

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

OMB No 1545-0047

**2003**Open to Public  
Inspection**A** For the 2003 calendar year, or tax year beginning

and ending

**B** Check if  
applicable

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

Please  
use IRS  
label or  
print or  
type  
See  
Specific  
Instruc-  
tions**C** Name of organization**THE GLOBAL HUNGER PROJECT**

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

**15 EAST 26TH STREET**

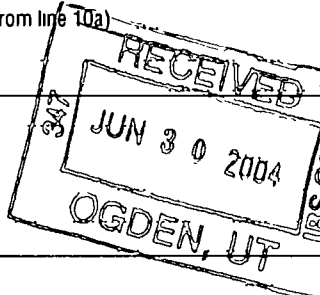
Room/suite

**1401**

City or town, state or country, and ZIP + 4

**NEW YORK, NY 10010****D** Employer identification number**94-2443282****E** Telephone number**(212) 532-4255****F** Accounting method☐ Cash ☒ Accrual☐ 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).**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? **N/A** ☐ Yes ☐ No  
(If "No," attach a list)**H(d)** Is this a separate return filed by an or-  
ganization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶**G** Website: **WWW.THP.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.**M** Check ☐ if the organization is not required to attach  
Sch. B (Form 990, 990-EZ, or 990-PF)**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **10,961,779.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received					
	a	Direct public support	1a	8,322,266.			
	b	Indirect public support	1b	27,473.			
	c	Government contributions (grants)	1c				
	d	Total (add lines 1a through 1c) (cash \$ 8,291,097. noncash \$ 58,642.)	1d	8,349,739.			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2				
	3	Membership dues and assessments	3				
	4	Interest on savings and temporary cash investments	4	222,327.			
	5	Dividends and interest from securities	5				
	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	(A) Securities	2,308,434.	8a		
	b	Less cost or other basis and sales expenses	2,258,098.	8b			
	c	Gain or (loss) (attach schedule)	50,336.	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B)) <b>STMT 1</b>	8d	50,336.			
	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				
	b	Less direct expenses other than fundraising expenses	9b				
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
	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	81,279.				
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	8,703,681.				
Expenses	13	Program services (from line 44, column (B))	13	5,595,631.			
	14	Management and general (from line 44, column (C))	14	1,159,758.			
	15	Fundraising (from line 44, column (D))	15	628,203.			
	16	Payments to affiliates (attach schedule)	16				
	17	Total expenses (add lines 13 and 14, column (A))	17	7,383,592.			
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	1,320,089.			
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	5,609,471.			
	20	Other changes in net assets or fund balances (attach explanation) <b>SEE STATEMENT 2</b>	20	<65,384.>			
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	6,864,176.			

323001  
12-17-03

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2003)

SCANNED JUL 13 2004

**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 Page 2

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 \$3194576. noncash \$	22 3,194,576.	3,194,576.	STATEMENT 8	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 518,810.	249,781.	179,565.	89,464.
26 Other salaries and wages	26 1,103,205.	531,137.	381,831.	190,237.
27 Pension plan contributions	27 113,768.	54,774.	39,376.	19,618.
28 Other employee benefits	28 237,995.	114,583.	82,372.	41,040.
29 Payroll taxes	29 400,278.	192,714.	138,541.	69,023.
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33			
34 Telephone	34 62,829.	31,618.	23,003.	8,208.
35 Postage and shipping	35 62,501.	44,112.	7,949.	10,440.
36 Occupancy	36 373,985.	180,054.	129,441.	64,490.
37 Equipment rental and maintenance	37			
38 Printing and publications	38 105,058.	102,544.	2,514.	
39 Travel	39 386,029.	262,296.	45,442.	78,291.
40 Conferences, conventions, and meetings	40 294,907.	279,367.	7,490.	8,050.
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42 29,902.	14,397.	10,349.	5,156.
43 Other expenses not covered above (itemize)				
a PROFESSIONAL FEES	43a 294,722.	244,966.	40,924.	8,832.
b CORPORATE EXPENSES	43b 82,011.	39,485.	28,384.	14,142.
c DATA PROCESSING	43c 40,654.	19,573.	14,071.	7,010.
d OFFICE	43d 82,362.	39,654.	28,506.	14,202.
e	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 7,383,592.	5,595,631.	1,159,758.	628,203.

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**

What is the organization's primary exempt purpose? **SEE STATEMENT 3**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

**Program Service Expenses**  
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a SEE STATEMENT 4		
	(Grants and allocations \$ 2,062,453.)	3,039,804.
b SEE STATEMENT 5		
	(Grants and allocations \$ 1,000.)	960,277.
c SEE STATEMENT 6		
	(Grants and allocations \$ 971,123.)	1,408,897.
d SEE STATEMENT 7		
	(Grants and allocations \$ 160,000.)	186,653.
e Other program services (attach schedule)	(Grants and allocations \$ )	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		5,595,631.

**Part IV Balance Sheets**

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing	1,547,039.	45	2,677,552.
	46 Savings and temporary cash investments	2,675,781.	46	3,107,590.
	47 a Accounts receivable	47a 3,000.		
	b Less allowance for doubtful accounts	47b	24,713.	47c 3,000.
	48 a Pledges receivable	48a 1,138,004.		
	b Less allowance for doubtful accounts	48b 129,278.	1,399,226.	48c 1,008,726.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	39,184.	53	12,705.
	54 Investments - securities STMT 9 STMT 10 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	58,912.	54	157,207.
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation	55b	55c	
56 Investments - other	SEE STATEMENT 11	10,000.	56	10,000.
57 a Land, buildings, and equipment basis	57a 265,628.			
b Less accumulated depreciation STMT 12	57b 139,206.	156,324.	57c 126,422.	
58 Other assets (describe <input checked="" type="checkbox"/> SEE STATEMENT 13 )	231,737.	58	312,889.	
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)	6,142,916.	59	7,416,091.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	339,706.	60	372,868.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input checked="" type="checkbox"/> DEFERRED RENT )	193,739.	65	179,047.
66 <b>Total liabilities</b> (add lines 60 through 65)	533,445.	66	551,915.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	3,839,922.	67	5,331,876.
	68 Temporarily restricted	1,769,549.	68	1,532,300.
	69 Permanently restricted		69	
	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 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	5,609,471.	73	6,864,176.
	74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	6,142,916.	74	7,416,091.

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 VI Other Information**

	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	X
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	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
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	X
80 a 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	X
b If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a Enter direct or indirect political expenditures. See line 81 instructions. 81a 0.		
b Did the organization file Form 1120-POL for this year?	81b	X
82 a 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	X
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 N/A		
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
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	
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
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		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
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	
86 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12 86a N/A		
b Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87 501(c)(12) organizations. Enter a Gross income from members or shareholders 87a N/A		
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	X
89 a 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.		
b 501(c)(3) and 501(c)(4) organizations. 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	X
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.
90 a List the states with which a copy of this return is filed CA, NY, IL, CT, MA, NJ, NM		
b Number of employees employed in the pay period that includes March 12, 2003 90b 23		
91 The books are in care of THE GLOBAL HUNGER PROJECT Telephone no (212) 532-4255		

Located at 15 EAST 26TH STREET, SUITE 1401, NEW YORK, NY ZIP + 4 10010

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

**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) Exclu- sion 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					
95 Interest on savings and temporary cash investments			14	222,327.	
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	50,336.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a OTHER			01	3,179.	
b AFRICA PRIZE			01	78,100.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		353,942.	0.
105 Total (add line 104, columns (B), (D), and (E))					353,942.

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)

**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
N/A	%			
	%			
	%			
	%			

**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).

I have prepared this return, accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and I am not aware of any information of which preparer has any knowledge.

06/25/04

Date

Type or print name and title

Date

Check if

Preparer's SSN or PTIN

Preparer's signature

**SCHEDULE A**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Organization Exempt Under Section 501(c)(3)**(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust**Supplementary Information-(See separate instructions.)**▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2003**

Name of the organization

THE GLOBAL HUNGER PROJECT

Employer identification number

94 2443282

**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
LENA ARIOLA ----- OZONE PARK, NY	CONTROLLER 40	76,500.	11,475.	0.
JOANNA RYDER ----- HERMOSA BEACH, CA	DIR US FNDNG 40	68,300.	10,245.	0.
FITIGU TADESSE ----- NEW YORK, NY	VP AFRICA 40	117,500.	17,625.	0.
BADIUL MAJUMDAR ----- DHAKA, BANGLADESH	VP BANGLADESH 40	90,200.	13,530.	0.
LAURA BURT ----- CLAREMONT, CA	DIR US FNDNG 40	67,631.	10,145.	0.
Total number of other employees paid over \$50,000 ▶	5			

**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
NONE ----- ----- ----- ----- ----- ----- ----- ----- ----- -----		
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 )

1 X

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?

2a X

b Lending of money or other extension of credit?

2b X

c Furnishing of goods, services, or facilities?

2c X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990

2d X

e Transfer of any part of its income or assets?

2e X

- 3 a 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.)

3a X

b Do you have a section 403(b) annuity plan for your employees?

3b X

- 4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?

4 X

**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 6 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2003

**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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	6,081,564.	7,390,163.	7,302,143.	6,552,197.	27,326,067.
<b>16</b> Membership fees received					
<b>17</b> 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					
<b>18</b> 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	121,058.	175,749.	138,945.	103,748.	539,500.
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> 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.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	49,538.	36,211.	SEE STATEMENT 15		85,749.
<b>23</b> Total of lines 15 through 22	6,252,160.	7,602,123.	7,441,088.	6,655,945.	27,951,316.
<b>24</b> Line 23 minus line 17	6,252,160.	7,602,123.	7,441,088.	6,655,945.	27,951,316.
<b>25</b> Enter 1% of line 23	62,522.	76,021.	74,411.	66,559.	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24					<b>26a</b> 559,026.
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 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					<b>26b</b> 2,286,765.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					<b>26c</b> 27,951,316.
d Add: Amounts from column (e) for lines 18 539,500. 19 22 85,749. 26b 2,286,765.					<b>26d</b> 2,912,014.
e Public support (line 26c minus line 26d total)					<b>26e</b> 25,039,302.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 89.5818%
<b>27 Organizations described on line 12:</b> 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	(2002)	(2001)	(2000)	(1999)	
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.	(2002)	(2001)	(2000)	(1999)	
c Add: Amounts from column (e) for lines 15 17					<b>27c</b> N/A
d Add: Line 27a total and line 27b total					<b>27d</b> N/A
e Public support (line 27c total minus line 27d total)					<b>27e</b> N/A
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					<b>27f</b> N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> N/A %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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

**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
<b>29</b> 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?	<b>29</b>	
<b>30</b> 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?	<b>30</b>	
<b>31</b> 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 )	<b>31</b>	
<hr/>		
<hr/>		
<b>32</b> Does the organization maintain the following		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>32c</b>	
<b>d</b> 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 )	<b>32d</b>	
<hr/>		
<b>33</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges?	<b>33a</b>	
<b>b</b> Admissions policies?	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff?	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance?	<b>33d</b>	
<b>e</b> Educational policies?	<b>33e</b>	
<b>f</b> Use of facilities?	<b>33f</b>	
<b>g</b> Athletic programs?	<b>33g</b>	
<b>h</b> Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )	<b>33h</b>	
<hr/>		
<hr/>		
<b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency?	<b>34a</b>	
<b>b</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.	<b>34b</b>	
<b>35</b> 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	<b>35</b>	

Schedule A (Form 990 or 990-EZ) 2003

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions )

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☒ a ☐ if the organization belongs to an affiliated groupCheck ☐ 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
	N/A	
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b> Other exempt purpose expenditures	<b>39</b>	
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table -		
<b>If the amount on line 40 is -</b>		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
<b>The lobbying nontaxable amount is -</b>		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	<b>44</b>	

**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				N/A
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
<b>45</b> Lobbying nontaxable amount					0.
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					0.
<b>47</b> Total lobbying expenditures					0.
<b>48</b> Grassroots nontaxable amount					0.
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					0.
<b>50</b> Grassroots lobbying expenditures					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 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

- 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

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0.

**Part VII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 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?

**a Transfers from the reporting organization to a noncharitable exempt organization of**

**(i) Cash**

**(ii) Other assets**

**b Other transactions**

**(i) Sales or exchanges of assets with a noncharitable exempt organization**

**(ii) Purchases of assets from a noncharitable exempt organization**

(iii) Rental of facilities, equipment, or other assets

**(iv) Reimbursement arrangements**

**(v) Loans or loan guarantees**

**(vi) Performance of services or membership or fundraising solicitations**

**c Sharing of facilities, equipment, mailing lists, other assets, or paid employees**

**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.

N/A

[illegible]

**52 a** 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 ☒ No

**b If "Yes," complete the following schedule**

N/A

[illegible]



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)	
GAIN ON THE SALE OF SECURITIES	2,308,434.	2,258,098.	0.	50,336.	
TO FORM 990, PART I, LINE 8	2,308,434.	2,258,098.	0.	50,336.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES			STATEMENT	2
DESCRIPTION	AMOUNT				
UNREALIZED LOSS ON SECURITIES HELD FOR INVESTMENT	<65,384.>				
TOTAL TO FORM 990, PART I, LINE 20	<65,384.>				

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III			STATEMENT	3
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## EXPLANATION

THE SPECIFIC PURPOSE OF THE ORGANIZATION IS TO ACHIEVE THE SUSTAINABLE END OF WORLD HUNGER. TO DO THIS, THE ORGANIZATION BELIEVES THAT CONVENTIONAL TOP-DOWN AND CHARITABLE APPROACHES ARE INSUFFICIENT TO RESOLVING THE COMPLEX CHALLENGES OF ENDING HUNGER AND SO IT HAS DEVELOPED A DYNAMIC, DECENTRALIZED METHODOLOGY KNOWN AS THE "STRATEGIC PLANNING-IN-ACTION" (SPIA). APPLYING SPIA IN AFRICA, ASIA AND LATIN AMERICA, THE HUNGER PROJECT WORKS TO EMPOWER LOCAL PEOPLE TO CREATE LASTING SOCIETY-WIDE PROGRESS IN HEALTH, EDUCATION, NUTRITION, FAMILY INCOMES AND THE EMPOWERMENT OF WOMEN. IT USES A TWO-PRONG STRATEGY: MOBILIZING GRASSROOTS PEOPLE FOR SELF-RELIANT DEVELOPMENT, AND MOBILIZING COMMITTED LOCAL LEADERSHIP TO CLEAR AWAY BUREAUCRATIC OBSTACLES, AND MOBILIZE RESOURCES TO ENABLE GRASSROOTS ACTION TO SUCCEED.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	4
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## DESCRIPTION OF PROGRAM SERVICE ONE

AFRICA: THE HUNGER PROJECT CARRIED OUT FOUR INITIATIVES FOR AFRICA DURING 2003: THE AFRICA PRIZE FOR LEADERSHIP, THE EPICENTER STRATEGY, THE AFRICAN WOMAN FOOD FARMER INITIATIVE, AND LAUNCHED THE NEW "AIDS AND GENDER INEQUALITY WORKSHOP" TO IMPROVE GRASSROOTS PEOPLE TO KNOW THE FACTS ABOUT AIDS AND CHANGE THE DESTRUCTIVE BEHAVIORS THAT SPREAD DISEASE. THE HUNGER PROJECT HAS OFFICES IN BENIN, BURKINA FASO, GHANA, MALAWI, SENEGAL, AND UGANDA, AND WORKS IN PARTNERSHIP WITH GENERAL UNION OF COOPERATIVES IN MOZAMBIQUE.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	2,062,453.	3,039,804.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	5
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## DESCRIPTION OF PROGRAM SERVICE TWO

EDUCATION AND ADVOCACY: THE HUNGER PROJECT IS A GLOBAL MOVEMENT OF THOUSANDS OF COMMITTED INDIVIDUALS. THE EDUCATION AND ADVOCACY ACTIVITIES EMPOWER THESE INDIVIDUALS LIVING IN THE DEVELOPED WORLD TO UNDERSTAND THAT THE PERSISTENCE OF HUNGER IS A PERVERSIVE ISSUE, FOR WHICH WE ALL HAVE A SHARED RESPONSIBILITY. THE PROGRAMS ARE DESIGNED TO CREATE EFFECTIVE SPOKESPERSONS, ACTIVISTS, LEADERS, AND INVESTORS FOR THE END OF HUNGER. EDUCATION AND ADVOCACY ACTIVITIES INCLUDE WORKSHOPS, CONFERENCE CALLS, TRIPS, SPECIAL EVENTS, A WEB SITE, AND MONTHLY PUBLICATIONS. IN 2003, MORE THAN 60 LOCAL EVENTS WERE ORGANIZED ACROSS THE UNITED STATES. IN ADDITION, THE PRESIDENT TESTIFIED BEFORE TWO CONGRESSIONAL CAUCUSES ON THE INEXTRICABLE LINK BETWEEN WOMEN AND ENDING HUNGER.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B	1,000.	960,277.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

6

DESCRIPTION OF PROGRAM SERVICE THREE

ASIA: THE HUNGER PROJECT HAS OFFICES IN INDIA AND BANGLADESH. IN 2003, THE HUNGER PROJECT CARRIED ITS "SOUTH ASIA INITIATIVE" - A PROGRAM FOCUSED ON EMPOWERING GRASSROOTS WOMEN LEADERS AS THE KEY CHANGE AGENTS FOR BROAD-BASED PROGRESS IN HUMAN DEVELOPMENT, SOCIAL JUSTICE, AND ECONOMIC GROWTH. THE INITIATIVE PROVIDES LEADERSHIP TRAINING FOR WOMEN LEADERS, CREATES ALLIANCES FOR ADVOCACY IN SUPPORT OF THESE WOMEN, AND INCREASES POSITIVE PRESS COVERAGE THROUGH THE SAROJINI NAIDU PRIZE IN INDIA AND NATIONAL GIRL CHILD DAY IN BANGLADESH. DURING 2003, MORE THAN 4000 ELECTED WOMAN REPRESENTATIVES TO INDIA'S LOCAL GOVERNMENTS WERE TRAINED IN INDIA, AND 5000 WOMEN IN BANGLADESH PARTICIPATED IN THE 4-DAY "ANIMATOR" LEADERSHIP TRAINING. MORE THAN 350,000 PEOPLE PARTICIPATED IN THE ONE-DAY VISION, COMMITMENT AND ACTION WORKSHOPS IN BANGLADESH - THE STARTING POINT FOR MOBILIZING PEOPLE FOR SELF-RELIANT ACTION.

TO FORM 990, PART III, LINE C

GRANTSEXPENSES971,123.1,408,897.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	7
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## DESCRIPTION OF PROGRAM SERVICE FOUR

LATIN AMERICA: THE HUNGER PROJECT HAS AN OFFICE IN MEXICO, AND WORKS IN PARTNERSHIP WITH LONG-ESTABLISHED ORGANIZATIONS IN BOLIVIA AND PERU THAT SHARE OUR VISION AND PHILOSOPHY. IN MEXICO, THE HUNGER PROJECT IS TRAINING VOLUNTEER ANIMATORS WHO MOBILIZE THE PEOPLE FOR SELF-RELIANT ACTION IN THE TEN POOREST STATES OF THE COUNTRY. IN BOLIVIA, THE HUNGER PROJECT WORKS WITH ACLO (ACCION CULTURAL LOYOLA), WHOSE RADIO STATIONS PROVIDE LITERACY AND AGRICULTURAL TRAINING TO QUECHA-SPEAKING PEOPLE IN THE ANDES. IN PERU, THE HUNGER PROJECT COMPLETED ITS FIVE YEAR PARTNERSHIP WITH DESCO AND LAUNCHED A NEW PARTNERSHIP WITH CHIRAPAQ, A NATIONAL NETWORK OF INDIGENEOUS PEOPLE TO STRENGTHEN WOMEN'S LEADERSHIP IN LOCAL DEMOCRACY.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D	160,000.	186,653.

FORM 990	CASH GRANTS AND ALLOCATIONS	STATEMENT	8
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CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
GRANT	THE HUNGER PROJECT - INDIA	VASANT VIHAR, NEW DELHI 110057	NONE	563,583.
GRANT	THE HUNGER PROJECT - BANGLADESH	DHAKA 1209, BANGLADESH	NONE	407,540.
GRANT	THE HUNGER PROJECT - UGANDA	KAMPALA, UGANDA	NONE	422,550.
GRANT	THE HUNGER PROJECT - MALAWI	BLANTYRE, MALAWI	NONE	330,974.
GRANT	THE HUNGER PROJECT - SENEGAL	DAKAR, SENEGAL	NONE	311,000.
GRANT	THE HUNGER PROJECT - BURKINA FASO	OUAGADOUGOU, BURKINA FASO	NONE	286,665.
GRANT	THE HUNGER PROJECT - GHANA	ACCRA, REPUBLIC OF GHANA	NONE	295,864.

GRANT	THE HUNGER PROJECT - BENIN	COTONOU, REPUBLIC OF BENIN	NONE	315,400.
GRANT	THE HUNGER PROJECT - MEXICO	MEXICO DF 03100, COLONIA DEL VALLE	NONE	90,000.
GRANT	MEAZA ASHENAFI - LEADERSHIP AWARD	ADDIS ABABA, ETHIOPIA	NONE	50,000.
GRANT	ACLO - BOLIVIA	SUCRE, BOLIVIA	NONE	35,000.
GRANT	WORLD FOOD DAY	USA	NONE	1,000.
GRANT	CHIRAPAQ - PERU	LIMA, PERU	NONE	35,000.
GRANT	SARA LONGWE - LEADERSHIP AWARD	LUSAKA, ZAMBIA	NONE	50,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				3194576.

FORM 990	NON-GOVERNMENT SECURITIES	STATEMENT	9
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SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
COMMON STOCK	58,642.				58,642.
TO 990, LN 54 COL B	58,642.				58,642.

FORM 990	GOVERNMENT SECURITIES	STATEMENT	10
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DESCRIPTION	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
US TREASURY NOTES	98,565.		98,565.
TOTAL TO FORM 990, LINE 54, COL B	98,565.		98,565.

FORM 990	OTHER INVESTMENTS	STATEMENT	11
DESCRIPTION	VALUATION METHOD	AMOUNT	
PARTNERSHIP	MARKET VALUE	10,000.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		10,000.	

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	12
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LEASEHOLD IMPROVEMENTS	168,611.	70,255.	98,356.
FURNITURE AND EQUIPMENT	84,484.	57,740.	26,744.
COMPUTERS	12,533.	11,211.	1,322.
TOTAL TO FORM 990, PART IV, LN 57	265,628.	139,206.	126,422.

FORM 990	OTHER ASSETS	STATEMENT	13
DESCRIPTION	AMOUNT		
DEPOSITS	2,825.		
CHARITABLE REMAINDER TRUST	294,296.		
TRAVEL ADVANCES	1,000.		
ACCRUED INTEREST	14,768.		
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	312,889.		

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 14

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOAN HOLMES NEW YORK, NY	PRESIDENT 40	225,310.	30,000.	0.
DR. PETER G. BOURNE NEW YORK, NY	CHAIRMAN .75	0.	0.	0.
V. MOHINI GIRI NEW YORK, NY	DIRECTOR .75	0.	0.	0.
SPECIOSA WANDIRA KAZIBWE, M.D. NEW YORK, NY	DIRECTOR 1.5	0.	0.	0.
GEORGE MATHEW, PHD. NEW YORK, NY	DIRECTOR 1.5	0.	0.	0.
H.M. QUEEN NOOR OF JORDAN NEW YORK, NY	HONORARY MEMBER 0	0.	0.	0.
JAVIER PEREZ DE CUELLAR NEW YORK, NY	HONORARY MEMBER .75	0.	0.	0.
AMARTYA SEN, PH.D. NEW YORK, NY	HONORARY MEMBER 0	0.	0.	0.
GEORGE WEISS NEW YORK, NY	DIRECTOR 1.7	0.	0.	0.
DR. M.S. SWAMINATHAN NEW YORK, NY	CHAIR EMERITUS 0	0.	0.	0.
JOHN COONROD NEW YORK, NY	COO/VICE PRESIDENT 40	110,000.	16,500.	0.

GEORGE WOODRING NEW YORK, NY	CFO/TREASURER 40	126,300.	18,945.	0.
CHARLES DEULL NEW YORK, NY	SECRETARY 1.7	0.	0.	0.
MARIA SCHARIN NEW YORK, NY	ASST. SECRETARY/TREASURER 40	57,200.	8,580.	0.
STEVEN J. SHERWOOD NEW YORK, NY	DIRECTOR 1.7	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		518,810.	74,025.	0.

SCHEDULE A	OTHER INCOME			STATEMENT 15
DESCRIPTION	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT
OTHER	49,538.	36,211.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	49,538.	36,211.	0.	0.

Form **8868**

(December 2000)

Department of the Treasury  
Internal Revenue Service**Application for Extension of Time To File an  
Exempt Organization Return**

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Note:** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time** - Only submit original (no copies needed)

**Note:** Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

<b>Type or print</b>	<b>Name of Exempt Organization</b>	<b>Employer Identification number</b>
	<b>THE GLOBAL HUNGER PROJECT</b>	<b>94-2443282</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	
	<b>15 EAST 26TH STREET, NO. 1401</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>NEW YORK, NY 10010</b>	

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the **whole group**, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until **AUGUST 16, 2004** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year **2003** or
- ☐ tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period


- 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions ..... \$ \_\_\_\_\_

- b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit ..... \$ \_\_\_\_\_

- c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions ..... \$ **N/A**

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►  Title ► **Agent** Date ► **5-13-04**

LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)