONAL			3-3287064 Page (
(1)	Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	-	• • •	art VI) See instructions.
Sect	other Type III non-functionally integrated supporting organizations must co	ompiete s	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		:
2	Recoveries of prior-year distributions	2		*
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		,
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
-	collection of gross income or for management, conservation, or	-		}
	maintenance of property held for production of income (see instructions)	6		77.
7	Other expenses (see instructions)	7		i.
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount	•	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			EXPERIENCE AND A CONTROL OF THE CONT
•	instructions for short tax year or assets held for part of year)	77		28/00/12/25/90/14/20/20
а	Average monthly value of securities	1a		, , , , , , , , , , , , , , , , , , , ,
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c	· ·	• ,
	Total (add lines 1a, 1b, and 1c)	1d	•	<u> </u>
	Discount claimed for blockage or other	: 138		
•	factors (explain in detail in Part VI)	95.32		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4	i	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		'
7	Recoveries of prior-year distributions	_ 7		
8	Minimum Asset Amount (add line 7 to line 6)	8		1
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		- :
2	Enter 85% of line 1	2	13 26 N T N T N T 16	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	PACE AND AND AND AND AND AND AND AND AND AND	
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
•	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	_ <del></del>		nization (see

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 VOLUNTARY\_INTERNATIONAL ACTION 13-3287064 Page 7 Rartive Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 · Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions 6 Total annual distributions Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount (ı) (11) (111) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2018 Amount for 2018 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI) See instructions The property of the property o Excess distributions carryover, if any, to 2018 a From 2013 **b** From 2014 c From 2015 d From 2016 e From 2017 នៃវិធី និងរថា ការបស់សិនីស្រីសូវ៉េនិទីកែក ការស្នែកប៉ុន្តិ៍ក្រីសូវ៉ូ ពេលិសាលិស្តិការពេលសង្គិ៍សុវៈស្រីសេស៊ីពីបានប្រែការស្វែកស៊ី ប្រើប្រើប្រ f Total of lines 3a through e a Applied to underdistributions of prior years h Applied to 2018 distributable amount Carryover from 2013 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2018 from Section D, **激烈,这些强烈。** a Applied to underdistributions of prior years b Applied to 2018 distributable amount Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2019. Add lines 3) Breakdown of line 7 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018

art VI	Supplemental Information. Provide the explanations required to	ov Part II, line 10, Part II, line 17a or 17b. Part III, line 12
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 7 Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Alsi	and 11c, Part IV, Section B, lines 1 and 2 Part IV, Section C, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e Part V,
	(See instructions)	
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### SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

# **Political Campaign and Lobbying Activities**

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

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

➤ Go to www irs.gov/Form990 for instructions and the latest information

<u>2018</u>

Open to Public Inspection

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

• 5	Section 501(c)(4), (5), or (6) organiza	itions Complete Part III					
Nam	ne of organization INTERAC	TION THE AMERICAN	OUNCIL FO	OR	Emplo	oyer identification n	umber
	VOLUNTA	RY INTERNATIONAL	ACTION			13-328706	4
Pa	rt I-A Complete if the or	ganization is exempt unde	er section 501(c)	or is a section 52	7 org	anization.	
						<u> </u>	
1	Provide a description of the organi	zation's direct and indirect politica	al campaign activities i	n Part IV			
2	Political campaign activity expendi	tures			▶ \$		
3	Volunteer hours for political campa	lign activities	•				
Pa	rt I-B Complete if the org	ganization is exempt unde	er section 501(c)(	3).			
1	Enter the amount of any excise tax	incurred by the organization unde	er section 4955		▶ \$		
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955		▶\$	<u>-</u> ·	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 t	for this year?			Yes	No
4a	Was a correction made?					Yes	No
	If "Yes," describe in Part IV						
Pa	rt I-C Complete if the org	ganization is exempt unde	er section 501(c),	except section 5	01(c)	(3).	
1	Enter the amount directly expende	d by the filing organization for sec	tion 527 exempt funct	ion activities	▶\$		
2	Enter the amount of the filing organ	nization's funds contributed to oth	er organizations for se	ection 527			
	exempt function activities				▶ \$		
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here ar	nd 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 en	mployer identification number (EIN	l) of all section 527 po	litical organizations to	which	the filing organizatio	n
	made payments For each organiza	ation listed, enter the amount paid	from the filing organiz	ation's funds. Also en	ter the	amount of political	
	contributions received that were pr	romptly and directly delivered to a	separate political orga	anization, such as a se	parate	segregated fund or	a
	political action committee (PAC) If	additional space is needed, provi	de information in Part	IV			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f	rom	(e) Amount of po	
				filing organization		contributions receiv	
				funds If none, ente	er •0-	promptly and dire delivered to a sep	
						political organiza	
						If none, enter -	D-
				I			
		1					
							· · · · · · · · · · · · · · · · · · ·

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

Schedule C (Form 990 or 990-EZ) 2018

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### Schedule C (Form 990 or 990-EZ) 2018 VOLUNTARY INTERNATIONAL ACTION 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

(The t		bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expend	itures to influence pub	olic opinion (grass roots lobbying)		1
b Total lobbying expend	itures to influence a le	17,012.		
c Total lobbying expend	itures (add lines 1a an	17,012.		
d Other exempt purpose	expenditures		7,764,097.	
e Total exempt purpose	expenditures (add line	7,781,109.		
f Lobbying nontaxable	amount Enter the amo	539,055.		
If the amount on line 1e	column (a) or (b) is:	The lobbying nontaxable amount is:		
Not \$500,000		COOK of the amount on long to		Programme and the second of th

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
	<b>\</b>

g Grassroots nontaxable amount (enter 25% of line, 1f)

h Subtract line 1g from line 1a If zero or less, enter -0-

I Subtract line 1f from line 1c If zero or less, enter -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?

0.

### 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 separate instructions for lines 2a through 2f.)

	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	( <b>b</b> ) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	602,042.	599,461.	637,930.	539,055.	2,378,488.
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>					3,5 <u>67</u> ,732.
c Total lobbying expenditures	31,283.	19,271.	8,127.	17,012.	75,693
d Grassroots nontaxable amount	150,511.	149,865.	159,483.	134,764.	594,623
e Grassroots ceiling amount (150% of line 2d, column (e))					891,935.
f Grassroots lobbying expenditures					,

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 VOLUNTARY INTERNATIONAL ACTION 13-3287064 Page 3

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)).

Yes	No	Amo	·
			•
		-	, i
			, i
··· II'			
501(c)(	5), or sec	tion	
		Yes	No
	1		
	2		
prior year	ာ 3		
10, 01			
	1_1_		
I			
			· · · · · · · · · · · · · · · · · · ·
	3		
tical			
	5	i	
	prior year 501(c)( No," OF	1 2 3 501(c)(5), or sec No," OR (b) Part 1 2 2 2 2 2 3	1 2 3 501(c)(5), or section No," OR (b) Part III-A, line 2a 2b 2c 3 section 4 5

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ Go to www.irs.gov/Form990 for instructions and the latest information.

INTERACTION THE AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION

Openito Public Employer identification number

OMB No 1545-0047

13-3287064

(Pai	Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, I	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of 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	d funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose co	onferring
	impermissible private benefit?		Yes No
Pa	Conservation Easements. Complete if the o	rganization answered "Yes" on Form 990, Pa	art IV, line 7
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a histor	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structure	•
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the c	organization during the tax
	year >		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conse	rvation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation	on easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable the text of the footnote to the organization	ation's financial statements that describes th	e organization's accounting for
i Dai	conservation easements  ttilli  Organizations Maintaining Collections o	f Art. Historical Traccuras, or Oth	or Similar Assats
Fai	<del></del>		er Similai Assets.
	Complete if the organization answered "Yes" on Form		d to the second second second second
та	If the organization elected, as permitted under SFAS 116 (A	**	
	historical treasures, or other similar assets held for public ex	·	ce of public service, provide, in Fart XIII,
	the text of the footnote to its financial statements that described as a second of the company o		and hallower shoot works of ort. historical
В	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance or publi	ic service, provide the following amounts
	relating to these items		<b>L</b> ¢
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X	and the state of t	
2	If the organization received or held works of art, historical tre	·	gairi, provide
_	the following amounts required to be reported under SFAS	TO (MOC 900) relating to these items	<b>\$</b>
a	Revenue included on Form 990, Part VIII, line 1		<b>S</b>
<u> </u>	Assets included in Form 990, Part X		

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Schedule D (Form 990) 2018

		RY INTERNA							<u>87064</u>			
Pa	t III   Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Other	<u>Simila</u>	r Assets	(continue	d)		
3	Using the organization's acquisition, accessi	on, and other record	is, chocl	cany of the f	following that	t are a sigi	nificant u	ise of its c	ollection ite	mε		
	(check all that apply)											
а	Public exhibition	(	d 🖳	Loan or exc	hange progra	ams						
þ	Scholarly research	•	e	Other								
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	n how th	ney further th	ie organizatio	on's exem	pt purpo	se in Part	XIII			
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical treas	sures, or othe	er sımılar a	issets		_			
_	to be sold to raise funds rather than to be ma								Yes	No		
Pa	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered	"Yes" on f	Form 990	), Part IV	line 9, or			
	reported an amount on Form 990, Pa	<del></del>								<del></del>		
1a	Is the organization an agent, trustee custodi	an or other intermed	diary for	contributions	s or other as:	sets not in	cluded					
	on Form 990, Part X?								Yes	No		
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	table								
							-		Amount			
С	Beginning balance						1c					
d	Additions during the year						1d					
е	Distributions during the year						1e			<del></del>		
f	Ending balance						1f		٦.,			
	Did the organization include an amount on Fo						y <sup>2</sup>		Yes	No		
	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete								<del></del>			
	Endowment Funds: Complete							ance book	(a) Four va	are back		
4-	Demonstrate of the balance	(a) Current year	(6)	rior year	(c) Two yea	13 Dack	a) Hilecy	<u>/ears back</u>	(c) Four ye	115 Dack		
1a	Beginning of year balance					<del></del>						
_	b Contributions c Net investment earnings, gains, and losses											
	• • •				<del></del>							
d	Grants or scholarships Other expenditures for facilities		-			<del>-  </del>						
е	and programs											
	Administrative expenses								<u> </u>			
g	End of year balance		<u> </u>						1			
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1d	n column (a)	) held as		4		· · · · · · · · · · · · · · · · · · ·			
a	Board designated or quasi-endowment	one your one bulanc	%	g, 00.011111 (u)	, uo							
b	Permanent endowment											
	Temporarily restricted endowment ▶	%										
	The percentages on lines 2a, 2b, and 2c sho											
За	Are there endowment funds not in the posse	•	ation tha	t are held an	id administer	red for the	organiza	ation				
	by	·					_		Ye	s No		
	(i) unrelated organizations								3a(ı)			
	(ii) related organizations								3a(ii)			
ь	If "Yes" on line 3a(ii), are the related organiza	itions listed as requi	red on S	chedule R?					3b			
4	Describe in Part XIII the intended uses of the		wment f	unds								
Pai	t VI Land, Buildings, and Equipm	ient.										
	Complete if the organization answere	d "Yes" on Form 990	D, Part IV	/, line 11a S	ee Form 990	, Part X, Iı	ne 10					
	Description of property	(a) Cost or o		(b) Cost			cumulate	1	(d) Book va	alue		
_		basis (investr	ment)	basis	(other)	dep	reciation					
1a	Land											
b	Buildings	ļ		4 ==	<u> </u>		00 =		^ ~ ~	004		
С	Leasehold improvements				6,020.		$\frac{88}{22}, \frac{78}{22}$			234.		
d	Equipment				1,574.		32,9			655.		
_	Other		<u>.</u>	<del></del>	6,406.		68,8			596.		
<u>Tota</u>	. Add lines 1a through 1e (Column (d) must e	qual Form 990. Part	X, colun	nn (B), line 10	2c.)		_	<u> </u>	<u>1,183,</u>	405.		

Schedule D (Form 990) 2018

			_	_	-	_		_		_		-		_					•	_	•	_		_
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Schedule D (Form 990) 2018 VOLUNTARY II	NTERNATIONAL A	ACTION	13	-3 <u>287064</u>	Page 3
Part VII Investments - Other Securities.		,		·	
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b See Form 990,	Part X, line 12	,	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation Cost or end	d-of-year market va	lue
(1) Financial derivatives					
(2) Closely-held equity interests			<u> </u>	-	
(3) Other					
(A)					
(B)				درم	
(C)					
(D)		<del>                                     </del>		1	
(E)		<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>	
(F)				<u></u> <u>-</u> -	
(G)				•	
(H)					
Total (Col (b) must equal form 990, Part X, col. (B) line 12.)				Another diameter and the same	
Part VIII Investments - Program Related.		Section of Controlling	(CCA48, "+1) 2" P-18000 C47, 434 Ba	AND THE PARTY OF THE PARTY OF THE PARTY.	NA MARKETAL
<del></del>	F 000 Dark IV Iraa	11- Con Farm 000	David V. June 10		
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		aluation Cost or end	d-of-vear market va	due.
	(D) DOOK VAIDE	(c) Method of v	aluation Cost of ent	J-Oi-year market va	
(1)				<del></del>	
(2)				· · · · · · · · · · · · · · · · · · ·	
(3)					
(4)		<del></del> -	<del></del>		
(5)			· · · · · · · · · · · · · · · · · · ·		
(6)					
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(9)	·	a posta i fest Daca — rendicione de l'infam	note from Strandonnon ude son udd Ledudo.	in a farmania a la Calenterra anno de la calenterra de la	ic traditionaen o
Total (Col (b) must equal Form 990, Part X, col (B) line 13 )	<del></del>		odo) vy šprogramjaných principal vojeka. Postal vy starovaní vy starovaní vy starovaní vy starovaní vy starovaní vy starovaní vy starovaní vy starovaní	THE SALE OF THE PERSON OF THE	1. C. C. C. C. C. C. C. C. C. C. C. C. C.
Part IX Other Assets.				•	
Complete if the organization answered "Yes" of		11d See Form 990, I	Part X, line 15		
(a) L	Description		<del></del>	(b) Book valu	ue
(1)					
(2)				· · · ·	
(3)	<u> </u>				
(4)		- <del></del>	<u></u>		
(5)					
(6)				<u> </u>	
(8)			··-	<u> </u>	
(9)		•			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	15.)				<u>.                                      </u>
Rart X. Other Liabilities.					
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f See Form	990, Part X, line 25		
1 (a) Description of liability		(b) Book value	of Action as deci	and the Cardinal species	
(1) Federal income taxes					
(2) REFUNDABLE ADVANCES		1,979,290.			
(3) DEFERRED RENT		1,708,478.	Military Caracia Caracian	To Single Bearings of Marchine Street	
(4)					
(5)					
(6)					

Total (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. 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

3,687,768

Schedule D (Form 990) 2018

(8)

Schedule D (Form 990) 2018	VARTIMITARY	INTERNATIONAL	ACTTON	13-
Part XI Reconciliation of				evenue ner Return

[ F ai	Complete (the execution of nevertide per Addited 1 indition Statements with Nevertide per Ne	tuiii.	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		6,061,413.
1	Total revenue, gains, and other support per audited financial statements	1	0,001,413.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12  Net unrealized gains (losses) on investments    2a   -210, 247.		
a	· ' '	-	
b	Donated services and use of facilities 2b	-	
С	Recoveries of prior year grants  2c	-	
d	Other (Describe in Part XIII )		210 247
е	Add lines 2a through 2d	2e	$\frac{-210,247}{6,271,660}$
3	Subtract line 2e from line 1	3	0,2/1,000.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		_
а	Investment expenses not included on Form 990, Part VIII, line 7b  4a 13,349.	-	
Ь	Other (Describe in Part XIII )	<del> </del>	12 240
С	Add lines 4a and 4b	4c	13,349. 6,285,009.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 Potur	
Pai	Reconciliation of Expenses per Audited Financial Statements With Expenses per I	netur	· ·
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	Τ.	7,767,760.
1	Total expenses and losses per audited financial statements		1,101,100.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		••
a	Donated services and use of facilities 2a	1	•
b	Prior year adjustments 2b	1	~
C	Other (Ossanla in Both VIII.)	-	
d	Other (Describe in Part XIII )  Add Issas On through Od		0.
e	Add lines 2a through 2d	2e3	7,767,760.
3	Subtract line 2e from line 1	1	7,707,700.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b  4a 13,349.		
a		1	
b	Other (Describe in Part XIII )  Add Irac 4s and 4b	4c	13,349.
	Add lines 4a and 4b  Tetal evenues Add lines 2 and 4a (Till and 15 and 20 Part 14 and 15 and	5	7,781,109.
Pai	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  It XIII Supplemental Information.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	de 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	1 Part	K line 2. Part XI.
	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information	., . =	,
	· .		
PAF	RT X, LINE 2:		
INT	PERACTION IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNI	ER '	THE
PRO	OVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE	(IR	C). IN
ADI	DITION, INTERACTION QUALIFIES FOR CHARITABLE CONTRIBUTION I	EDU	CTIONS AND
HAS	BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE	FOU	NDATION.
			ت معدد ه
INC	COME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO INTERA	ZC.T.T.	ON'S 3
EXI	EMPT PURPOSE, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO TAX	ITA	
UNE	RELATED BUSINESS INCOME.		
MAN	NAGEMENT EVALUATED INTERACTION'S TAX POSITIONS AND CONCLUDE	D T	HAT
INT	TERACTION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE	E AD	JUSTMENT
		-	
TO	THE FINANCIAL STATEMENTS.		,

Cabada la D (Farra 2000) 2010	INTERACTION THE AMERICAN COUNCIL FOR	13-3287064 Page 5
Schedule D (Form 990) 2018 Part XIII Supplemental Info	VOLUNTARY INTERNATIONAL ACTION	13-3287004 Page 5
- ur xiii   Supplementar inio	offination (continued)	
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Schedule D (Form 990) 2018

## SCHEDULE J (Form 990)

# **Compensation Information**

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

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

Inspection Employer identification number

OMB No 1545-0047

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

► Go to www.irs.gov/Form990 for instructions and the latest information. INTERACTION THE AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION

13-3287064

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel			Ì
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as 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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		,	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		<del></del>
	, , , , , , , , , , , , , , , , , , ,			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's		١.	
	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	1		
	X Compensation committee		,	
	Independent compensation consultant  X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
			7	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		_	
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of		<u>i</u>	
а	The organization?	5a		Х
b	Any related organization?	5b	·	X
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990 Part VII, Section A, line 1a, did the organization pay or accrue any compensation		۱ ا	
	contingent on the net earnings of			
а	The organization?	6a		Х
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990 Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	L	Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	Q	[ i	

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

Schedule J (Form 990) 2018

13-3287064

Page 2

VOLUNTARY INTERNATIONAL ACTION Schedule J (Form 990) 2018

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 on 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 aren't 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

	ſ							
		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(II) Bonus & Incentive compensation	(iii) Other reportable compensation	compensation			in column (b) reported as deferred on prior Form 990
(1) SAMUEL WORTHINGTON	E	342,111.	0	0	21,600.	2,837.	366,548.	0.
CHIEF EXECUTIVE OFFICER	Ξ	0	0	0	•0	0	0	0
(2) PATRICIA MCILREAVY	Ξ	185,124.	0	0	13,194.	0.	198,318.	0
VP, HUMANITARIAN POLICY & PRACTICE	<u> </u>	0	0	0	• 0	0	0	0
(3) CAROLYN AEBY-HEALEY	Θ	152,495.	0.	0	6,217.	0	158,712.	0
VP, MEMBERSHIP & PUBLIC ENGAGEMENT	∷≘	0	0	0	0	0	0	0.
(4) JULIEN SCHOPP	Ξ	149,336.	0	0	10,430.	0	159,766.	0
HUMANITARIAN POLICY & PRACTICE	(ii)		0	0	• 0	0	0	0
	(i)							
	Ξ							
	Ξ							
	(II)							
	Θ							
	(ii)							
	(i)							
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Schedule J (Form 990) 2018

INTERACTION THE AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION

13-3287064

Page 3

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 Schedule J (Form 990) 2018

Part III Supplemental Information

										Schedule J (Form 990) 2018
									•	

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# 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. ► Go to www.irs gov/Form990 for the latest information.

INTERACTION THE AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION

OMB No 1545-0047 Open to Public Inspection

Employer identification number 13-3287064

FORM 990, PART VI, SECTION A, LINE 1:

### BOARD COMMITTEES:

A. EXECUTIVE COMMITTEE: THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS SHALL CONSIST OF SEVEN (7) DIRECTORS PLUS THE CEO, WHO SHALL SERVE AS AN EX-OFFICIO NONVOTING MEMBER OF THE EXECUTIVE COMMITTEE. THE SEVEN DIRECTORS ON THE EXECUTIVE COMMITTEE SHALL INCLUDE THE CHAIR, VICE CHAIR AND TREASURER AND FOUR AT-LARGE MEMBERS NOMINATED BY THE CHAIR AND ELECTED BY THE BOARD. THE EXECUTIVE COMMITTEE SHALL HAVE ALL OF THE AUTHORITY OF THE BOARD TO THE FULLEST EXTENT PERMITTED BY APPLICABLE LAW AND SHALL MEET BETWEEN MEETINGS OF THE BOARD AT SUCH TIMES AND PLACES AS MAY BE FIXED BY THE CHAIR. THE EXECUTIVE COMMITTEE SHALL TAKE SUCH ACTIONS AS ARE NECESSARY BETWEEN MEETINGS OF THE BOARD. ALL MEMBERS OF THE EXECUTIVE COMMITTEE SHALL SERVE IN THEIR INDIVIDUAL CAPACITIES SO LONG AS THEY MAINTAIN THEIR AFFILIATIONS WITH THE RESPECTIVE MEMBER ORGANIZATIONS.

B. STANDING GOVERNANCE COMMITTEES: THE BOARD MAY ESTABLISH STANDING GOVERNANCE COMMITTEES. THE CHAIR SHALL NOMINATE AND THE BOARD OF DIRECTORS SHALL ELECT FROM AMONG THE DIRECTORS, THE CHAIR AND AT LEAST TWO (2) DIRECTORS TO EACH STANDING GOVERNANCE COMMITTEE. THE BOARD MAY ESTABLISH SUCH PROCEDURES TO GOVERN THEIR ACTIVITIES, AND DELEGATE TO THEM SUCH AUTHORITY AS MAY BE NECESSARY OR DESIRABLE FOR THE EFFICIENT MANAGEMENT OF THE PROPERTY, AFFAIRS, BUSINESS, AND/OR ACTIVITIES OF THE CORPORATION. THERE SHALL BE AT LEAST FOUR SUCH STANDING GOVERNANCE COMMITTEES: NOMINATING, MEMBERSHIP AND STANDARDS AUDIT AND FINANCE. THE DUTIES AND RESPONSIBILITIES OF THESE COMMITTEES SHALL INCLUDE, BUT NOT BE LIMITED TO, THE FOLLOWING: NOMINATING COMMITTEE, MEMBERSHIP AND STANDARDS COMMITTEE,

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization INTERACTION THE AMERICAN COUNCIL FOR VOLUNTARY INTERNATIONAL ACTION

Employer identification number 13-3287064

FINANCE COMMITTEE, AUDIT COMMITTEE.

FORM 990, PART VI, SECTION A, LINE 6:

THE CORPORATION SHALL HAVE TWO CLASSES OF MEMBERS. CLASS A MEMBERS SHALL

HAVE VOTING RIGHTS. ADMISSION TO CLASS A MEMBERSHIP SHALL BE BY MAJORITY

VOTE OF THE BOARD OF DIRECTORS. AN ORGANIZATION MAY APPLY FOR CLASS A

MEMBERSHIP IF IT IS EXEMPT FROM TAXATION UNDER SECTION 501(A) OF THE

INTERNAL REVENUE CODE OF 1986, AS AMENDED; HAS PRIMARY PURPOSES AND WORK

CONSISTENT WITH THE PURPOSES OF THE CORPORATION; AND AGREES TO PAY

ESTABLISHED DUES. CLASS B MEMBERS SHALL HAVE NO VOTING RIGHTS. ADMISSION TO

CLASS B MEMBERSHIP SHALL BE BY MAJORITY VOTE OF THE BOARD OF DIRECTORS. AN

ENTITY THAT IS EXEMPT FROM TAXATION UNDER SECTION 501(A) MAY APPLY FOR

CLASS B MEMBERSHIP IF IT HAS PURPOSES AND WORK CONSISTENT WITH THE PURPOSES

OF THE CORPORATION; AND AGREES TO PAY ESTABLISHED DUES. THE BOARD OF

DIRECTORS MAY ESTABLISH ANY ADDITIONAL CRITERIA FOR CLASS A AND CLASS B

MEMBERSHIP.

DUES. THE CLASS A MEMBERS SHALL DETERMINE THE APPROPRIATE DUES FOR EACH
MEMBER. THE AMOUNT AND STRUCTURE OF DUES MAY BE CHANGED BY A VOTE OF THE
CLASS A MEMBERS.

RESIGNATION AND REMOVAL. ANY MEMBER AFTER HAVING FULFILLED ALL OBLIGATIONS

TO THE CORPORATION MAY RESIGN BY WRITTEN NOTICE TO THE CEO OF THE

CORPORATION (ANY SUCH RESIGNATION TO TAKE EFFECT AS SPECIFIED THEREIN, OR

IF NOT SO SPECIFIED, UPON RECEIPT BY THE CEO).

ANY MEMBER MAY BE REMOVED OR SUSPENDED AT ANY TIME FOR FAILURE TO MAINTAIN

THE STANDARDS AND CRITERIA FOR ADMISSION AND CONTINUING MEMBERSHIP OR FOR

OTHER CAUSE BY A TWO-THIRDS (2/3) VOTE OF THE NUMBER OF DIRECTORS THEN IN

OFFICE.

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization INTERACTION THE AMERICAN COUNCIL FOR Employer identification number VOLUNTARY INTERNATIONAL ACTION 13-3287064 FORM 990, PART VI, SECTION A, LINE 7A: REPRESENTATIVES OF MEMBER ORGANIZATIONS MEET AT LEAST ANNUALLY FOR THE PURPOSES OF ELECTING DIRECTORS TO THE BOARD OF DIRECTORS AND TRANSACTING OTHER BUSINESS THAT MAY COME BEFORE THE MEETING. FORM 990, PART VI, SECTION A, LINE 7B: QUORUM. ONE-QUARTER (1/4) OF THE CLASS A MEMBERS REPRESENTED IN PERSON OR BY PROXY SHALL CONSTITUTE A QUORUM AT A MEETING OF CLASS A MEMBERS FOR THE TRANSACTION OF ANY BUSINESS. THE CLASS A MEMBERS PRESENT AT A DULY-ORGANIZED MEETING MAY CONTINUE TO DO BUSINESS UNTIL ADJOURNMENT, NOTWITHSTANDING THE WITHDRAWAL OF ENOUGH CLASS A MEMBERS TO LEAVE LESS THAN A QUORUM. IF A MEETING CANNOT BE ORGANIZED BECAUSE A QUORUM IS NOT PRESENT, THOSE PRESENT MAY ADJOURN THE MEETING UNTIL A SUBSEQUENT MEETING AT WHICH QUORUM IS PRESENT, WHEN ANY BUSINESS MAY BE TRANSACTED THAT MAY HAVE BEEN TRANSACTED AT THE MEETING AS ORIGINALLY CALLED. FORM 990, PART VI, SECTION B, LINE 11B: AFTER 990 IS PREPARED BY STAFF AND THE ORGANIZATION'S EXTERNAL TAX PREPARER, FORM 990 IS CIRCULATED TO THE AUDIT COMMITTEE AND THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW AND COMMENT. AFTER INCORPORATING EDITS BASED ON COMMITTEE REVIEW FORM 990 IS CIRCULATED TO ALL MEMBERS OF THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 12C:

IN JANUARY OF EACH YEAR ALL MEMBERS OF THE BOARD AND STAFF ARE REQUIRED TO

COMPLETE INTERACTION'S CONFLICT OF INTEREST DISCLOSURE FORM, EVEN IF

832212 10-10-18

NOTHING HAS CHANGED FROM THE PRIOR YEAR OR THE INDIVIDUAL HAS NO POTENTIAL CONFLICTS TO DISCLOSE. A TALLY IS MAINTAINED TO ASSURE THAT ALL FORMS ARE SUBMITTED. IF A MEMBER OF THE BOARD DISCLOSES A POTENTIAL CONFLICT, THAT INFORMATION IS BROUGHT TO THE ATTENTION OF THE CHAIR OF THE BOARD, AND THE BOARD MEMBER IS REQUIRED TO EXCUSE HIM/HERSELF FROM ANY BUSINESS INVOLVING INTERACTION AND THE OTHER ORGANIZATION. THE CHAIR DETERMINES WHETHER THE NATURE OF THE POTENTIAL CONFLICT IS SUCH THAT IT MUST BE BROUGHT TO THE ATTENTION OF THE EXECUTIVE COMMITTEE AND/OR THE FULL BOARD. IF A MEMBER OF THE STAFF DISCLOSES A POTENTIAL CONFLICT, THAT INFORMATION IS BROUGHT TO THE ATTENTION OF THE CEO, AND THE STAFF MEMBER IS INFORMED THAT S/HE MUST EXCUSE HIM/HERSELF FROM ANY BUSINESS INVOLVING INTERACTION AND THE OTHER ORGANIZATIONS. THE CEO DETERMINES WHETHER THE NATURE OF THE POTENTIAL CONFLICT IS SUCH THAT THE EMPLOYEE MUST WITHDRAW FROM THE OTHER ORGANIZATION IN ORDER TO CONTINUE AT INTERACTION.

FORM 990, PART VI, SECTION B, LINE 15:

THE CEO'S COMPENSATION IS DETERMINED BY THE BOARD CHAIR IN CONSULTATION
WITH THE EXECUTIVE COMMITTEE OF THE BOARD. THE DECISION IS BASED ON: A
REVIEW, DOCUMENTED IN WRITING, OF THE CEO'S PERFORMANCE RELATED TO GOALS
AND BENCHMARKS PREVIOUSLY SET; A REVIEW OF SALARIES FOR COMPARABLE
POSITIONS BASED ON PUBLICLY AVAILABLE INFORMATION (SUCH AS FORMS 990 AND
SALARY SURVEYS) FOR COMPARABLE POSITIONS IN THE AREA; AND DISCUSSION AMONG
MEMBERS OF THE COMMITTEE. THE BOARD CHAIR DISCUSSES THE OVERALL REVIEW AND
SALARY RECOMMENDATION WITH THE CEO AND FINAL MATERIALS ARE PLACED IN THE
CEO'S PERSONNEL FILE. THIS PROCESS RECENTLY TOOK PLACE IN 2018.

THE OTHER OFFICERS OR KEY EMPLOYEES COMPENSATION IS DETERMINED BY THE

EXECUTIVE TEAM. DISCUSSIONS ARE HELD IN EXECUTIVE TEAM MEETINGS. THIS

832212 10-10-16 Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization INTERACTION THE AMERICAN COUNCIL FOR  VOLUNTARY INTERNATIONAL ACTION	Employer identification number 13-3287064
PROCESS RECENTLY TOOK PLACE IN 2018	-
FORM 990, PART VI, SECTION C, LINE 19:	
INTERACTION'S ANNUAL REPORT IS PRESENTED ON ITS WEBSITE.	GOVERNING
DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STA	ATEMENTS ARE
AVAILABLE TO THE PUBLIC AT INTERACTION'S OFFICE UPON REQUI	EST FOR THE SAME
PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D).	
PART VII & PART IX, LINES 5-8	
AMENDED PART VII TO CORRECT 2018 COMPENSATION AMOUNT TO RE	EFLECT 2018
W-2S.	
AMENDED PART IX, LINE 5, 7 AND 8 TO REFLECT 2018 COMPENSAT	rion of
CURRENT OFFICERS AND KEY EMPLOYEES.	
	, , , , , , , , , , , , , , , , , , ,
	<u>.</u>
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