Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

Α	For the	2009 calendar year, or tax year beginning OCT 1, 2009 and ending	SEP 30, 2010	
В	Check if applicable	C Name of organization	D Employer identific	cation number
Г	Addres	is label or		
Ē	Name change	typa	05-0	591194
	Initial return	See Number and street (or P 0. box if mail is not delivered to street address) Room/suit		
	Termin	Specific 819 L STREET, SE	1 '	488-0735
	Ameno return		G Gross receipts \$	1,056,145.
	Applic tion	WASHINGTON, DC 20003	H(a) Is this a group re	eturn
	pendin	F Name and address of principal officer LINDSAY MATTISON	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	luded? Yes No
		empt status X 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	If "No," attach a	list (see instructions)
		e: ► WWW.HAITIWATER.ORG	H(c) Group exemption	
			ar of formation: 2003 N	1 State of legal domicile: DC
Р	art I	Summary		
e S	1	Briefly describe the organization's mission or most significant activities SEE PART	III, LINE 1.	
Governance		Check this box if the organization discontinued its operations or disposed of mo	th 050/ th	
Ver	3	Check this box [] If the organization discontinued its operations or disposed of mo Number of voting members of the governing body (Part VI, line 1a)	• 1 1	16
යි	4	Number of voting members of the governing body (Fart VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)	3	15
აგ თ		Total number of employees (Part V, line 2a)	5	7
ŧ		Total number of volunteers (estimate if necessary)	6	25
Activities &		Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
Ř		Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	1		Prior Year	Current Year
ەت دىسى	8	Contributions and grants (Part VIII, line 1h)	289,944.	1,054,290.
% ZUI? Revenue	9	Program service revenue (Part VIII, line 2g)		
~ »	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1.	1,359.
. E	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		19.
∍ 	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	289,945.	1,055,668.
AUG 	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		200.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
TANGUE SERVICE	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)	136,855.	255,195.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	73,942.	
2 č	b	Total fundraising expenses (Part IX, column (D), line 25)		
§ w	1 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f 24f)	112,522.	483,484.
ソ	18	Total expenses Add lines 13-17 (must equal Part IX, column (A) Rine 25 EIVED	323,319.	738,879.
	19	Revenue less expenses Subtract line 18 from line 12	J J J J J T • 1	316,789.
Assets or			Beginning of Current Year	End of Year
SSE	20	Total assets (Fart A, line To)	18,516.	321,455.
Net A	21	Total liabilities (Part X, line 26)	36,532.	23,085.
	≧∣22 art II	Net assets or fund balances Subtract line 21 from line 20	-18,016.	298,370.
	<u> </u>	Under penalties of periury. I declare that I have examined this return, including accompanying schedules and statement	s. and to the best of my knowledge	ge 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	ge)
Sig	ın	Normer (mod. Chattiann)	1 7/	12/1/
He		Signature of officer	Date //	
		LINDSAY MATTISON, EXECUTIVE DIRECTOR		
		Type or print name and title		
		Preparer's Date		er's identifying number
Pai			self- employed > [(see ins	structions)
	parer's	Firm's name (or GELMAN, ROSENBERG & FREEDMAN	EIN ▶	
US	Only	self-employed), \$\black\delta 550 MONTGOMERY AVE. SUITE 650 NORT		
		address, and ZIP+4 BETHESDA, MD 20814-2930	16	301) 951-9090
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

990 (2009) INTERNATIONAL ACTION, INC.	05-0591194 Page 2
rt III Statement of Program Service Accomplishments	
Briefly describe the organization's mission SEE SCHEDULE O FOR CONTINUATION	7
	UTION TO FIGHTING
Did the organization undertake any significant program services during the year which were not listed on	
the prior Form 990 or 990-EZ?	X Yes No
If "Yes," describe these new services on Schedule O	
	es? Yes X No
	cs
- · · - · · · · · · · · · · · · · · · ·	•
• • • • • • • • • • • • • • • • • • • •	t of grants and
allocations to others, the total expenses, and revenue, if any, for each program service reported	
(Code) (Expenses \$ 642,985. including grants of \$ 200.) (Revenue \$
IS CONTAMINATED WITH HUMAN WASTE AND DISEASE. THERE A	RE NO SEWAGE
	CAL URBAN SAFE
WATER SYSTEM FOR DEVELOPING COUNTRIES.	
(Code) (Expenses \$ including grants of \$) (Revenue \$
(Lesso), (E. poiledo \$\psi\$ including grants of \$\psi\$, (nevenue ψ
(Code \(\(\(\)\)(Expenses \\ \) including grants of \(\))(Revenue \$
(Cooc /(Expenses of minimaling grants of of) (Nevenue \$
•	
·	
·	
Other program converse (December in Schedule C)	,
Other program services (Describe in Schedule O)	,
(Expenses \$ including grants of \$) (Revenue \$)
) Form 990 (2009)
	Bnefly describe the organization's mission SEE SCHEDULE O FOR CONTINUATION TO CREATE CLEAN, SAFE WATER PROJECTS IN EACH PORT-AU-NEIGHBORHOOD BY TRAINING LOCAL WATER BOARD MEMBERS AN SPECIAL WATER TANKS AND CHLORINATORS. INTERNATIONAL ACTHAT CHLORINATING THE MUNICIPAL WATER IS THE ONLY SOLID the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program service if "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amoun allocations to others, the total expenses, and revenue, if any, for each program service reported (Code)(Expenses \$ 642,985. including grants of \$ 200. SINCE OUR START OF THE CLEAN WATER CAMPAIGN IN HAITI HAVE INSTALLED MORE THAN 150 CHLORINATORS IN THE POOR) OF PORT-AU-PRINCE. WE ARE PROTECTING THE WATER FOR MOI HAITIANS IN AND AROUND THE CAPITAL. NEARLY EVERY WATEI IS CONTAMINATED WITH HUMAN WASTE AND DISEASE. THERE AT TREATMENT OR DISPOSAL SYSTEMS IN HAITI, WHICH HAS THE AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTALITY RATES IN THE HEMISPHERE. BY INSTALLED AND CHILD MORTAL THE A

Form 990 (2009) INTERNATIONAL ACTION, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	
2	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			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	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		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		<u> X</u>
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI		:	
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's separate or consolidated limit can statements for the tax year include a roothole that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
-	Schedule D, Parts XI, XII, and XIII	12	х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	12		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1		
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	i		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	990 ((2009)

Form 990 (2009) INTERNATIONAL ACTION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		ł	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		ļ	
	Schedule K. If "No", go to line 25	24a	<u> </u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	,		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? 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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	ļ	X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was		İ	
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	ŀ	ļ	
	If "Yes," complete Schedule R, Part V, line 2	35	ļ	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			l
	If "Yes," complete Schedule R, Part V, line 2	36	 	<u> X</u>
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	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2009)

Form 990 (2009)

12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax exempt interest received or accrued during the year

amounts due or received from them)

11b

19480__1

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	tion A. Governing Body and Management				. — -	
		ı	1		Yes	No
1a	Enter the number of voting members of the governing body	1a		16		
b	Enter the number of voting members that are independent	_1b_		15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			
	officer, director, trustee, or key employee?			_2_	X	
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	t supervision			
	of officers, directors or trustees, or key employees to a management company or other person?			3		X X X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		5		<u>X</u>
6	Does the organization have members or stockholders?			6		<u>X</u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the			
	governing body?	_		7a		X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		<u> X</u>
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_	
b	Each committee with authority to act on behalf of the governing body?			_8b_	<u> </u>	<u>X</u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	acned	at the			37
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- 0 1	9		X
360	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	evenu	e Coae)			
10-	Does the organization have local chapters, branches, or affiliates?			40-	Yes	No X
	If "Yes," does the organization have written policies and procedures governing the activities of such	oboot	ara affiliatas	10a		
D	and branches to ensure their operations are consistent with those of the organization?	Chapi	ers, aniliates,	106	i	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	ilina th	o form?	10b	Х	_
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990	iiirig ti	e lollii,	11	Λ	
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a	х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld aw	e rise	120		
	to conflicts?	ala giv	0 1100	12b	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes."	describe	12.0		
	in Schedule O how this is done	,		12c	Х	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approv	al by ı	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•				
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	ts participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızat	ion's			}
	exempt status with respect to such arrangements?			16b		<u> </u>
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ► NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (501	c)(3)s only) ava	lable for		
	public inspection. Indicate how you make these available. Check all that apply					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest poli	cy, and fina	ancial	
	statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd red	ords of the orga	anization 🕽	-	
	<u>JEFFERY SEJOUR - 202-488-0735</u>				, <u>-</u> ,	
	819 L STREET, SE, WASHINGTON, DC 20003					_
				Enro	gan	ronnev

932006 02-04-10

Form 990 (2009) INTERNATIONAL ACTION, INC. 05-0 **Employees, and Independent Contractors**

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

Check this box if the organization did not compensate any current officer, director, or trustee

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. 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	(C) Position (check all that apply)						(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	lnstitutional trustee	c all 1	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
LINDSAY MATTISON										
EXECUTIVE DIRECTOR	40.00	X		X		ļ	ļ.,	44,856.	0.	0.
BONNIE WEISS										
CHAIR	2.00	X	ļ	Х		<u> </u>	<u> </u>	0.	0.	0.
WILLIAM CURRY										
PRESIDENT	2.00	X	<u></u>	X				0.	0.	0.
VICTOR GRINEV										
TREASURER	2.00	X		X			l	0.	0.	0.
HEUNG HWAN LEE										
TREASURER	2.00	Х		X				0.	0.	0.
THOMAS MCCARTHY						-				
BOARD MEMBER	2.00	X						0.	0.	0.
ESTHER BROOKS							1			
BOARD MEMBER	2.00	X					_	0.	0.	0.
ALFREDO FORTI										
BOARD MEMBER	2.00	X						0.	0.	0.
RAYNALD LAMOTHE										
BOARD MEMBER	2.00	X				L	L	0.	0.	0.
ANNE ZILL										
BOARD MEMBER	2.00	X						0.	0.	0.
DAVID POTTER										
BOARD MEMBER	2.00	X						0.	0.	0,
EDWARD RAWSON										
BOARD MEMBER	2.00	X						0.	0.	0.
FRANZ STUPPARD										
BOARD MEMBER	2.00	X						0.	0.	0.
GUIDO DEBOECK										
BOARD MEMBER	2.00	X			L		L	0.	0.	0.
ANDREW WEISS						_				
BOARD MEMBER	2.00	X	L	L	L		L	0.	0.	0,
LAURA TEW										-
BOARD MEMBER	2.00	X	L				L	0.	0.	0.
YOUNGMIN CHANG										
ASSOCIATE DIRECTOR	40.00	1	1	X	1	1	1	47,000.	0.	2,925.

932007 02-04-10

Form **990** (2009)

Form 990 (2009)

\$100,000 in compensation from the organization

		(2009) INTER	RNATIONAL	ACTION,	INC.		05-0592	L194 Page 9
Pa	rt VII	II Statement of Rever	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts str	1 a	Federated campaigns	1a			ļ		
g a	b	Membership dues	1b			ļ		
ts, g	С	Fundraising events	1c					
a git	d	Related organizations	1d					
S.E	е	Government grants (contribut	tions) 1e					
er is	f	All other contributions, gifts, gran	nts, and					
Contributions, gifts, grants and other similar amounts		sımılar amounts not ıncluded abo	ove 1f	1054290.				
<u> </u>		Noncash contributions included in lines	s 1a-1f \$	7,480.				
OB	<u>h</u>	Total. Add lines 1a-1f		, •	1054290.			<u> </u>
				Business Code				
Program Service Revenue	2 a							
le Š	b							
Ne n	C							
Rea	d							+
Pro	e	All other program service reve		 				
		Total. Add lines 2a-2f	and e	•				
\neg	3	Investment income (including	dividends intere		-			
	Ŭ	other similar amounts)	dividorido, mitori	>	1,836.			1,836.
	4	Income from investment of ta	x exempt bond r	proceeds				170001
	5	Royalties		•				
		•	(ı) Real	(ii) Personal			-	
	6 a	Gross Rents						
	b	Less rental expenses						
- 1	С	Rental income or (loss)						
1	d	Net rental income or (loss)		>				
	7 a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory						İ
	b	Less cost or other basis						
		and sales expenses		477.				
		Gain or (loss)		-477.				
		Net gain or (loss)			-477.			-477.
Other Revenue	8 a	Gross income from fundraisin including \$	ng events (not					
ě		contributions reported on line	1c) See					
<u>ē</u>		Part IV, line 18	а					
됩		Less direct expenses	b					
		Net income or (loss) from fun		<u> </u>				-
	9 a	Gross income from gaming a						
		Part IV, line 19	a					
1		Less direct expenses	b					
I		Net income or (loss) from gan		P				
	и а	Gross sales of inventory, less and allowances						
ŀ	h	Less cost of goods sold	a					
		Net income or (loss) from sale	b es of inventory					
ŀ	<u>C</u>	Miscellaneous Revent		Business Code			 	
ŀ	11 2	MISCELLANEOUS		900099	19.			19.
	b			70000				***
İ	c							1
1	d		··· - · · · · · · · · · · · · · · · · · · ·					
İ	e	Total. Add lines 11a-11d		<u> </u>	19.			_
	12	Total revenue. See instructions		•	1055668.		0	. 1,378.
93200			 			· ·		Earm 990 (2000)

Part IX Statement of Functional Expenses

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

	All other organizations must complete 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	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U S				
	See Part IV, lines 15 and 16	200.	200.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	116 070	04 400	0 556	10 006
_	trustees, and key employees	116,872.	94,490.	9,556.	12,826.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	117,613.	91,125.	21,286.	5,202.
8	Pension plan contributions (include section 401(k)		71,123.	21,200.	3,202.
0	and section 403(b) employer contributions)				
9	Other employee benefits	6,619.	4,444.	1,478.	697.
10	Payroll taxes	14,091.	10,046.	2,549.	1,496.
11	Fees for services (non-employees)				
а	Management				
b	Legal	4,132.	2,867.	849.	416.
С	Accounting	28,561.	19,083.	5,876.	3,602.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	39,142.	37,558.	708.	87 <u>6</u> .
12	Advertising and promotion	6,891.	5,796.	571.	524.
13	Office expenses	56,508.	38,758.	7,908.	9,842.
14	Information technology			·	
15	Royalties	21 466	07 600		0 001
16	Occupancy	31,466.	27,638.	947.	2,881.
17	Travel	69,022.	66,901.	1,357.	764.
18	Payments of travel or entertainment expenses	·			
	for any federal, state, or local public officials	E 2 4	522.		
19	Conferences, conventions, and meetings	534.	344.	8.	4.
20	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization	3,067.	2,129.	250.	688
23	Insurance	1,177.	776.	195.	206
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	Ξ,Ξ,7,•	770.	155.	200
а	PROGRAM SUPPLIES & SERV	223,986.	223,986.		
b		11,836.	11,148.	388.	300
С		4,961.	4,305.	394.	262
d e		2,201.	1,213.	64.	924
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	738,879.	642,985.	54,384.	41,510
26	Joint costs Check here If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

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t X	Balance Sheet					
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			26.	1	20,379.
2	Savings and temporary cash investments		1	6,226.	2	265,255.
3	Pledges and grants receivable, net		3			
4	Accounts receivable, net		4			
5	Receivables from current and former officers, dir	ectors,	trustees, key			
	employees, and highest compensated employee					
	of Schedule L			5		
6	Receivables from other disqualified persons (as					
	4958(f)(1)) and persons described in section 495					
	Part II of Schedule L			6		
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			4,381.	9	5,372
10 a	Land, buildings, and equipment cost or other					
	basis Complete Part VI of Schedule D	10a	21,917.			
b	Less accumulated depreciation	10b	5,578.	4,383.	10c	16,339.
11	Investments - publicly traded securities			11	7,077.	
12	Investments - other securities See Part IV, line 1			12		
13	Investments - program-related See Part IV, line		13			
14	Intangible assets	· · · · · · · · · · · · · · · · · · ·	14			
15	Other assets See Part IV, line 11	3,500.	15	7,033		
16	Total assets. Add lines 1 through 15 (must equa	18,516.	16	321,455		
17	Accounts payable and accrued expenses		11,532.	17	18,085	
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability Complete 6	Part IV	of Schedule D		21	
22	Payables to current and former officers, director	s, trust	ees, key employees,			
	highest compensated employees, and disqualific	ed pers	ons Complete Part II			
	of Schedule L				22	
23	Secured mortgages and notes payable to unrela	ited thi	d parties	25,000.	23	5,000
24	Unsecured notes and loans payable to unrelated	d third j	parties		24	
25	Other liabilities Complete Part X of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			36,532.	26	23,085
	Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
	lines 27 through 29, and lines 33 and 34.					
27	Unrestricted net assets			-59,853.	27	126,901
28	Temporarily restricted net assets		41,837.	28	171,469	
29	Permanently restricted net assets			29		
	Organizations that do not follow SFAS 117, cl	ere 🕨 🔲 and				
	complete lines 30 through 34.					
30	Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building, or eq	Juipmei	it fund		31	
32	Retained earnings, endowment, accumulated in	come,	or other funds		32	
33	Total net assets or fund balances		Ī	-18,016.	33	298,370
				_ 18,516.		
	1 2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, diremployees, and highest compensated employee of Schedule L 6 Receivables from other disqualified persons (as 4958(f)(1)) and persons described in section 495 Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment- cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 1 13 Investments - program-related See Part IV, line 1 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal to the security payable and accrued expenses) 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete for Schedule L 22 Payables to current and former officers, director highest compensated employees, and disqualified of Schedule L 23 Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated Unsecured notes and loans payable to unrelated Other liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or ed assets 32 Retained earnings, endowment, accumulated in Retained earnings, endowment, accumulated in	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, employees, and highest compensated employees Com of Schedule L 6 Receivables from other disqualified persons (as defined 4958(f)(1)) and persons described in section 4958(c)(3)(Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 3- 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Payables to current and former officers, directors, truster highest compensated employees, and disqualified persof Schedule L 23 Secured mortgages and notes payable to unrelated third potentials and the program of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment 25 Retained earnings, endowment, accumulated income, or complete lines 30 through 34.	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis Complete Part IV of Schedule D 10a 21,917. b Less accumulated depreciation 10b 5,578. 11 Investments - publicity traded securities 11 Investments - program-related See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 11 Escrow or custodal account liability Complete Part IV of Schedule D 12 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 10 Secured mortgages and notes payable to unrelated third parties 10 Unsecured notes and loans payable to unrelated third parties 11 Unsecured notes and loans payable to unrelated third parties 12 Other liabilities. Add lines 17 through 25 12 Organizations that follow SFAS 117, check here	(A) Beginning of year 1	Cash - non-interest-bearing 2.5

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Name of the organization

INTERNATIONAL ACTION, INC. 05-0591194 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) 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) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c Type III - Functionally integrated d ____ Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(ı) (ii) A family member of a person described in (i) above? 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization organization in col. in col. (i) listed in your organization in col organization support (i) organized in the (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes

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Schedule A (Form 990 or 990-EZ) 2009

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Schedule A (Form 990 or 990 EZ) 2009 INTERNATIONAL ACTION, INC. 05-0591194 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (a) 2005 Calendar year (or fiscal year beginning in) (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 21,467 211,575. 320,633. 289,944. 1,054,290 1,897,909. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 211,575. 320,633. 289,944 21,467. 4 Total. Add lines 1 through 3 1.054.290 1.897.909. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 762,945. 6 Public support. Subtract line 5 from line 4 1,134,964, Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 320,633 21,467. 211,575 289,944 7 Amounts from line 4 1,054,290 1,897,909. 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 2,707 968 661 1. 1,836 6,173. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital 19 19. assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 1,904,101, 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 59.61 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 86.53 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 %

16a	33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and		
	stop here. The organization qualifies as a publicly supported organization	$\triangleright X$]
b	33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box		_
	and stop here. The organization qualifies as a publicly supported organization		╛
17a	10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,		
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization		
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization]
b	10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or		
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the		
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	ightharpoons	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	ightharpoons]

Schedule A (Form 990 or 990-EZ) 2009

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Schedule À (Form 990 or 990 EZ) 2009 Part III Support Schedule for Or	ganizations	Described in	Section 509(a)(2) (Complete only	ıf you checked the bo	Page 3 ox on line 9 of Part I.)
Section A. Public Support		1 410000			1 1 2 2 2 2	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and				1		
membership fees received (Do not						
include any "unusual grants ")		ļ			ļ	
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-			į			
iness under section 513						
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						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b					1	
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for t	he organization	's first, second, thii	d, fourth, or fifth t	ax vear as a secti	on 501(c)(3) organiz	zation.
check this box and stop here	J			,	(//)	· ▶ □
Section C. Computation of Public	Support Pe	ercentage	 -			
15 Public support percentage for 2009 (lir			column (f))		15	%
16 Public support percentage from 2008		=	``'		16	%
Section D. Computation of Inves						Y
17 Investment income percentage for 200		- -			17	%
18 Investment income percentage from 20	•	• • • • • • • • • • • • • • • • • • • •	,		18	%
19a 33 1/3% support tests - 2009. If the o			on line 14, and line	e 15 is more than	<u> </u>	

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

Schedule A (Form 990 or 990-EZ) 2009

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more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number INTERNATIONAL ACTION, INC. 05-0591194 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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Schedule D (Form 990) 2009

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Sche	dule D (Form 990) 2009 INTERNA	TIONAL ACT	ION,	INC.			C)5-0 <u>5</u>	91194	Page 2
Pa	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, o	r Othe	r Simila	r Asse	ts (contir	nued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following that	are a sig	ınıfıcant u	ise of its	collection	items
	(check all that apply)		_							
а	Public exhibition	d			hange prograi					
b	Scholarly research	е	(Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	•		-	•			se in Parl	t XIV	
5	During the year, did the organization solicit o					r sımılar :	assets		٦	
	to be sold to raise funds rather than to be ma								<u> Yes</u>	No_
Par	t IV Escrow and Custodial Arran		ete if org	anızatıon aı	nswered "Yes	to Form	1 990, Par	t IV, line	9, or	
	reported an amount on Form 990, Pa			 						
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for o	contribution	s or other ass	ets not i	ncluded	_	7	
	on Form 990, Part X?							L_	」 Yes	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing t	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						_1d			
е	Distributions during the year						1e			
f	Ending balance						1f		-	
2a	Did the organization include an amount on F	orm 990, Part X, line	217						Yes	L No
	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	·			T .					
		(a) Current year	(b) P	rior year	(c) Two years	back (d) Three ye	ears back	(e) Four	years back_
1a	Beginning of year balance					<u> -</u> -				
b	Contributions				<u> </u>					
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities		İ							
	and programs									
f	Administrative expenses						· · · · · · · · · · · · · · · · · · ·			
9	End of year balance		<u> </u>	· · ·	L				l	
2	Provide the estimated percentage of the year	r end balance held a								
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		%								
3а	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ınd admınıster	ed for th	e organiz	ation	г	
	by									Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations		_						3a(II)	
b	If "Yes" to 3a(ıı), are the related organization:	·							_3b	
A Do	Describe in Part XIV the intended uses of the									
Pai	rt VI Investments - Land, Building									
	Description of investment	(a) Cost or o			or other		cumulate	d	(d) Book	value
		basis (investi	nent)	basis	(other)	dep	reciation			
	Land	-					··-			
b	Buildings				2 000					F 0 2
С	Leasehold improvements				2,000.			17.		583.
d	Equipment			1	8,025.		4,40		1	3,617.
	Other				1,892.			53.	4.4	1,139.
Tota	I. Add lines 1a through 1e (Column (d) must e	equai ⊦orm 990, Part	X, colun	nn (B), line i	1U(C))					5,339.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 INTERNATIO	NAL ACTION, INC	<u> </u>	05-0591194 Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation f-year market value
Financial derivatives			
Closely-held equity interests			
Other			
	 		
	 		· · · · · · · · · · · · · · · · · · ·
	 		
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)		·····	
Part VIII Investments - Program Related.	See Form 990, Part X, line 13		·
			od of valuation
(a) Description of investment type	(b) Book value		f-year market value
	-		
T-1-1 (0-1/h)			
Total (Col (b) must equal Form 990, Part X, col (B) line 13) ► Part IX Other Assets. See Form 990, Part X, Irr	0.15		
	a) Description		(b) Book value
			(8) 2001. 14:40
Total. (Column (b) must equal Form 990, Part X, col (B) II	ne 15)		>
Part X Other Liabilities. See Form 990, Part X		4 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
1 (a) Description of liability		(b) Amount	
Federal income taxes			
Total. (Column (b) must equal Form 990, Part X, col (B) li	ne 25.)		
2. FIN 48 Footnote In Part XIV, provide the text of the fo		financial statements that repo	its the organization's liability for
uncertain tax positions under FIN 48		statements that repu	. to the organization o hability for
932053 02-01-10			Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 INTERNATIONAL ACTION, INC.

_	dule D (Form 990) 2009 INTERNATIONAL ACTION, INC. t XI Reconciliation of Change in Net Assets from Form 990 to	Audi	tod Fina	ncial S	tato	05-l	05911	94 Page	<u>4</u>
		Auui	teu rina	T T	late	nen		FF CC0	_
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1				<u>55,668</u>	
2								<u>38,879</u>	
	3 Excess or (deficit) for the year Subtract line 2 from line 1							<u>16,789</u>	
4	Net unrealized gains (losses) on investments			4				-403	•
	5 Donated services and use of facilities 5								_
6	Investment expenses			6					
7	Prior period adjustments			7					
8	Other (Describe in Part XIV)			8				400	_
9	Total adjustments (net) Add lines 4 through 8			9				-403	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		Cal. D.	10	- · · · · ·			<u>16,386</u>	<u>•</u>
	t XII Reconciliation of Revenue per Audited Financial Stateme	nts w	vith Reve	enue p	er Ke	$\overline{}$			_
1	Total revenue, gains, and other support per audited financial statements				ļ	1	1,0	<u>55,265</u>	<u>•</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1	1						
a	Net unrealized gains on investments	2a		-4	03.				
b	Donated services and use of facilities	_2b	ļ						
С	Recoveries of prior year grants	2c	ļ						
d	Other (Describe in Part XIV)	2d	<u> </u>						
е	Add lines 2a through 2d				}	_2e_		-403	
3	Subtract line 2e from line 1				}	3	1,0	<u>55,668</u>	•
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1	1		ļ				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	 						
þ	Other (Describe in Part XIV)	4b	İ			-		_	
_ C	Add lines 4a and 4b				ļ	4c	4 0	0	
Dai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) † XIII Reconciliation of Expenses per Audited Financial Statement	onto l	A/ith Eve			5		55,668	<u>•</u>
		31112	with Exp	enses	per	-		20 070	_
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25				ŀ	1		38,87 <u>9</u>	·
2	Donated services and use of facilities	10-	j			į			
a	Prior year adjustments	2a 2b							
b	Other losses	1	<u> </u>						
d	Other (Describe in Part XIV)	2c 2d	<u> </u>						
e	Add lines 2a through 2d	_ <u>Zu</u>					•	0	
3	Subtract line 2e from line 1				ŀ	2e 3	7	38,879	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				}	_3		30,013	·
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1		}				
	Other (Describe in Part XIV)					ļ			
	Add lines 4a and 4b	4b	<u> </u>		\dashv	4-		0	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				ŀ	4c	7	38,879	
	rt XIV Supplemental Information				1	3	'	<u> </u>	÷
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II	Lines	1a and 4 F	Part IV Iu	nes 1h	and S	2h Part V	line 4 Part	
	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp								
	RT X: IN JUNE 2006, THE FINANCIAL ACCOUNTIN								
									_
(F	ASB) RELEASED FASB ASC 740-10, INCOME TAXES	S, I	HAT P	ROVI	DES	GU:	IDANC	E FOR	_
REI	PORTING UNCERTAINTY IN INCOME TAXES. FOR THE	HE Y	EARS	ENDE	D S	EPT:	EMBER	30,	_
20	10 AND 2009, INTERNATIONAL ACTION, INC. HAS	S DC	CUMEN	TED	ITS	COI	NSIDE	RATION	·
OF	FASB ASC 740-10 AND DETERMINED THAT NO MAY	<u>reri</u>	AL UN	CERT	AIN	TA	X POS	ITIONS	
QUZ	ALIFY FOR EITHER RECOGNITION OR DISCLOSURE	IN	THE F	INAN	CIA:	LS'	ГАТЕМ	ENTS.	
							<u>_</u>		

Schedule F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part IV, line 14b, 15, or 16. ➤ Attach to Form 990. ➤ See separate instructions.

Name of the organization					Employer identifi	cation number
INTERNATIONAL A	ACTION, I	NC.			05-059119	4
Part I General Info	rmation on A	ctivities Out	side the United States. Comp	lete if the organ	ization answered "\	/es"
to Form 990, Par				-		
			ds to substantiate the amount of the g selection criteria used to award the gr			Yes No
grantees engionity for the	ne grants or assi	stance, and the	selection chiena used to award the gr	ants of assistar	ice,	res No
2 For grantmakers. Desc	cribe in Part IV th	e organization's	procedures for monitoring the use of	grant funds out	side the United Stat	tes
3 Activities per Region (L	Jse Schedule F-1	(Form 990) if ad	ditional space is needed)	·		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region		(f) Total expenditures for region
				HUMANITARIA - PROVIDING	N AID SERVICE	
CENTRAL AMERICA AND				DRINKING WA	TER BY	
THE CARIBBEAN	1	10	PROGRAM SERVICES	INSTALLING	A CHLORINATOR	203,800.
•						
Totals	1	10				203,800.

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

Schedule F (Form 990) 2009

SEE PART IV FOR COLUMN (E) DESCRIPTIONS

932071 02-01-10

Schedule F (Form 990) 2009

Enter total number of other organizations or entities

က

05-0591194

Page 3

INTERNATIONAL ACTION, INC.

Schedule F (Form 990) 2009

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

Use Schedule F-1 (Form 990) if additional space is needed

1

Schedule F (Form 990) 2009 INTERNATIONAL ACTION, INC.	05-0591194 Page 4
Part IV Supplemental Information	
Complete this part to provide the information required in Part I, line 2, and any additional information	
PART I, LINE 3, COLUMN (E):	
DEGION COMBAL AVERTON AND MAD CARTERINA	
REGION: CENTRAL AMERICA AND THE CARIBBEAN	
/E) ODECTETO MUDEO OF OFFICERS IN DECTOR WINDOWS AND	annur an
(E) SPECIFIC TYPES OF SERVICES IN REGION: HUMANITARIAN AID	SERVICE -
PROVIDING CLEAN DRINKING WATER BY INSTALLING A CHLORINATOR	ON COMMINITARY
PROVIDING CLEAN DRINKING WATER BY INSTALLING A CHLORINATOR	ON COMMUNITY
WATER TANKS.	
THE THIRD	
	·- ·- ·- · · · · · · · · · · · · · · ·
	
	· · ·

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

INTERNATIONAL ACTION, INC.

Employer identification number 05-0591194

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
WATERBORNE DISEASES - CHOLERA, TYPHOID, HEPATITIS AND CHRONIC DIARRHEA
- ON A COMMUNITY LEVEL. INTERNATIONAL ACTION WORKS IN THE MOST
IMPOVERISHED COMMUNITIES IN THE CITY, DEMONSTRATING THAT AN INEXPENSIVE
CHLORINATOR CAN PROVIDE CLEAN WATER AND IMPROVE PUBLIC HEALTH.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
JANUARY 12TH 2010 WAS THE DATE OF THE MASSIVE EARTHQUAKE WHICH
DESTROYED MUCH OF THE CITY OF PORT-AU-PRINCE, KILLING MORE THAN
300,000, AND RENDERING 1.3 MILLION CITIZENS HOMELESS. INTERNATIONAL
ACTION AT FIRST SUPPLIED DRINKING WATER BY RENTING TRUCKS TO PROVIDE
NEIGHBORHOOD RESERVOIRS WITH EMERGENCY WATER WHICH WAS CHLORINATED FOR
SAFETY AND LATER BEGAN A SPECIAL PROGRAM TO MANUFACTURE, SHIP, AND
INSTALL WATER TANKS OF TWO SIZES 2000 GALLON FOR NEIGHBORHOOD WATER
TANKS AND 150 GALLON FOR SCHOOL INSTALLATIONS. WE HAVE DELIVERED 68
LARGE TANKS AND 300 SMALL TANK TO PORT-AU-PRINCE AND INSTALLED SOME IN
THE REFUGEE CAMPS, AND DAMAGED NEIGHBORHOODS OF THE CITY AND MORE THAN
60 TANKS AT SCHOOLS IN CITE SOLEIL. WE WILL CONTINUE THIS PROGRAM AND
PROBABLY MANUFACTURE AND SHIP MORE LARGE TANKS TO REPAIR THE WATER
SYSTEM OF PORT-AU-PRINCE.
FORM 990, PART VI, SECTION A, LINE 2: ANDREW WEISS AND BONNIE WEISS HAVE
A FAMILY RELATIONSHIP.

AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

Schedule O (Form 990) 2009

FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES WITH

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047
2009
Open to Public Inspection

Name of the organization

INTERNATIONAL ACTION, INC.

Employer identification number 05-0591194

FORM 990, PART VI, SECTION B, LINE 11: THE RETURN WAS PREPARED BY OUTSIDE

ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. A COPY OF THE FINAL FORM 990

WAS SENT BY REGULAR MAIL TO EACH MEMBER OF THE BOARD ASKING FOR COMMENTS

AND SUGGESTIONS. AFTER ALLOWING TWO WEEKS FOR COMMENTS THE 990 WAS

SUBMITTED TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE STAFF REGULARLY AVOIDS ANY

CONTRACTS OR FINANCIAL RELATIONS WHICH WOULD PRESENT A CONFLICT OF INTEREST

SITUATION. WE REGULARLY ANSWER TO THE BOARD ON ISSUES OF CONFLICT OF

INTERESTS AND SINCE OUR INCORPORATION IN 2003 HAVE NEVER FOUND A CASE OF

CONFLICT.

OF INTEREST MUST BE DISCLOSED BEFORE ANY TRANSACTION IS CONSUMMATED. IT IS
THE CONTINUING RESPONSIBILITY OF THE BOARD, OFFICERS, AND MANAGEMENT
EMPLOYEES TO SCRUTINIZE THEIR TRANSACTIONS AND OUTSIDE BUSINESS INTERESTS
AND RELATIONSHIPS FOR POTENTIAL CONFLICTS AND TO IMMEDIATELY MAKE SUCH
DISCLOSURES.

DISCLOSURES IN THE ORGANIZATION ARE MADE TO THE CHIEF EXECUTIVE OFFICER (OR

IF SHE OR HE IS THE ONE WITH THE CONFLICT, TO THE BOARD CHAIR), WHO BRINGS

THE MATTER TO THE ATTENTION OF THE BOARD. DISCLOSURES INVOLVING DIRECTORS

ARE MADE TO THE BOARD CHAIR, (OR IF SHE OR HE IS THE ONE WITH THE CONFLICT,

TO THE BOARD VICE-CHAIR) WHO BRINGS THESE MATTERS TO THE BOARD. THE BOARD

DETERMINES WHETHER A CONFLICT EXISTS AND, IN THE CASE OF AN EXISTING

CONFLICT, WHETHER THE CONTEMPLATED TRANSACTION MAY BE AUTHORIZED AS JUST,

FAIR, AND REASONABLE TO INTERNATIONAL ACTION.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

Schedule O (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

INTERNATIONAL ACTION, INC.

Employer identification number 05-0591194

TRANSACTIONS WITH PARTIES WITH CONFLICTING INTERESTS MAY BE UNDERTAKEN ONLY

IF ALL OF THE FOLLOWING ARE OBSERVED: THE CONFLICTING INTEREST IS FULLY

DISCLOSED, THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE

DISCUSSION AND APPROVAL OF SUCH TRANSACTION, A COMPETITIVE BID OR

COMPARABLE VALUATION EXISTS, AND THE BOARD HAS DETERMINED THAT THE

TRANSACTION IS IN THE BEST INTEREST OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD CONSULTED WITH THE STUDY

OF EXECUTIVE COMPENSATION OF NGO BY "PROFESSIONALS FOR NON-PROFITS" (PNP).

ACCORDING TO THE PNP STUDY, THE SALARIES ARE SIMILAR TO THOSE OF OTHER

SIMILAR NON-PROFIT ORGANIZATIONS. THE PROCEDURE AND DECISION IS DOCUMENTED

IN THE BOARD'S MINUTES.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S STAFF HANDBOOK

CONTAINING THE CONFLICT OF INTEREST POLICY, CORPORATE BY-LAWS AND FINANCIAL

STATEMENTS ARE SHARED WITH ANY DONOR WHO REQUESTS SUCH DOCUMENTS. OTHER

REQUESTS ARE CONSIDERED ON A CASE BY CASE BASIS.

FORM 990, PART XI, LINE 2C: THE AUDIT COMMITTEE WAS CREATED BY THE
BOARD IN OCTOBER, 2010 AND HAS NOT YET BEGAN TO FUNCTION. AFTER OUR
APRIL AUDIT WE WILL PROVIDE THE FINDINGS OF OUR AUDIT AND THE FINANCIAL
DATA ASSESSED TO THE AUDIT COMMITTEE FOR REVIEW. THEY WILL REPORT TO
THE BOARD AT THE NEXT MEETING.