

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)

2004

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2004 calendar year, or tax year beginning **JUL 1**, 2004, and ending **JUN 30**, 2005

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization AFRICARE	D Employer identification number 23 : 7116952
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 440 R STREET, N.W.	E Telephone number (202) 462-3614
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20001	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
		Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).	

G Website: ▶ WWW.AFRICARE.ORG

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

K Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **54,493,982**

H and **I** are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ▶

M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

		(A) Securities	(B) Other		
Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	10,218,828		
	b Indirect public support	1b	200,645		
	c Government contributions (grants)	1c	26,999,034		
	d Total (add lines 1a through 1c) (cash \$ 36,883,159 noncash \$ 535,348)	1d			37,418,507
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3 Membership dues and assessments	3			12,614
	4 Interest on savings and temporary cash investments	4			
	5 Dividends and interest from securities	5			362,665
	6a Gross rents	6a			
b Less: rental expenses	6b				
c Net rental income or (loss) (subtract line 6b from line 6a)	6c				
7 Other investment income (describe ▶)	7				
Revenue	8a Gross amount from sales of assets other than inventory	14,600,337	8a		
	b Less: cost or other basis and sales expenses	14,135,033	8b		
	c Gain or (loss) (attach schedule) <i>stmt 1</i>	465,304	8c		
	d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	465,304
Revenue	9 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	840,997		
	b Less: direct expenses other than fundraising expenses	9b	291,442		
c Net income or (loss) from special events (subtract line 9b from line 9a) <i>stmt 2</i>	9c			549,555	
Revenue	10a Gross sales of inventory, less returns and allowances	10a			
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11 Other revenue (from Part VII, line 103)	11			1,258,862	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			40,067,507	
Expenses	13 Program services (from line 44, column (B))	13			37,783,932
	14 Management and general (from line 44, column (C))	14			2,067,886
	15 Fundraising (from line 44, column (D))	15			547,171
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17			40,398,989
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			(331,482)
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			12,104,856
	20 Other changes in net assets or fund balances (attach explanation) <i>stmt 3</i>	20			(1,544,941)
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			10,228,433

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	520,487		407,787	112,700
26	Other salaries and wages	11,756,328	11,340,980	254,992	160,356
27	Pension plan contributions	560,858	448,238	75,491	37,129
28	Other employee benefits	1,141,135	944,396	132,217	64,522
29	Payroll taxes	2,322,397	2,216,041	84,466	21,890
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees and audit	224,363	49,109	175,254	
33	Supplies	4,539,311	4,456,182	31,787	51,342
34	Telephone	896,577	824,616	59,165	12,796
35	Postage and shipping				
36	Occupancy	2,000,445	1,864,528	135,917	
37	Equipment rental and maintenance	222,291	190,051	31,314	926
38	Printing and publications				
39	Travel	2,375,236	2,286,397	72,478	16,361
40	Conferences, conventions, and meetings	1,811,534	1,760,145	18,910	32,479
41	Interest	2,734		2,734	
42	Depreciation, depletion, etc. (attach schedule)	182,815		182,815	
43	Other expenses not covered above (itemize): a				
	b				
	c				
	d				
	e Statement 4	11,842,478	11,403,249	402,559	36,670
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	40,398,989	37,783,932	2,067,886	547,171

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? <input checked="" type="checkbox"/> SEE STATEMENT 5	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)
a Health-establish and strengthen rural health clinics and primary health services networks where basic medical care is limited or non-existent. Provide HIV/AIDS education and prevention training. Water resources development-well construction, irrigation and sanitation. (Grants and allocations \$ _____)	10,860,775
b Food security, relief and refugee assistance-improved food access, availability, and utilization to promote active and healthy lives. Provide emergency aid to victims and refugees caused by natural and man-made disasters. (Grants and allocations \$ _____)	9,294,627
c Agriculture and small scale irrigation-improve the cultivation of crops, livestock, irrigation, natural resource management farm infrastructure and farmer credit and training in agribusiness practices. (Grants and allocations \$ _____)	8,490,804
d Integrated rural development-support rural areas with help in water resources, irrigation, agriculture and health to reduce food and water shortages caused by drought and large influxes of immigrants. (Grants and allocations \$ _____)	6,228,521
e Other program services (attach schedule) (Grants and allocations \$ _____)	2,909,205
f Total of Program Service Expenses (should equal line 44, column (B), Program services).	37,783,932

stmt 6

Part IV Balance Sheets (See page 25 of the instructions.)

				(A)		(B)
				Beginning of year		End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.						
Assets	45	Cash—non-interest-bearing			45	
	46	Savings and temporary cash investments		13,717,458	46	16,437,169
	47a	Accounts receivable	47a 12,907			
	b	Less: allowance for doubtful accounts	47b	13,424	47c	12,907
	48a	Pledges receivable	48a			
	b	Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable		7,107,890	49	8,381,492
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)	51a			
	b	Less: allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges			53	
	54	Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54	
	55a	Investments—land, buildings, and equipment: basis	55a			
	b	Less: accumulated depreciation (attach schedule)	55b		55c	
56	Investments—other (attach schedule) STMT 7		9,757,368	56	6,875,328	
57a	Land, buildings, and equipment: basis	57a 4,972,352				
b	Less: accumulated depreciation (attach schedule)	57b 2,585,499	2,547,308	57c	2,386,853	
58	Other assets (describe <input type="checkbox"/> STMT 8)		631,606	58	1,794,278	
59	Total assets (add lines 45 through 58) (must equal line 74)		33,775,054	59	35,888,027	
Liabilities	60	Accounts payable and accrued expenses		5,243,221	60	7,547,229
	61	Grants payable			61	
	62	Deferred revenue		16,316,421	62	18,050,938
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule) Capital			64a	
	b	Mortgages and other notes payable (attach schedule) Leases		110,556	64b	61,427
65	Other liabilities (describe <input type="checkbox"/>)			65		
66	Total liabilities (add lines 60 through 65)		21,670,198	66	25,659,594	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted		8,764,664	67	6,864,998
	68	Temporarily restricted		322,129	68	345,372
	69	Permanently restricted		3,018,063	69	3,018,063
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		12,104,856	73	10,228,433
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		33,775,054	74	35,888,027

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements . . . ▶	a	49,931,182
b	Amounts included on line a but not on line 12, Form 990:		
	(1) Net unrealized losses on investments . . . \$ (465,802)		
	(2) Donated services and use of facilities \$ 10,038,035		
	(3) Recoveries of prior year grants . . . \$		
	(4) Other (specify):		
 \$		
	Add amounts on lines (1) through (4) ▶	b	9,572,233
c	Line a minus line b ▶	c	40,358,949
d	Amounts included on line 12, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$		
	(2) Other (specify): STMT 10		
	special event		
	direct costs \$ (291,442)		
	Add amounts on lines (1) and (2) ▶	d	(291,442)
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	40,067,507

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements . . . ▶	a	50,728,466
b	Amounts included on line a but not on line 17, Form 990:		
	(1) Donated services and use of facilities \$ 10,038,035		
	(2) Prior year adjustments reported on line 20, Form 990 \$		
	(3) Losses reported on line 20, Form 990 \$		
	(4) Other (specify):		
	STMT 9 \$ 291,442		
	Add amounts on lines (1) through (4) ▶	b	10,329,477
c	Line a minus line b ▶	c	40,398,989
d	Amounts included on line 17, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$		
	(2) Other (specify):		
 \$		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	40,398,989

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
JULIUS E. COLES 440 R STREET, N.W. WASH DC 20001	President 40 HRS	159,067		
JEANNINE B. SCOTT 440 R STREET, N.W. WASH DC 20001	Senior VP, 40 HRS	122,855		
JOHN D. CAMPBELL 440 R STREET, N.W. WASH DC 20001	VP, Finance/Mgt. 40 HRS	125,865		
LMICHAEL GREEN 440 R STREET, N.W. WASH DC 20001	VP, Dev/Mktg., 40 HRS	112,700		

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76	✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	✓
78b	b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	✓
	b If "Yes," enter the name of the organization ▶ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures. See line 81 instructions 81a _____ -0-		
81b	b Did the organization file Form 1120-POL for this year?	81b	✓
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	✓
	b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 10,038,035		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✓
83b	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	✓
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	✓
	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85a	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
85b	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	c Dues, assessments, and similar amounts from members. 85c N/A		
	d Section 162(e) lobbying and political expenditures. 85d N/A		
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices. 85e N/A		
	f Taxable amount of lobbying and political expenditures (line 85d less 85e). 85f N/A		
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
85h	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86a	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12. 86a N/A		
86b	b Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87a	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a N/A		
87b	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ -0- ; section 4912 ▶ -0- ; section 4955 ▶ -0-		
89b	b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	✓
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ -0-		
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ -0-		
90a	List the states with which a copy of this return is filed ▶ STMT 13		
90b	b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) 90b 105		
91	The books are in care of ▶ AFRICARE Telephone no. ▶ (202) 462-3614 Located at ▶ 440 R STREET, N.W. WASHINGTON, DC ZIP + 4 ▶ 20001		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here, ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					12,614
95 Interest on savings and temporary cash investments			14	362,665	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	465,304	
101 Net income or (loss) from special events					549,555
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a <u>Miscellaneous</u>					1,258,862
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				827,969	1,821,031
105 Total (add line 104, columns (B), (D), and (E))					2,649,000

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	STMT 11

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here

Signature of officer: John D. Campbell Date: 12/14/06

JOHN D. CAMPBELL, VICE PRESIDENT, FINANCE AND MANAGEMENT

Type or print name and title.

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____

Check if self-employed

Preparer's SSN or PTIN (See Gen. Inst. W): _____

Firm's name (or yours if self-employed), address, and ZIP + 4: _____

EIN: _____

Phone no.: _____

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No. 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2004

Supplementary Information—(See separate instructions.)

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

AFRICARE

Employer identification number

23 : 7116952

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Chinwe Efiiong 440 R STREET, N.W. WASH DC 20001	Country Rep, Nigeria 40 Hours	\$73,410		\$28,405
Alan Alemian 440 R STREET, N.W. WASH DC 20001	Regional Director 40 Hours	\$96,399		
Jeannette Carter 440 R STREET, N.W. WASH DC 20001	Country Rep, Liberia 40 Hours	\$67,418		\$28,000
Charles DeBose 440 R STREET, N.W. WASH DC 20001	Health Program Dir. 40 Hours	\$92,615		
Peter Persell 440 R STREET, N.W. WASH DC 20001	Country Rep, Tanzania 40 Hours	\$77,971		\$14,360
Total number of other employees paid over \$50,000 ▶	35			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
PricewaterhouseCoopers 1800 Tysons Boulevard, McLean, VA 22102	Auditing	\$579,480
Thompson, Cobb, Bazilio & Associates 1101 15th St. N.W. Suite 400, Washington, DC 20005	Accounting	\$240,121
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		✓
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		✓
b Lending of money or other extension of credit?		✓
c Furnishing of goods, services, or facilities?		✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	✓	
e Transfer of any part of its income or assets?		✓
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		✓
b Do you have a section 403(b) annuity plan for your employees?	✓	
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		✓
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		✓

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	38,144,585	32,550,724	33,004,535	28,511,318	132,211,162
16 Membership fees received	13,700	29,000	10,020	16,350	69,070
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	639,182	771,019	(288,302)	(265,679)	856,220
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	543,133	975,188	852,373	956,424	3,327,118
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	1,668,037	329,892	175,802	295,473	2,469,204
23 Total of lines 15 through 22	41,008,637	34,655,823	33,754,428	29,513,886	138,932,774
24 Line 23 minus line 17	40,369,455	33,884,804	34,042,730	29,779,565	138,076,554
25 Enter 1% of line 23	410,086	346,558	337,544	295,139	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					2,761,531
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					1,208,556
c Total support for section 509(a)(1) test: Enter line 24, column (e)					138,076,554
d Add: Amounts from column (e) for lines: 18 3,327,118 19 2,469,204 22 2,469,204 26b 1,208,556					7,004,878
e Public support (line 26c minus line 26d total)					131,071,676
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					94.9 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A	(2003)	(2002)	(2001)	(2000)	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2003)	(2002)	(2001)	(2000)	
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c
d Add: Line 27a total and line 27b total					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15. **None**

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

Check a if the organization belongs to an affiliated group. Check b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying).	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 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	41	
42	Grassroots nontaxable amount (enter 25% of line 41).	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers		✓	
b Paid staff or management (include compensation in expenses reported on lines c through h.)		✓	
c Media advertisements.		✓	
d Mailings to members, legislators, or the public		✓	
e Publications, or published or broadcast statements		✓	
f Grants to other organizations for lobbying purposes		✓	
g Direct contact with legislators, their staffs, government officials, or a legislative body.		✓	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		✓	
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

Table with columns 'Yes' and 'No'. Rows include: (i) Cash (checked No), (ii) Other assets (checked No), b Other transactions: (i) Sales or exchanges of assets (checked No), (ii) Purchases of assets (checked No), (iii) Rental of facilities (checked No), (iv) Reimbursement arrangements (checked No), (v) Loans or loan guarantees (checked No), (vi) Performance of services (checked No), c Sharing of facilities, equipment, mailing lists, other assets, or paid employees (checked No).

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. The table contains 10 empty rows for data entry.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [] Yes [X] No

b If "Yes," complete the following schedule:

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. The table contains 10 empty rows for data entry.

Form 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT 1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
MERRILL LYNCH/HOLLAND CAPITAL	14,600,337	14,135,033	0	465,304
TO FORM 990, PART I, LINE 8	<u>14,600,337</u>	<u>14,135,033</u>	<u>0</u>	<u>465,304</u>

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT 2
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUTION INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
BISHOP WALKER MEMORIAL DINNER	840,997		840,997	291,442	549,555
TO FM 990, PART I, LINE 9	<u>840,997</u>		<u>840,997</u>	<u>291,442</u>	<u>549,555</u>

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT 3
DESCRIPTION	AMOUNT	
UNREALIZED LOSS ON INVESTMENTS	(465,802)	
NONOPERATING ADDITIONAL MINIMUM LIABILITY PENSION EXPENSE	(1,079,139)	
TOTAL TO FORM 990, PART I, LINE 20	<u>(1,544,941)</u>	

FORM 990	OTHER EXPENSES	STATEMENT 4
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
FREIGHT	10,976,130	10,973,340	2,488	302
CONSTRUCTION AND SUBCONTRACTS	3,879,078	3,627,711	5,929	245,438
VEHICLE PURCHASES, REPAIR AND MAINTENANCE	3,943,006	3,901,560	35,022	6,424
PROFESSIONAL AND CONTRACTUAL SERVICES	699,390	600,266	54,674	44,450
OFFICE EQUIPMENT & FURNISHINGS	542,999	527,645	13,276	2,078
INSURANCE	404,380	371,748	32,632	
ADVERTISING	121,193	102,927	4,228	14,038
RECRUITMENT	41,797	29,481	7,408	4,908
OTHER	1,563,982	1,306,606	246,902	10,474
DONATED FREIGHT	(10,038,035)	(10,038,035)	-	
SPECIAL EVENT - DIRECT EXPENSE	(291,442)	-		(291,442)
TOTAL TO FORM 990, LINE 43	<u>11,842,478</u>	<u>11,403,249</u>	<u>402,559</u>	<u>36,670</u>

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT 5
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EXPLANATION

THE PURPOSE OF THE ORGANIZATION IS TO ASSIST IN THE IMPROVEMENT OF THE HEALTH OF THE PEOPLE OF AFRICA, RESULTING FROM IMPROVED ECONOMIC, AGRICULTURAL, EDUCATIONAL, FOOD SECURITY AND SOCIAL DEVELOPMENT IN HARMONY WITH THE ENVIRONMENT.

FORM 990	OTHER PROGRAM SERVICES	STATEMENT 6
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DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
GENERAL - LITERACY AND VOCATIONAL TRAINING, MICRO-ENTERPRISE, AND CIVIL SOCIETY DEVELOPMENT		2,909,205
TOTAL TO FORM 990, PART III, LINE E		<u>2,909,205</u>

STATEMENT (S)

4, 5, 6

AFRICARE

23-7116952

FORM 990	OTHER INVESTMENTS	STATEMENT 7
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DESCRIPTION	VALUATION METHOD	AMOUNT
U.S. GOVERNMENT BONDS	MARKET VALUE	1,788,587
COMMON STOCK	MARKET VALUE	4,223,272
CORPORATE BONDS	MARKET VALUE	734,836
MUTUAL FUNDS	MARKET VALUE	128,633
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		<u>6,875,328</u>

FORM 990	OTHER ASSETS	STATEMENT 8
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DESCRIPTION	AMOUNT
EMPLOYEE RECEIVABLES AND ADVANCES	51,376
OTHER RECEIVABLES AND ADVANCES	1,555,284
PREPAID EXPENSES	41,959
PENSION INTANGIBLE ASSET	145,659
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	<u>1,794,278</u>

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT 9
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DESCRIPTION	AMOUNT
SPECIAL EVENT EXPENSES	291,442
TOTAL TO FORM 990, PART IV-B, b, (4)	<u>291,442</u>

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT 10
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DESCRIPTION	AMOUNT
SPECIAL EVENT EXPENSES	(291,442)
TOTAL TO FORM 990, PART IV-A, d, (2)	<u>(291,442)</u>

STATEMENT (S)

7, 8, 9, 10

AFRICARE

23-7116952

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 11

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
94	PUBLIC AWARENESS OF THE SOCIAL PROBLEMS IN AFRICA IS ENHANCED THROUGH MEMBERSHIP. SPECIAL FUND RAISING EVENT PROMOTES AFRICARE'S OBJECTIVE TO AID AFRICAN COUNTRIES; THE FUNDS PRODUCED BY THIS ACTIVITY ARE USED TO SUPPORT AFRICARE'S ACTIVITIES.
101	
103a	MISCELLANEOUS PROGRAM RELATED INCOME PERTAINING TO AFRICARE'S EXEMPT PURPOSE

SCHEDULE A	OTHER INCOME	STATEMENT 12
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DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT
MISCELLANEOUS PROJECT REVENUE	1,668,037	329,892	175,802	295,473
TOTAL TO SCHEDULE A, LINE 22	1,668,037	329,892	175,802	295,473

List of States Where Form 990 is Filed

Alabama	New Hampshire
Alaska	New Jersey
Arizona	New Mexico
Arkansas	New York
California	North Carolina
Colorado	North Dakota
Connecticut	Ohio
District of Columbia	Oklahoma
Florida	Oregon
Georgia	Pennsylvania
Illinois	Rhode Island
Kansas	South Carolina
Kentucky	Tennessee
Maine	Utah
Maryland	Virginia
Massachusetts	Washington
Michigan	West Virginia
Minnesota	Wisconsin
Mississippi	