

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2024

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

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

Department of the Treasury

Internal Revenue Service

For the 2024 calendar year, or tax year beginning 01-01-2024, and ending 12-31-2024

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: ACTION AGAINST HUNGER - USA. Doing business as: Number and street (or P.O. box if mail is not delivered to street address) Room/suite: ONE WHITEHALL STREET 2ND FL. City or town, state or province, country, and ZIP or foreign postal code: NEW YORK, NY 10004

D Employer identification number: 13-3327220. E Telephone number: (212) 967-7800. G Gross receipts \$ 161,066,172

F Name and address of principal officer: CHARLES OWUBAH, ONE WHITEHALL STREET 2ND FL, NEW YORK, NY 10004

H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? No. H(c) Group exemption number

I Tax-exempt status: 501(c)(3)

J Website: WWW.ACTIONAGAINSTHUNGER.ORG

K Form of organization: Corporation

L Year of formation: 1985. M State of legal domicile: NY

Part I Summary

Table with 3 main sections: 1. Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1. 2. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3-7a: Governing body and revenue details. 7b: Net unrelated business taxable income. 8-12: Revenue breakdown by source. 13-19: Expenses breakdown. 20-22: Net assets or fund balances.

Part II Signature Block

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

Sign Here: Signature of officer FARHAN IRSHAD CHIEF FINANCIAL OFFICER, Date 2025-11-10. Paid Preparer Use Only: Firm's name GELMAN ROSENBERG & FREEDMAN, Firm's EIN 52-1392008, Firm's address 4550 MONTGOMERY AVE SUITE 800N, BETHESDA, MD 208142930.

May the IRS discuss this return with the preparer shown above? See Instructions. Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

AAH-USA'S MISSION IS TO SAVE LIVES BY PREVENTING, DETECTING, AND TREATING UNDERNUTRITION, PARTICULARLY DURING AND AFTER DISASTERS AND CONFLICTS. FROM CRISIS TO SUSTAINABILITY, WE TACKLE THE DIRECT AND UNDERLYING CAUSES OF HUNGER THROUGH INTEGRATED, HOLISTIC SOLUTIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 37,740,275 including grants of \$ 8,185,567) (Revenue \$)
SOMALIA:IN 2024, SOMALIA FACED OVERLAPPING CRISES DRIVEN BY CONFLICT AND CLIMATE CHANGE, AFFECTING 9.1 MILLION PEOPLE - 47 PER CENT OF THE POPULATION. THE COUNTRY WAS RATED HIGHEST GLOBALLY IN HUMANITARIAN CRISIS RISK, ACCORDING TO THE EU-LED INFORM INDEX. ALTERNATING FLOODS AND DROUGHTS DEVASTATED ALREADY FRAGILE COMMUNITIES, WITH LA NINA INDUCED DROUGHT WORSENING FOOD INSECURITY AND MALNUTRITION. BY DECEMBER, 4.4 MILLION PEOPLE WERE IN IPC PHASE 3 (CRISIS) OR ABOVE, AND MALNUTRITION RATES ROSE BY UP TO 21 PERCENT COMPARED TO 2023.ACTION AGAINST HUNGER RESPONDED BY DELIVERING LIFESAVING ASSISTANCE IN 29 DISTRICTS, INCLUDING ALL 10 PRIORITY DISTRICTS FOR HUMANITARIAN INTERVENTION. THROUGH OUR PRIMARY PILLAR OF EMERGENCY RESPONSE, WE REACHED OVER 3.1 MILLION PEOPLE WITH HEALTH AND NUTRITION AND WATER, SANITATION AND HYGIENE PROGRAMMES. THESE PROGRAMMES SUPPORTED 112 HEALTH FACILITIES, 10 NUTRITION STABILISATION CENTERS, AND DEPLOYED 561 COMMUNITY HEALTH WORKERS AND 23 MOBILE TEAMS. THIS LED TO MAJOR REDUCTIONS IN MALNUTRITION AND CHOLERA, INCLUDING A 98 PER CENT CURE RATE FOR SEVERE ACUTE MALNUTRITION AND AN 87 PER CENT DECREASE IN CHOLERA CASES IN KISMAYO BETWEEN WEEKS 27 AND 36 OF THE OUTBREAK.UNDER ITS SECOND PILLAR FOCUSED ON RESILIENCE AND PREVENTION, ACTION AGAINST HUNGER IMPLEMENTED INTEGRATED FOOD SECURITY, LIVELIHOODS, AND PROTECTION INITIATIVES, BENEFITING OVER 50,000 PEOPLE. IN BAIDOA, 54 PER CENT OF TARGETED FARMERS ACHIEVED SURPLUS HARVESTS, AND IN JOWHAR, COOPERATIVES PRODUCED 160 TONS OF FODDER WITH AN ESTIMATED INCOME OF 1,560 USD (1345 EUR) PER COOPERATIVE.KEY PROJECTS INCLUDED THE DAMAL CAAFIMAAD (HEALTH PLUS) PROJECT, WHICH SUPPORTED 92 HEALTH FACILITIES AND OVER 1.2 MILLION PEOPLE, SHOWING STRONG IMPROVEMENTS IN SERVICE UPTAKE. THE CAAFIMAAD PLUS CONSORTIUM, LED BY ACTION AGAINST HUNGER, INTRODUCED HEALTH SERVICE DIGITALISATION, ENHANCING DATA AND INVENTORY MANAGEMENT. WE ALSO PLAYED A KEY ADVOCACY ROLE, SUPPORTING UPDATES TO NATIONAL MALNUTRITION GUIDELINES AND LEGISLATION ON HUMANITARIAN AID GOVERNANCE.

4b (Code:) (Expenses \$ 34,702,800 including grants of \$ 1,982,856) (Revenue \$ 9,900)
ETHIOPIA:ETHIOPIA, WITH A POPULATION OF 129.7 MILLION, IS AFRICA'S SECOND MOST POPULOUS NATION. DESPITE ECONOMIC GAINS FROM 20002015, THE COUNTRY IS OFF-TRACK IN MEETING SEVERAL SUSTAINABLE DEVELOPMENT GOAL TARGETS, INCLUDING POVERTY, HUNGER, HEALTH, AND WATER, SANITATION AND HYGIENE (WASH) GOALS. THE 2024 GLOBAL HUNGER INDEX RANKED ETHIOPIA 102 OUT OF 127 COUNTRIES, WITH 22.2 MILLION UNDERNOURISHED.HUMANITARIAN NEEDS REMAIN VAST, WITH 28.5 MILLION PEOPLE REQUIRING ASSISTANCE AND 4.4 MILLION INTERNALLY DISPLACED BY CONFLICT AND CLIMATE EVENTS. ACUTE MALNUTRITION IS SEVERE, WITH ONLY 32 PER CENT OF ESTIMATED CASES TREATED. ETHIOPIA'S HUMANITARIAN CRISIS IS DRIVEN BY CONFLICT, CLIMATE SHOCKS, ECONOMIC CHALLENGES, AND RECURRENT PUBLIC HEALTH EMERGENCIES.ACTION AGAINST HUNGER OPERATES IN SIX REGIONS IN ETHIOPIA, REACHING OVER 3.5 MILLION INDIVIDUALS WITH PROGRAMMES IN HEALTH AND NUTRITION, WASH, FOOD SECURITY AND LIVELIHOODS, AND PROTECTION.KEY 2024 ACHIEVEMENTS INCLUDE SCREENING 539,859 PEOPLE FOR MALNUTRITION, TREATING 31,947 CHILDREN WITH SEVERE ACUTE MALNUTRITION, AND DISTRIBUTING USD 4.1 MILLION (EUR 3.53 MILLION) IN CASH AID TO 74,650 PEOPLE. WASH EFFORTS INCLUDED: REHABILITATING 112 WASH FACILITIES IN HEALTH INSTITUTIONS; AND REACHING 607,655 PEOPLE THROUGH THE WASH SECTOR, OF WHICH 72,666 EMERGENCY-AFFECTED COMMUNITY MEMBERS WERE PROVIDED WITH BASIC WATER SUPPLY. THROUGH MENTAL HEALTH AND CARE PRACTICES, 163,192 AT-RISK PEOPLE WERE REACHED BY DIFFERENT INTERVENTIONS.NEW INITIATIVES LAUNCHED INCLUDE A USD 11 MILLION (EUR 9.48 MILLION) HDP NEXUS PROJECT ENHANCING FOOD SECURITY AND CLIMATE RESILIENCE OF MORE THAN 100,000 PASTORAL AND AGRO-PASTORAL HOUSEHOLDS ACROSS FIVE REGIONS, AS WELL AS THE NATIONAL ROLLOUT OF NUTRITION-CENTRIC HUMANITARIAN, DEVELOPMENT AND PEACE (HDP) TRIPLE NEXUS GUIDELINES. OUR RESEARCH TEAM IS ALSO TRIALLING A BREAKTHROUGH PLANT-BASED READY-TO-USE THERAPEUTIC FOOD IN ETHIOPIA COLLABORATION WITH INTERNATIONAL PARTNERS.

4c (Code:) (Expenses \$ 30,211,217 including grants of \$ 697,238) (Revenue \$)
SOUTH SUDAN: IN 2024, SOUTH SUDAN FACED ESCALATING HUNGER AND MALNUTRITION DRIVEN BY ECONOMIC INSTABILITY, CONFLICT, WIDESPREAD FLOODING, AND AN INFLUX OF REFUGEES AND RETURNEES. ACCORDING TO THE 2024 GLOBAL HUNGER INDEX, SOUTH SUDAN IS EXPERIENCING ALARMING LEVELS OF HUNGER.FROM SEPTEMBER TO NOVEMBER 2024, 6.3 MILLION PEOPLE (47 PER CENT OF THE POPULATION ANALYSED) WERE CLASSIFIED AS BEING IN CRISIS (IPC PHASE 3) OR WORSE, WITH 1.71 MILLION IN EMERGENCY (IPC PHASE 4) AND 41,000 PEOPLE IN CATASTROPHE (IPC PHASE 5). FLOODING AFFECTED OVER 1.4 MILLION PEOPLE, DEVASTATING CROPS AND DISPLACING COMMUNITIES, WHILE MORE THAN 1 MILLION PEOPLE FLED INTO SOUTH SUDAN FROM SUDAN, PLACING SEVERE PRESSURE ON ALREADY LIMITED RESOURCES.ACTION AGAINST HUNGER PROVIDED LIFESAVING AND RESILIENCE-BUILDING SUPPORT IN WARRAP, NORTHERN BAHR EL GHAZAL, JONGLEI, AND CENTRAL EQUATORIA. OUR PROGRAMMES FOCUSED ON NUTRITION AND HEALTH, WATER, SANITATION AND HYGIENE (WASH), AND FOOD SECURITY AND LIVELIHOODS, REACHING OVER 650,000 VULNERABLE PEOPLE. GENDER AND PROTECTION CONSIDERATIONS WERE INTEGRATED ACROSS ALL ACTIVITIES TO ENSURE INCLUSIVE ASSISTANCE. KEY INITIATIVES INCLUDED THE DEPLOYMENT OF THE MULTI-SECTOR EMERGENCY TEAM AND SURVEILLANCE AND EVALUATION TEAM (METSSET) TO FIVE LOCATIONS, DELIVERING RAPID ASSISTANCE TO FLOOD-AFFECTED POPULATIONS AND DISPLACED REFUGEES AND RETURNEES. OUR PROGRAMMES MITIGATED ACUTE MALNUTRITION, WATERBORNE DISEASES, AND FOOD INSECURITY, WHILE SUPPORTING COMMUNITY RESILIENCE THROUGH LONG-TERM RECOVERY EFFORTS.ACTION AGAINST HUNGER STRENGTHENED ADVOCACY EFFORTS IN 2024, WORKING WITH LAWMAKERS AND CIVIL SOCIETY ORGANISATIONS TO SECURE INCREASED BUDGET ALLOCATIONS FOR HEALTH AND NUTRITION AND WASH SECTORS. A MAJOR ACHIEVEMENT WAS THE FINALISATION OF SOUTH SUDAN'S FIRST NATIONAL NUTRITION POLICY, PROMOTING A MULTISECTORAL APPROACH TO ADDRESS MALNUTRITION COMPREHENSIVELY. ADDITIONALLY, OUR MONITORING, EVALUATION, ACCOUNTABILITY, AND LEARNING (MEAL) AND RESEARCH TEAMS CONTRIBUTED CRITICAL DATA TO NATIONAL FOOD SECURITY ASSESSMENTS, SHAPING EVIDENCE-BASED HUMANITARIAN RESPONSE.

(Code:) (Expenses \$ 11,439,282 including grants of \$ 67,033) (Revenue \$)
KENYA:IN 2024, KENYA'S HUNGER AND MALNUTRITION CRISIS INTENSIFIED, WITH AROUND 1 MILLION PEOPLE EXPERIENCING SEVERE FOOD INSECURITY (IPC PHASE 3+) BY AUGUST. PROJECTIONS INDICATE THIS NUMBER COULD RISE TO OVER 1.8 MILLION BY EARLY 2025 DUE TO ANTICIPATED LA NINA CONDITIONS. OVER 760,000 CHILDREN IN 23 ARID AND SEMI-ARID COUNTIES WERE ACUTELY MALNOURISHED.KEY CONTRIBUTING FACTORS INCLUDED RECURRING DROUGHTS AND FLOODS, HIGH FOOD AND FUEL PRICES, POOR INFANT FEEDING PRACTICES, DISEASE OUTBREAKS, PEST INFESTATIONS, AND REDUCED DONOR FUNDING. FLOODS DAMAGED INFRASTRUCTURE AND DISRUPTED HEALTH SERVICES, WORSENING AN ALREADY FRAGILE NUTRITION LANDSCAPE.WATER, SANITATION AND HYGIENE (WASH) NEEDS WERE ALSO CRITICAL, ESPECIALLY IN ARID REGIONS WHERE OVER HALF OF COMMUNITIES RELIED ON UNSAFE WATER. THESE CONDITIONS INCREASED THE RISK OF WATERBORNE DISEASES LIKE CHOLERA AND DROVE HIGHER RATES OF MALNUTRITION IN WOMEN AND CHILDREN. GENDER-BASED VIOLENCE, INCLUDING FEMALE GENITAL MUTILATION, WAS ANOTHER AREA OF CONCERN.ACTION AGAINST HUNGER OPERATED ACROSS THE HIGH-RISK COUNTIES OF MANDERA, ISIOLO, BARINGO, TANA RIVER, AND WEST POKOT, FOCUSING ON HEALTH AND NUTRITION, WASH, FOOD SECURITY AND LIVELIHOODS, GENDER, ADVOCACY, AND SOCIAL PROTECTION. FLEXIBLE FUNDING FROM THE SWEDISH INTERNATIONAL DEVELOPMENT COOPERATION AGENCY ALLOWED FOR RAPID SCALE-UP IN CRISIS AREAS, INCLUDING FLOOD-AFFECTED INFORMAL SETTLEMENTS IN NAIROBI AND NAKURU. DESPITE INSECURITY IN BARINGO, ISIOLO, AND MANDERA, COORDINATION WITH LOCAL AUTHORITIES HELPED IMPROVE ACCESS.IN 2024, ACTION AGAINST HUNGER DIRECTLY REACHED OVER 1.5 MILLION PEOPLE. OVER 900,000 RECEIVED HEALTH AND NUTRITION SERVICES, 70,000 ACCESSED MENTAL HEALTH SUPPORT, AND OVER 400,000 GAINED CLEAN WATER AND SANITATION. EMERGENCY CASH AID SUPPORTED 81,000 PEOPLE, WHILE OVER 20,000 WOMEN RECEIVED GENDER-BASED VIOLENCE PROTECTION. WE ALSO CONDUCTED AGROECOLOGICAL TRAINING, CONTRIBUTING TO IMPROVED FOOD SECURITY. THESE INTERVENTIONS HELPED REDUCE GLOBAL ACUTE MALNUTRITION RATES IN ALL TARGET COUNTIES: MANDERA (21.2 PER CENT TO 20.6 PER CENT); ISIOLO (15.4 PER CENT TO 13.7 PER CENT); BARINGO (23.2 PER CENT TO 21.0 PER CENT); AND WEST POKOT (17.8 PER CENT TO 12.9 PER CENT).

(Code:) (Expenses \$ 6,361,473 including grants of \$ 309,872) (Revenue \$)
UGANDA:IN UGANDA, APPROXIMATELY 797,000 PEOPLE (ABOUT 17 PER CENT OF THE POPULATION ANALYSED) IN REFUGEE-HOSTING DISTRICTS ARE EXPERIENCING HIGH LEVELS OF ACUTE FOOD INSECURITY (IPC PHASE 3 OR ABOVE). CURRENTLY, AN ESTIMATED 54,000 CHILDREN AGED BETWEEN 6 AND 59 MONTHS AND 9,800 PREGNANT OR LACTATING WOMEN SUFFER FROM ACUTE MALNUTRITION IN REFUGEE SETTLEMENTS AND URBAN REFUGEE POPULATIONS. THE

SITUATION IS EXPECTED TO WORSEN: BETWEEN FEBRUARY AND JUNE 2025, THE NUMBER OF PEOPLE IN NEED OF URGENT ACTION IS PROJECTED TO RISE TO 953,000 (21 PER CENT OF THE POPULATION ANALYSED). ADJUMANI, ISINGIRO, KOBOKO, MADI OKOLLO, AND OBONGI DISTRICTS ARE EXPECTED TO EXPERIENCE A PHASE CHANGE FROM STRESSED (PHASE 2) TO CRISIS (PHASE 3). THE MAIN DRIVERS OF ACUTE FOOD INSECURITY IN UGANDA ARE: POOR RAINFALL PERFORMANCE; PROLONGED DRY SPELLS; RISING FOOD PRICES; LOW PURCHASING POWER; CROP AND LIVESTOCK PESTS AND DISEASES; AND CONFLICTS BETWEEN HOST COMMUNITIES AND REFUGEES. ACTION AGAINST HUNGER WORKS IN 16 DISTRICTS AND 12 REFUGEE SETTLEMENTS ACROSS UGANDA. OUR TEAMS PROVIDED HEALTH AND NUTRITION SERVICES INCLUDING PRIMARY HEALTHCARE FOR 427,365 CHILDREN UNDER FIVE, 114,354 PREGNANT AND LACTATING WOMEN AND 152,593 ADULTS. NUTRITION ACTIVITIES REACHED OVER 600,000 PEOPLE. WE IMPROVED FOOD SECURITY AND LIVELIHOODS CONDITIONS BY SUPPORTING 31,707 FARMERS AND SETTING UP AN IRRIGATION SYSTEM THAT PRODUCES 150,000 LITRES OF WATER PER DAY. OVER 50,084 PEOPLE BENEFITTED FROM INCREASED WATER ACCESS FROM OUR WATER, SANITATION AND HYGIENE (WASH) OUTREACHES. ADDITIONALLY, ACTION AGAINST HUNGER CONDUCTED 15 ADVOCACY MEETINGS REGARDING THE LEGAL AND POLICY FRAMEWORKS. WE DEVELOPED 16 KNOWLEDGE PRODUCTS FOR EVIDENCE-BASED ADVOCACY, INCLUDING EIGHT POSITION PAPERS PRESENTED TO PARLIAMENTARY COMMITTEES TO ADVANCE BUDGETING FOR NUTRITION AND WASH SERVICES. THIS RESULTED IN THE ADOPTION OF 36 PROPOSALS BY THE PARLIAMENTARY COMMITTEE ON AGRICULTURE AND THE BUDGET COMMITTEE. FURTHERMORE, WE ENGAGED SUB-NATIONAL LEVELS AND ADVOCATED FOR THE ESTABLISHMENT OF DISTRICT NUTRITION COORDINATION COMMITTEES (DNCCS) AND SUB-COUNTY NUTRITION COORDINATION COMMITTEES (SNCCS) TO SUPPORT DRIVE NUTRITION AGENDAS. AS A RESULT, THREE DNCCS AND 2 SNCCS WERE SET UP, WHILE TWO WERE REVAMPED (THOSE THAT WERE DORMANT/NON-FUNCTIONAL). WE ALSO SUPPORTED THEM TO DEVELOP DISTRICT NUTRITION ADVOCACY PLANS TO ENHANCE COORDINATION OF MULTISECTORAL NUTRITION EFFORTS.

(Code:) (Expenses \$ 4,953,879 including grants of \$) (Revenue \$)

HAITI: IN 2024, HAITI FACED AN UNPRECEDENTED HUMANITARIAN CRISIS MARKED BY ESCALATING VIOLENCE, FORCED DISPLACEMENT, AND WORSENING FOOD INSECURITY. THE NUMBER OF INTERNALLY DISPLACED PERSONS SURGED FROM 350,000 TO 750,000 OVER THE YEAR, AS ARMED CLASHES AND INSECURITY FORCED ENTIRE COMMUNITIES TO FLEE, PARTICULARLY IN PORT-AU-PRINCE, BRINGING THE RISK OF FAMINE. THE SITUATION WAS FURTHER COMPOUNDED BY A RESURGENCE OF CHOLERA AND THE CHRONIC WEAKNESS OF HEALTH AND SANITATION SYSTEMS, LEAVING MILLIONS OF HAITIANS IN URGENT NEED OF HUMANITARIAN ASSISTANCE. TO ADDRESS THESE PRESSING CHALLENGES, ACTION AGAINST HUNGER REVISED ITS PROGRAMME STRATEGY TO ENHANCE SUPPORT FOR POPULATIONS AFFECTED BY VIOLENCE AND DISPLACEMENT. IN THE NORD-OUEST, WE DELIVERED CRITICAL FOOD ASSISTANCE AND CASH SUPPORT TO VULNERABLE COMMUNITIES. IN NORD-EST AND SUD, EFFORTS FOCUSED ON PREVENTING MALNUTRITION THROUGH TARGETED INTERVENTIONS. IN RESPONSE TO THE CHOLERA OUTBREAK IN ARTIBONITE, ACTION AGAINST HUNGER IMPLEMENTED EMERGENCY MEASURES TO CONTAIN THE SPREAD OF THE DISEASE AND IMPROVE ACCESS TO SAFE WATER AND SANITATION. FURTHERMORE, WE POSITIONED OURSELVES TO EXPAND OUR HUMANITARIAN RESPONSE IN PORT-AU-PRINCE IN 2025, ACKNOWLEDGING THE INCREASING NEEDS FOR CAPITAL. IN 2024, ACTION AGAINST HUNGER'S INTERVENTIONS REACHED OVER 100,000 PEOPLE IN VARIOUS SECTORS. THIS INCLUDED PEOPLE BENEFITTING FROM FOOD ASSISTANCE, RECEIVING SUPPORT IN FOOD SECURITY AND LIVELIHOOD AND TRAINING IN MICROFINANCE. HUNDREDS OF INDIVIDUALS WERE CHOSEN TO COMPLETE VOCATIONAL TRAINING, ENHANCING THEIR RESILIENCE AND ECONOMIC PROSPECTS. CHILDREN WERE TREATED FOR MODERATE ACUTE MALNUTRITION AND SEVERE ACUTE MALNUTRITION AND OVER 30,000 PEOPLE ACCESSED PRIMARY HEALTHCARE SERVICES. IN WATER, SANITATION AND HYGIENE, PEOPLE WERE REACHED WITH SANITATION SERVICES AND PRODUCTS SUCH AS CLEANING SUPPLIES. THROUGH THESE PROGRAMMES, ACTION AGAINST HUNGER REMAINS COMMITTED TO ALLEVIATING SUFFERING AND STRENGTHENING THE RESILIENCE OF HAITIAN COMMUNITIES AMID A DEEPENING CRISIS.

(Code:) (Expenses \$ 1,020,008 including grants of \$ 54,595) (Revenue \$)

TANZANIA: IN 2024, TANZANIA'S FOOD SECURITY SITUATION WAS SIGNIFICANTLY IMPACTED BY CLIMATE-RELATED SHOCKS, PARTICULARLY PROLONGED DROUGHTS AND SEVERE FLOODING LINKED TO THE EL NINO PHENOMENON. ACCORDING TO THE 2024 INTEGRATED FOOD SECURITY PHASE CLASSIFICATION REPORT, APPROXIMATELY 900,000 PEOPLE (13 PER CENT OF THE ANALYSED POPULATION) FACED HIGH LEVELS OF ACUTE FOOD INSECURITY (IPC PHASE 3 OR ABOVE). FLOODING DISPLACED OVER 200,000 PEOPLE AND CAUSED THE LOSS OF 240,709 METRIC TONS OF CROPS, CAUSING A MAJOR IMPACT ON THE 59 PER CENT OF TANZANIA'S POPULATION THAT WORK IN AGRICULTURE. WHILE TANZANIA HAS SEEN IMPROVEMENTS IN CHILD NUTRITION OVER THE PAST THREE DECADES, WITH STUNTING RATES DROPPING FROM 50 PER CENT IN 1991/92 TO 30 PER CENT IN 2022, REGIONAL DISPARITIES PERSIST, POSING ONGOING PUBLIC HEALTH CONCERNS. ACTION AGAINST HUNGER FOCUSED ITS EFFORTS IN THE SINGIDA AND DODOMA REGIONS, TACKLING THE ROOT CAUSES OF MALNUTRITION THROUGH INTEGRATED, GENDER-RESPONSIVE HEALTH AND NUTRITION INTERVENTIONS. WE SUPPORTED 15 WARDS AND 18 SECONDARY SCHOOLS, STRENGTHENED 31 HEALTH FACILITIES TO PROVIDE QUALITY SERVICES, AND PRIORITISED CARE FOR THE MOST VULNERABLE POPULATIONS WITH FOCUS ON WOMEN, ADOLESCENTS, AND CHILDREN UNDER FIVE. KEY INITIATIVES INCLUDED THE ACCELERATING WASTING REFORM PROJECT FUNDED BY THE ELEANOR CROOK FOUNDATION, WHERE WE COLLABORATED WITH THE MINISTRY OF HEALTH TO REVISE THE NATIONAL GUIDELINE FOR THE INTEGRATED MANAGEMENT OF ACUTE MALNUTRITION, UPDATING THE GUIDELINE TO ALIGN WITH THE LATEST 2023 WORLD HEALTH ORGANIZATION RECOMMENDATIONS AND REVIEWING NATIONAL MALNUTRITION POLICY. THROUGH THE EQUIP FOR IN-SCHOOL NUTRITION SERVICES PROJECT, WE TRAINED OVER 1,600 STUDENTS AND 36 COMMUNITY AGRICULTURE PROMOTERS ON CLIMATE-SMART AGRICULTURAL PRACTICES AND SUPPORTED THE PRODUCTION OF BIOFORTIFIED CROPS SUCH AS SWEET POTATOES, MAIZE, BEANS, AND SORGHUM, AS WELL AS POSTHARVEST HANDLING SKILLS. UNDER THE GENDER EQUITABLE NUTRITION PROJECT, WE BUILT THE CAPACITY OF 34 HEALTH PROVIDERS TO DELIVER INTEGRATED MALNUTRITION MANAGEMENT AND 31 HEALTH PROVIDERS ON ADOLESCENT-FRIENDLY SEXUAL AND REPRODUCTIVE HEALTH SERVICES IN THE BAHU AND ITIGI DISTRICTS. WE ALSO PROMOTED THE USE OF MICRONUTRIENT POWDERS FOR CHILDREN AGED BETWEEN 6 AND 24 MONTHS, STRENGTHENED VILLAGE HEALTH AND NUTRITION DAYS TO IMPROVE EARLY DETECTION OF WASTING, AND SUPPORTED WATER, SANITATION AND HYGIENE AND NUTRITION-SENSITIVE AGRICULTURE ACTIVITIES ACROSS COMMUNITIES AND SCHOOLS.

(Code:) (Expenses \$ 650,001 including grants of \$ 45,125) (Revenue \$)

ZAMBIA: IN 2024, ZAMBIA FACED A SEVERE HUMANITARIAN CRISIS DRIVEN BY CLIMATE CHANGE, ECONOMIC INSTABILITY, AND HEALTH EMERGENCIES. PROLONGED DROUGHTS, ERRATIC RAINFALL, AND PEST INFESTATIONS SIGNIFICANTLY IMPACTED AGRICULTURE, THE BACKBONE OF THE ECONOMY, LEAVING 4.95 MILLION PEOPLE FACING ACUTE FOOD INSECURITY. THE WESTERN, SOUTHERN, AND NORTH-WESTERN PROVINCES WERE HARDEST HIT, WITH WESTERN PROVINCE EXPERIENCING EXTREME HUNGER LEVELS AMONG NEARLY 89 PER CENT OF HOUSEHOLDS. THE CRISIS WAS COMPOUNDED BY A CHOLERA OUTBREAK IN LATE 2023 AND EARLY 2024, STRAINING HEALTH AND WATER, SANITATION, AND HYGIENE (WASH) SYSTEMS AND DEEPENING MALNUTRITION. IN RESPONSE, ACTION AGAINST HUNGER EXPANDED ITS OPERATIONS TO NINE DISTRICTS IN THE WORST-AFFECTED REGIONS. ITS MULTI-SECTORAL APPROACH INCLUDED HEALTH AND NUTRITION, FOOD SECURITY AND LIVELIHOODS, WASH, AND CLIMATE RESILIENCE. KEY INITIATIVES SUCH AS THE SEEDS OF HOPE CLIMATE ADAPTATION COWPEA PROJECT TRAINED FARMERS AND HELPED GENERATE ZMW 650,000 (USD 27,731 / EUR 23,887) THROUGH COWPEA HARVESTS, IN PART DUE TO THE DISTRIBUTION OF PURDUE IMPROVED CROP STORAGE BAGS, WHICH REDUCED POST-HARVEST LOSSES TO NEARLY ZERO. THE DARWIN INITIATIVE SUPPORTED BIODIVERSITY CONSERVATION AND POVERTY REDUCTION, REACHING OVER 4,700 PEOPLE WITH SUSTAINABLE AGRICULTURAL AND WATER MANAGEMENT PRACTICES. ACTION AGAINST HUNGER ALSO CONDUCTED ASSESSMENTS IN COLLABORATION WITH NATIONAL AGENCIES TO TAILOR INTERVENTIONS, PARTICIPATED IN COORDINATION CLUSTERS, AND ADVOCATED FOR STRONGER INVESTMENT IN NUTRITION AND CLIMATE ADAPTATION. DESPITE CHALLENGES LIKE POOR INFRASTRUCTURE AND HARSH CLIMATE CONDITIONS, ACTION AGAINST HUNGER'S PARTNERSHIPS WITH LOCAL NON-GOVERNMENTAL ORGANISATIONS, GOVERNMENT BODIES, AND COMMUNITIES ENABLED IT TO MAKE A MEASURABLE IMPACT, BUILDING RESILIENCE AND DELIVERING ESSENTIAL AID TO VULNERABLE POPULATIONS.

(Code:) (Expenses \$ 9,737,836 including grants of \$ 7,282,913) (Revenue \$)

OTHER COUNTRY AND STRATEGIC PROGRAM

(Code:) (Expenses \$ 7,775,508 including grants of \$ 55,688) (Revenue \$ 17,000)

PROGRAM SUPPORT

4d Other program services (Describe in Schedule O.)

(Expenses \$ 41,937,987 including grants of \$ 7,815,226) (Revenue \$ 17,000)

4e **Total program service expenses** 144,592,279

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as completing Schedules A through H, and specific rules for 501(c)(3) organizations.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding tax-exempt bond issues, excess benefit transactions, and related party transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [X]

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and gaming winnings.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with 10 columns: Question ID, Question Text, Sub-question ID, and Yes/No/Amount columns. Rows include questions 2a through 17 regarding employee reporting, foreign accounts, prohibited transactions, and organizational activities.

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



Section A. Governing Body and Management

Table with 3 main columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members... 2 Did any officer, director, trustee... 3 Did the organization delegate control... 4 Did the organization make any significant changes... 5 Did the organization become aware... 6 Did the organization have members... 7a Did the organization have members... 7b Are any governance decisions... 8 Did the organization contemporaneously document... 8a The governing body? 8b Each committee... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address?

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 main columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies... 11a Has the organization provided a complete copy of this Form 990... 11b Describe on Schedule O the process... 12a Did the organization have a written conflict of interest policy? 12b Were officers, directors, or trustees... 12c Did the organization regularly and consistently monitor... 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention... 15 Did the process for determining compensation... 15a The organization's CEO, Executive Director... 15b Other officers or key employees... 16a Did the organization invest in, contribute assets to, or participate... 16b If "Yes," did the organization follow a written policy or procedure...

Section C. Disclosure

Table with 2 main columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed (AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT, VA, WV, WI) 18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: FARHAN IRSHAD ONE WHITEHALL STREET 2ND FLOOR NEW YORK, NY 10004 (212) 967-7800

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former			
(1) RAYMOND DEBANNE CHAIR & CHAIR EXEC COMMITTEE	3.00	X		X				0	0	0
(2) BURTON HAIMES CHAIR EMERITUS	0.30	X						0	0	0
(3) THILO SEMMELBAUER CO-CHAIRMAN	0.30	X						0	0	0
(4) SYLVAIN DESJONQUERES CO-CHAIRMAN	0.30	X						0	0	0
(5) CHRISTOPHE DUTHOIT FINANCE/INV COMM CHAIR/ TREASURER	2.00	X		X				0	0	0
(6) ANYA KULIGINA DIRECTOR	0.30	X						0	0	0
(7) KARIM TABET DIRECTOR	0.30	X						0	0	0
(8) SANDRA TAMER DIRECTOR	0.30	X						0	0	0
(9) MITRA BEST DIRECTOR	0.30	X						0	0	0
(10) ROBERT SPATT DIRECTOR	0.30	X						0	0	0
(11) YVES ANDRE-ISTEL DIRECTOR	0.30	X						0	0	0
(12) LESLIE GRANT-SMITH DIRECTOR	0.30	X						0	0	0
(13) DAVID VAN ZANDT DIRECTOR	0.30	X						0	0	0
(14) KETTY PUCCI SISTI MAISONROUGE DIRECTOR	0.30	X						0	0	0
(15) JULIA SHERBAKOV DIRECTOR	0.30	X						0	0	0
(16) JEAN-PIERRE CHESSE DIRECTOR	0.30	X						0	0	0
(17) AMY SCHULMAN DIRECTOR	0.30	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee			
(18) AISHA HAYNIE SMART DIRECTOR	0.30	X					0	0	0
(19) CHARLES OWUBAH CHIEF EXECUTIVE OFFICER	40.00			X			431,703	0	39,449
(20) GARY CAMUS CHIEF FINANCIAL OFFICER	40.00			X			272,095	0	32,069
(21) MARIA E FORT MEYER DIR. OF PEOPLE & STRATEGY	40.00				X		244,506	0	49,982
(22) ERIC BEBERNITZ DIR. OF EXTERNAL RELATIONS	40.00				X		243,701	0	31,802
(23) MICHAEL P RODRIGUEZ PROJECT DIRECTOR, PROPEL ADAPT	40.00				X		211,338	0	41,889
(24) JOHN T STILLMAN DIR. OF TECH. SVC AND INNOVATION	40.00				X		185,133	0	40,439
(25) TIMOTHY A STAFFA CHIEF OF STAFF	40.00				X		179,226	0	44,953
(26) TORI SAYANLAR DIRECTOR, DEVELOPMENT	40.00					X	164,750	0	44,045
(27) MARIA D BARRIOS QUINTANA DIRECTOR, BUSINESS DEVT.	40.00					X	160,001	0	43,408
(28) EMILY B TYREE ASSOCIATE DIR, COMMUNICATIONS	40.00					X	154,402	0	42,247
(29) AINE M DODDY DIRECTOR, DONOR MARKETING	40.00					X	156,955	0	32,536
(30) LAUREN GORYN CONTROLLER (UNTIL 09/24)	40.00					X	146,390	0	34,279
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)						2,550,200	0	477,098	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	32
--	----

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PLUSMEDIA 100 MILL PLAIN ROAD 4TH FLOOR DANBURY, CT 06811	MARKETING CONSULTING	1,347,243
ANKURA CONSULTING GROUP LLC 485 LEXINGTON AVE 10TH FLOOR NEW YORK, NY 10017	EXPERT SERVICES AND ADVISORY	390,283
YURGOSKY CONSULTING LTD 307 FIFTH AVE 9TH FLOOR NEW YORK, NY 10016	SALESFORCE IMPLEMENTATION	387,463
CAROL CONE ON PURPOSE LLC 2911 WINDING OAK LANE 2018 WELLINGTON, FL 33414	PURPOSE AND FAST CO AWARD ENTRY/PURPOSE	276,451
ANNE LEWIS STRATEGIES 650 MASSACHUSETTS AVE NW SUITE 505 WASHINGTON, DC 20001	EMAIL MARKETING CONSULTING	231,700

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	9
---	---

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include Contributions, Gifts, Grants, and Other Amt Similar Amounts, Federated campaigns, Membership dues, Fundraising events, Related organizations, Government grants, All other contributions, gifts, grants, and similar amounts, Noncash contributions, and Total.

Table for Program Service Revenue with columns for Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded from tax. Rows include SERVICE CONTRACT INCOME (900099) and All other program service revenue.

Table for Other Revenue with columns for (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded from tax. Rows include Investment income, Income from investment of tax-exempt bond proceeds, Royalties, Gross rents (Real/Personal), Net rental income, Gross amount from sales of assets, Net gain or (loss), Gross income from fundraising events, Net income or (loss) from fundraising events, Gross income from gaming activities, Net income or (loss) from gaming activities, Gross sales of inventory, and Net income or (loss) from sales of inventory.

Table for Miscellaneous Revenue with columns for Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded from tax. Rows include MISCELLANEOUS (900099) and All other revenue.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	577,237	577,237		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	18,103,651	18,103,651		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,048,285	620,145	1,105,522	322,618
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	36,732,647	32,738,114	2,265,847	1,728,686
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,076,675	888,765	114,378	73,532
9 Other employee benefits	6,849,329	5,316,656	1,026,070	506,603
10 Payroll taxes	752,960	577,991	118,461	56,508
11 Fees for services (non-employees):				
a Management				
b Legal	710,555	162,336	548,219	
c Accounting	270,111	104,583	165,528	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	12,071			12,071
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,335,294	1,857,844	943,756	2,533,694
12 Advertising and promotion	1,123,722	222,493	778	900,451
13 Office expenses	3,845,728	3,497,579	151,581	196,568
14 Information technology	567,321	513,244	25,848	28,229
15 Royalties				
16 Occupancy	3,448,672	2,801,567	409,450	237,655
17 Travel	2,763,332	2,572,319	108,171	82,842
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	748,075	598,830	87,705	61,540
20 Interest	270,917		270,917	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	316,682	168,858	101,161	46,663
23 Insurance	163,895	56,634	78,557	28,704
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DONATED FOOD	19,359,630	19,359,630		
b FOOD SECURITY	15,813,003	15,813,003		
c HEALTH	14,275,329	14,275,329		
d VEHICLES	6,688,297	6,687,130		1,167
e All other expenses	18,160,537	17,078,341	327,998	754,198
25 Total functional expenses. Add lines 1 through 24e	160,013,955	144,592,279	7,849,947	7,571,729
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

Table with columns (A) Beginning of year, (B) End of year, and rows for Assets (1-16) and Liabilities (17-26). Includes sub-sections for Net Assets or Fund Balances (27-33) and a checkbox for FASB ASC 958 compliance.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	160,756,238
2	Total expenses (must equal Part IX, column (A), line 25)	2	160,013,955
3	Revenue less expenses. Subtract line 2 from line 1	3	742,283
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,465,067
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-283,410
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	14,923,940

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Yes	

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
ACTION AGAINST HUNGER - USA

Employer identification number
13-3327220

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	76,051,174	116,305,006	128,476,830	148,578,117	159,881,894	629,293,021
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3	76,051,174	116,305,006	128,476,830	148,578,117	159,881,894	629,293,021
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						629,293,021

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4.	76,051,174	116,305,006	128,476,830	148,578,117	159,881,894	629,293,021
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,574	139	7,410	156,120	725,633	893,876
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,263,278	587,902	623,682	462,605	351,746	3,289,213
11 Total support. Add lines 7 through 10						633,476,110
12 Gross receipts from related activities, etc. (see instructions)					12	301,004

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f) divided by line 11, column (f))	14	99.340 %
15 Public support percentage for 2023 Schedule A, Part II, line 14	15	99.460 %

16a 33 1/3% support test—2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 13 Total support; 14 First 5 years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2024; Row 16: Public support percentage from 2023 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2024; Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17; Row 19a: 33 1/3% support tests-2024; Row 19b: 33 1/3% support tests-2023; Row 20: Private foundation.

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

- | | Yes | No |
|------------|-----|----|
| | | |
| 11a | | |
| 11b | | |
| 11c | | |
- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
- b** A family member of a person described on 11a above?
- c** A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.*

Section B. Type I Supporting Organizations

- | | Yes | No |
|----------|-----|----|
| | | |
| 1 | | |
| | | |
| 2 | | |
- 1** Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*

Section C. Type II Supporting Organizations

- | | Yes | No |
|----------|-----|----|
| | | |
| 1 | | |
- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*

Section D. All Type III Supporting Organizations

- | | Yes | No |
|----------|-----|----|
| | | |
| 1 | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*
- 3** By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**):

- a** The organization satisfied the Activities Test. Complete **line 2** below.
- b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

- 2** Activities Test. **Answer lines 2a and 2b below.**

- | | Yes | No |
|-----------|-----|----|
| | | |
| 2a | | |
| | | |
| 2b | | |
- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b** Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*

- 3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

- | | Yes | No |
|-----------|-----|----|
| | | |
| 3a | | |
| | | |
| 3b | | |
- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

(A) Prior Year

(B) Current Year
(optional)

- | | | | |
|---|----------|--|--|
| 1 Net short-term capital gain | 1 | | |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3 | 4 | | |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | | |
| 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |

Section B - Minimum Asset Amount

(A) Prior Year

(B) Current Year
(optional)

- | | | | |
|--|-----------|--|--|
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | 1 | | |
| a Average monthly value of securities | 1a | | |
| b Average monthly cash balances | 1b | | |
| c Fair market value of other non-exempt-use assets | 1c | | |
| d Total (add lines 1a, 1b, and 1c) | 1d | | |
| e Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 Acquisition indebtedness applicable to non-exempt use assets | 2 | | |
| 3 Subtract line 2 from line 1d | 3 | | |
| 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | | |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 Multiply line 5 by 0.035 | 6 | | |
| 7 Recoveries of prior-year distributions | 7 | | |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | | |

Section C - Distributable Amount

Current Year

- | | | |
|--|----------|--|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 Enter 85% of line 1 | 2 | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 Enter greater of line 2 or line 3 | 4 | |
| 5 Income tax imposed in prior year | 5 | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |

- 7** Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

(continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6 Other distributions (describe in Part VI). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2024:			
a From 2019.			
b From 2020.			
c From 2021.			
d From 2022.			
e From 2023.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020.			
b Excess from 2021.			
c Excess from 2022.			
d Excess from 2023.			
e Excess from 2024.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.
 ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization ACTION AGAINST HUNGER - USA	Employer identification number 13-3327220
---	---

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ
 - 501(c)() (enter number) organization
 - 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
 - 527 political organization
- Form 990-PF
 - 501(c)(3) exempt private foundation
 - 4947(a)(1) nonexempt charitable trust treated as a private foundation
 - 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
ACTION AGAINST HUNGER - USA

Employer identification number
13-3327220

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization
ACTION AGAINST HUNGER - USA

Employer identification number
13-3327220

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization ACTION AGAINST HUNGER - USA	Employer identification number 13-3327220
---	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c) (7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990.**

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

Name of the organization
ACTION AGAINST HUNGER - USA

Employer identification number

13-3327220

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a** Board designated or quasi-endowment ▶
- b** Permanent endowment ▶
- c** Term endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
- (ii)** Related organizations

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

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

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,342,811	851,616	491,195
d Equipment		646,111	634,156	11,955
e Other		3,193,765	1,698,442	1,495,323
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,998,473

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
PROVISION FOR UNANTICIPATED LOSSES DUE TO NETWORK	1,500,000
OPERATING LEASE OBLIGATION	425,128
REFUNDABLE ADVANCES	5,362,648
	38,901,094
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	46,188,870

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	160,777,046
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	20,808	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	20,808
3	Subtract line 2e from line 1		3	160,756,238
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	160,756,238

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	160,034,763
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	20,808	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	20,808
3	Subtract line 2e from line 1		3	160,013,955
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	160,013,955

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation	
------------------	-------------	--

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Statement of Activities Outside the United States

OMB No. 1545-0047

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**

▶ **Attach to Form 990.**

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

Open to Public Inspection

Name of the organization
ACTION AGAINST HUNGER - USA

Employer identification number
13-3327220

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants or other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) SUB-SAHARAN AFRICA	8	1,277	PROGRAM SERVICE ACTIVITIES	PROVIDE NUTRITION, WATER, AND SANITATION, FOOD, SECURITY AND PUBLIC HEALTH.	122,125,136
(2) CENTRAL AMERICA AND THE CARIBBEAN	1	79	PROGRAM SERVICE ACTIVITIES	PROVIDE NUTRITION, WATER, AND SANITATION, FOOD, SECURITY AND PUBLIC HEALTH.	4,953,879
(3) EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		935,876
(4) EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		3,240,142
(5) MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		8,500
(6) NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		966,475
(7) RUSSIA AND THE NEWLY INDEPENDENT STATES	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		25,500
(8) SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		689,511
(9) SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		12,237,647
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	9	1,356			132,945,019
b Total from continuation sheets to Part I	0	0			12,237,647
c Totals (add lines 3a and 3b)	9	1,356			145,182,666

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. **Part II** can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
1			EAST ASIA AND THE PACIFIC	DIVERSE LEADERSHIP IN CRISES	927,376	WIRE	0		
2			EAST ASIA AND THE PACIFIC	MYRAID-PHILIPPINES	8,500	WIRE	0		
3			EUROPE	DIVERSE LEADERSHIP IN CRISES	262,937	WIRE	0		
4			EUROPE	CALP NETWORK: INCREASING IMPACT THROUGH COLLECTIVE ACTION	123,772	WIRE	0		
5			EUROPE	DIVERSE LEADERSHIP IN CRISES	134,265	WIRE	0		
6			EUROPE	PROMOTING RESULTS AND OUTCOME THROUGH POLICY AND ECONOMIC LEVERS	252,319	WIRE	0		
7			EUROPE	ENHANCING LOCAL EFFORTS FOR VITAL, TRANSFORMATIVE, AND EVIDENCE-BASED NUTRITION	43,872	WIRE	0		
8			EUROPE	CALP NETWORK: INCREASING IMPACT THROUGH COLLECTIVE ACTION 2022-2024	280,099	WIRE	0		
9			EUROPE	CALP NETWORK: INCREASING IMPACT THROUGH COLLECTIVE ACTION	12,757	WIRE	0		
10			EUROPE	ENHANCING LOCAL EFFORTS FOR VITAL, TRANSFORMATIVE, AND EVIDENCE-BASED NUTRITION	125,567	WIRE	0		
11			EUROPE	ACCELERATING NATIONAL WASTING TREATMENT REFORM PROJECT	210,880	WIRE	0		
12			EUROPE	CALP NETWORK: INCREASING IMPACT THROUGH COLLECTIVE ACTION 2022-2024	637,855	WIRE	0		
13			EUROPE	PROMOTING RESULTS AND OUTCOME THROUGH POLICY AND ECONOMIC LEVERS	797,368	WIRE	0		
14			EUROPE	ENHANCING LOCAL EFFORTS FOR VITAL, TRANSFORMATIVE, AND EVIDENCE-BASED NUTRITION	28,619	WIRE	0		
15			EUROPE	ACCELERATING NATIONAL WASTING TREATMENT REFORM PROJECT	55,008	WIRE	0		
16			EUROPE	ACCELERATING NATIONAL WASTING TREATMENT REFORM PROJECT	274,824	WIRE	0		
17			MIDDLE EAST AND NORTH AFRICA	TABET GIFT TO GAZA	8,500	WIRE	0		
18			NORTH AMERICA	PROMOTING BETTER NUTRITION OUTCOMES WITH TECHNICAL SUPPORT FOR DATA, PREPAREDNESS, RESPONSE, AND RECOVERY	933,704	WIRE	0		
19			NORTH AMERICA	NUTRITION+ : STRENGTHENING LOCALLY LED EMERGENCY NUTRITION RESPONSE FOR HUMANITARIAN AND PUBLIC HEALTH EMERGENCIES	32,771	WIRE	0		
20			RUSSIA AND THE NEWLY INDEPENDENT STATES	UKRAINE EMERGENCY RESPONSE	25,500	WIRE	0		
21			SOUTH ASIA	ACF-FR: REINFORCING IMAM PROGRAM IN NEPAL	415,761	WIRE	0		
22			SOUTH ASIA	ACF-FR: WOMEN FRIENDLY SPACES AND MENTAL HEALTH INITIATIVES IN AFGHANISTAN (USPT08)	88,750	WIRE	0		
23			SOUTH ASIA	METLIFE_BHRC PROJECT IN NEPAL	85,000	WIRE	0		
24			SOUTH ASIA-INDIA	BREAKING THE CYCLE OF UNDERNUTRITION IN INDIA	100,000	WIRE	0		
25			SUB-SAHARAN AFRICA	INTEGRATED MULTI-SECTOR EMERGENCY RESPONSE TO POPULATIONS AFFECTED BY CONFLICT AND VIOLENCE IN TIGRAY, AMHARA, OROMIA AND BENISHANGUL GUMUZ REGIONS ETHIOPIA	35,131	WIRE	0		
26			SUB-SAHARAN AFRICA	INTEGRATED EMERGENCY NUTRITION, IYCF, FSL AND PSYCHOSOCIAL SUPPORT TO SOUTH SUDANESE REFUGEES AND HOST COMMUNITY IN GAMBELLA REGION, ETHIOPIA	302,426	WIRE	0		
27			SUB-SAHARAN AFRICA	GENERATE EVIDENCE ON AND SCALED SIMPLIFIED APPROACHES IN THE MANAGEMENT OF WASTING THROUGH OPERATIONAL RESEARCH.	26,084	WIRE	0		
28			SUB-SAHARAN AFRICA	PROVISION OF GBV RESPONSE AND PREVENTION FOR CONFLICT AFFECTED COMMUNITIES IN BENISHANGUL-GUMUZ REGION: METEKEL, ASOSA & KAMASHI ZONES	24,159	WIRE	0		
29			SUB-SAHARAN AFRICA	PROVISION OF MULTI-SECTOR LIFE-SAVING RESPONSE FOR VULNERABLE POPULATIONS AFFECTED AT OROMIA REGION BORENA ZONE, MOYALE AND DUBULUK WOREDAS	199,428	WIRE	0		
30			SUB-SAHARAN AFRICA	INTEGRATED MULTI-SECTORAL RESPONSE TO IDP RETURNEES IN BEGI WOREDA, WEST WOLLEGA ZONE, OROMIA REGIONS	316,558	WIRE	0		
31			SUB-SAHARAN AFRICA	INTEGRATED MULTI-SECTOR RESPONSE TO CONFLICT AFFECTED COMMUNITIES IN THE OROMIA REGION, KELEM WELLEGA ZONES, DEMBI DOLLO TOWN	141,746	WIRE	0		
32			SUB-SAHARAN AFRICA	PROVISION OF GBV RESPONSE AND PREVENTION FOR CONFLICT AFFECTED COMMUNITIES IN BENISHANGUL-GUMUZ REGION	36,783	WIRE	0		
33			SUB-SAHARAN AFRICA	LIFESAIVING NUTRITION SUPPORT TO DROUGHT AFFECTED VULNERABLE COMMUNITIES IN ADADELE AND GODE WOREDAS OF SHEBELLE ZONE AND HARGELLE WOREDA OF AFDER ZONE AT SOMALI REGION IN ETHIOPIA	666,100	WIRE	0		
34			SUB-SAHARAN AFRICA	INTEGRATED EARLY RECOVERY AND RESILIENCE RESPONSE TO CRISIS AFFECTED COMMUNITIES IN AMHARA REGION, WAGHIMRA ZONE (TSEGEBJI AND ZIQUALA WOREDAS) AND TIGRAY REGION, SOUTHEASTERN ZONE (DEGUA TEMBEN AND ENDERTA WOREDAS) OF ETHIOPIA.	30,306	WIRE	0		
35			SUB-SAHARAN AFRICA	PARTNERSHIP - RIGHT TO GROW ETHIOPIA	66,575	WIRE	0		
36			SUB-SAHARAN AFRICA	MULTISECTORAL HUMANITARIAN RESPONSE TO THE DETERIORATING NUTRITION SITUATION, FOCUSING ON SEVERELY AFFECTED CRISIS CONTEXTS IN SUB-SAHARAN AFRICA	105,383	WIRE	0		
37			SUB-SAHARAN AFRICA	FACILITATING THE ADOPTION OF HUMANITARIAN WASH INNOVATION	14,827	WIRE	0		
38			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE PROJECT TO THE DROUGHT AFFECTED POPULATIONS	51,181	WIRE	0		
39			SUB-SAHARAN AFRICA	UPTAKE OF AN INNOVATIVE WATER TESTING SYSTEM IN HUMANITARIAN SETTINGS	6,043	WIRE	0		
40			SUB-SAHARAN AFRICA	IMPROVING ACCESS TO QUALITY ESSENTIAL PACKAGE OF HEALTH SERVICES DELIVERY THROUGH STATIC, OUTREACH AND MOBILE SERVICES IN DAYNILE, HODAN AND SHINGANI DISTRICTS, BANADIR REGION.	94,919	WIRE	0		
41			SUB-SAHARAN AFRICA	ALLEVIATING SUFFERING IN URBAN AND SEMI URBAN SETTINGS IN SOMALIA DUE TO PROTRACTED DROUGHT.	1,159,901	WIRE	0		
42			SUB-SAHARAN AFRICA	HUMANITARIAN ASSISTANCE AND RESILIENCE BUILDING IN SOMALIA (HARBS)	396,764	WIRE	0		
43			SUB-SAHARAN AFRICA	INTEGRATED EMERGENCY LIFESAIVING HEALTH, NUTRITION, WASH AND PROTECTION SUPPORT FOR VULNERABLE POPULATIONS AFFECTED BY ADVERSE EFFECTS OF EL NI O IN SOUTH CENTRAL SOMALIA.	1,152,454	WIRE	0		
44			SUB-SAHARAN AFRICA	INTEGRATED EMERGENCY LIFESAIVING HEALTH, NUTRITION, WASH AND PROTECTION SUPPORT FOR VULNERABLE POPULATIONS AFFECTED BY ADVERSE EFFECTS OF EL NI O IN SOUTH CENTRAL SOMALIA UNDER THE FCDO BUSINESS CASE HARBS, SOMALIA.	960,592	WIRE	0		
45			SUB-SAHARAN AFRICA	MULTI SECTORAL HUMANITARIAN RESPONSE TO THE DETERIORATING GLOBAL NUTRITION SITUATION FOCUSING ON SEVERELY AFFECTED CRISIS CONTEXTS IN SUB-SAHARAN AFRICA.	212,431	WIRE	0		
46			SUB-SAHARAN AFRICA	COUNTRY PROGRAM - SOMALIA	395,799	WIRE	0		
47			SUB-SAHARAN AFRICA	RIVERINE & PASTORAL FOOD SYSTEM STRENGTHENING (RFSS)	600,935	WIRE	0		
48			SUB-SAHARAN AFRICA	ADOPTING AN INNOVATIVE SOLUTION FOR HOUSEHOLD WATER TREATMENT.	32,465	WIRE	0		
49			SUB-SAHARAN AFRICA	IMPROVING HEALTH SERVICES IN SOMALIA (DAMAL CAAFIMAAD) PROJECT-DELIVERING THE ESSENTIAL PACKAGE OF HEALTH SERVICES IN BAKOOL REGION	2,456,371	WIRE	0		
50			SUB-SAHARAN AFRICA	PROVISION OF INTEGRATED LIFE-SAVING HEALTHCARE, NUTRITION, WASH, AND PROTECTION SERVICES FOR CRISIS-AFFECTED POPULATIONS IN SOUTH SUDAN	111,400	WIRE	0		
51			SUB-SAHARAN AFRICA	SURVEILLANCE AND EVALUATION TEAM (SET) AND MULTI-SECTORAL EMERGENCY TEAM (MET & SURGE): AN INTEGRATED EMERGENCY	127,650	WIRE	0		
52			SUB-SAHARAN AFRICA	IMPROVING NUTRITIONAL STATUS OF CHILDREN U5 AND PLWS THROUGH GENDER TRANSFORMATIVE/SENSITIVE NUTRITION-SPECIFIC AND NUTRITION-SENSITIVE INTERVENTIONS, WITH A SPECIAL FOCUS ON CHILDREN U2, IN FLOOD AFFECTED COMMUNITIES OF JONGLEI STATE, SOUTH SUDAN.	272,415	WIRE	0		
53			SUB-SAHARAN AFRICA	GLOBAL EMERGENCY NUTRITION RESPONSE PROGRAM II 2024-2026	185,492	WIRE	0		
54			SUB-SAHARAN AFRICA	MULTI SECTORAL, HUMANITARIAN RESPONSE TO THE DETERIORATING GLOBAL NUTRITION SITUATION FOCUSING ON SEVERELY AFFECTED CRISIS CONTEXTS IN SUB-SAHARAN AFRICA.	22,814	WIRE	0		
55			SUB-SAHARAN AFRICA	NUTRITION ACTIVITIES IN REFUGEE SETTLEMENTS	152,929	WIRE	0		
56			SUB-SAHARAN AFRICA	ENHANCE COMMUNITY RESILIENCE AND REDUCE MALNUTRITION IN UGANDA THROUGH INTEGRATED PREVENTION STRATEGIES.	81,954	WIRE	0		
57			SUB-SAHARAN AFRICA	KARAMOJA LIVELIHOOD AND INCOME OPPORTUNITIES PROJECTS (KLIO-PROJECT)	48,040	WIRE	0		
58			SUB-SAHARAN AFRICA	MULTI-SECTORAL RESPONSE TO THE SOUTH SUDANESE CRISIS IN UGANDA IN THE OBONGI AND ADJUMANI DISTRICTS	30,426	WIRE	0		
59			SUB-SAHARAN AFRICA	CROSS-BORDER EMERGENCY RELIEF: INTEGRATED HEALTH, WATER, SANITATION AND HYGIENE SUPPORT FOR THE MOST VULNERABLE POPULATIONS AFFECTED BY DROUGHT IN SOMALIA.	554,662	WIRE	0		
60			SUB-SAHARAN AFRICA	CROSS-BORDER EMERGENCY RELIEF PROJECT: INTEGRATED HEALTH, WATER, SANITATION AND HYGIENE (WASH) SUPPORT FOR VULNERABLE POPULATIONS AFFECTED BY CLIMATE CRISIS IN SOMALIA AND KENYA.	87,267	WIRE	0		
61			SUB-SAHARAN AFRICA	GENDER EQUITABLE NUTRITION IN TANZANIA AND UGANDA (GENTU)	55,208	WIRE	0		
62			SUB-SAHARAN AFRICA	MULTISECTORAL HUMANITARIAN RESPONSE TO THE DETERIORATING NUTRITION SITUATION, FOCUSING ON SEVERELY AFFECTED CRISIS CONTEXTS IN SUBSAHARAN AFRICA.	208,245	WIRE	0		
63			SUB-SAHARAN AFRICA	STRENGTHENING LOCAL PARTNER CAPACITY FOR EFFECTIVE BIODIVERSITY-POVERTY.	45,631	WIRE	0		
64			SUB-SAHARAN AFRICA	SUPPORT IN DRC	88,750	WIRE	0		
65			SUB-SAHARAN AFRICA	TOGETHER RISING	127,500	WIRE	0		
66			SUB-SAHARAN AFRICA	PROMOTING RESULTS AND OUTCOME THROUGH POLICY AND ECONOMIC LEVERS	551,903	WIRE	0		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 66

3 Enter total number of other organizations or entities 0

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* Yes No

Additional Data

Software ID:

Software Version:

**Supplemental Information Regarding
 Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
 ACTION AGAINST HUNGER - USA

Employer identification number
 13-3327220

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|--|---|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

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

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

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		ANNUAL GALA (event type)	(event type)	(total number)	(add col. (a) through col. (c))
1	Gross receipts	1,710,214			1,710,214
2	Less: Contributions	1,630,215			1,630,215
3	Gross income (line 1 minus line 2)	79,999			79,999
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	2,001			2,001
	6 Rent/facility costs	34,022			34,022
	7 Food and beverages	106,860			106,860
	8 Entertainment	57,473			57,473
	9 Other direct expenses	109,578			109,578
10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				309,934
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				-229,935

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ -----

Address ▶ -----

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

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

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

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ -----

Description of services provided ▶ -----

Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See Instructions.

Return Reference	Explanation
------------------	-------------

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization
ACTION AGAINST HUNGER - USA

Employer identification number

13-3327220

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Yes **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) PATHFINDER INTERNATIONAL INC 9 GALEN ST STE 217 WATERTOWN, MA 02472	53-0235320	501(C)(3)	476,492	0			PROMOTING RESULTS AND OUTCOME THROUGH POLICY AND ECONOMIC LEVERS
(2) UNIVERSITY OF WASHINGTON 4333 BROOKLYN AVE NE SEATTLE, WA 98105	91-6001537	SECTION 115	66,700	0			GENERATE EVIDENCE ON AND SCALED SIMPLIFIED APPROACHES IN THE MANAGEMENT OF WASTING THROUGH OPERATIONAL RESEARCH
(3) HUMANITY AND INCLUSION 8757 GEORGIA AVE STE 420 SILVER SPRING, MD 20910	55-0914744	501(C)(3)	34,000	0			PROMOTING RESULTS AND OUTCOME THROUGH POLICY AND ECONOMIC LEVERS

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

3 Enter total number of other organizations listed in the line 1 table **0**

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	<p>SUB-AWARD MONITORING AT AAH USA INVOLVES A COMPREHENSIVE PROCESS TO ENSURE COMPLIANCE WITH FEDERAL REQUIREMENTS AND TO MITIGATE RISK. PRIOR TO ISSUING A SUB-AWARD, AND ANNUALLY THEREAFTER, AAH USA UTILIZES FEDERALLY MANDATED ELIGIBILITY CHECKLISTS TO DETERMINE WHETHER AN ORGANIZATION QUALIFIES FOR FEDERALLY FUNDED PROJECTS. THE AWARD MANAGEMENT (AM) TEAM IS RESPONSIBLE FOR CONDUCTING DUE DILIGENCE, WHICH INCLUDES CHECKING POTENTIAL SUB-RECIPIENTS AGAINST REQUIRED FEDERAL DATABASES AND REQUESTING NECESSARY DOCUMENTATION, SUCH AS SINGLE AUDIT OR OTHER STATUTORY AUDIT REPORTS, AS APPLICABLE. THE AM TEAM REVIEWS THESE AUDIT REPORTS AND MAY ALSO PERFORM INFORMAL CHECKS WITH PEER ORGANIZATIONS TO FURTHER ASSESS POTENTIAL SUB-RECIPIENTS. AAH USA USES STANDARDIZED SUBRECIPIENT AGREEMENTS THAT INCORPORATE U.S. GOVERNMENT (USG) PRIME AWARD REQUIREMENTS. IN CASES WHERE SUB-RECIPIENTS PRESENT ELEVATED RISK PROFILES, AAH USA IMPOSES ADDITIONAL, MORE STRINGENT TERMS AND CONDITIONS, AND GENERALLY AVOIDS ENTERING INTO CONTRACTUAL RELATIONSHIPS WITH THOSE DEEMED HIGH RISK. TO ENSURE THE INTEGRITY AND QUALITY OF PROJECT IMPLEMENTATION, TECHNICAL ADVISORS CARRY OUT SITE VISITS TO ASSESS COMPLIANCE WITH TECHNICAL STANDARDS. ADDITIONALLY, THE AM TEAM MONITORS THE SUBMISSION OF SUBRECIPIENT PROGRESS REPORTS, CONDUCTS FINANCIAL REVIEWS, AND CONSISTENTLY ENSURES TIMELY SUBMISSION OF REQUIRED REPORTS, INCLUDING SUBRECIPIENT INPUTS, TO THE RELEVANT FEDERAL ENTITIES.</p>

Additional Data

[Return to Form](#)

Software ID:
Software Version:

Compensation Information

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
ACTION AGAINST HUNGER - USA

Employer identification number

13-3327220

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel
<input type="checkbox"/> Travel for companions
<input type="checkbox"/> Tax idemnification and gross-up payments
<input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |
|--|--|

b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
If "Yes," on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
If "Yes," on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

	Yes	No
1a		
1b		
2		
3		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 CHARLES OWUBAH CHIEF EXECUTIVE OFFICER	(i)	431,703	0	0	13,574	25,875	471,152	0
	(ii)	0	0	0	0	0	0	0
2 GARY CAMUS CHIEF FINANCIAL OFFICER	(i)	272,095	0	0	11,538	20,531	304,164	0
	(ii)	0	0	0	0	0	0	0
3 MARIA E FORT MEYER DIR. OF PEOPLE & STRATEGY	(i)	244,506	0	0	30,945	19,037	294,488	0
	(ii)	0	0	0	0	0	0	0
4 ERIC BEBERNITZ DIR. OF EXTERNAL RELATIONS	(i)	243,701	0	0	18,442	13,360	275,503	0
	(ii)	0	0	0	0	0	0	0
5 MICHAEL P RODRIGUEZ PROJECT DIRECTOR, PROPEL ADAPT	(i)	211,338	0	0	30,945	10,944	253,227	0
	(ii)	0	0	0	0	0	0	0
6 JOHN T STILLMAN DIR. OF TECH. SVC AND INNOVATION	(i)	185,133	0	0	30,867	9,572	225,572	0
	(ii)	0	0	0	0	0	0	0
7 TIMOTHY A STAFFA CHIEF OF STAFF	(i)	179,226	0	0	30,654	14,299	224,179	0
	(ii)	0	0	0	0	0	0	0
8 TORI SAYANLAR DIRECTOR, DEVELOPMENT	(i)	164,750	0	0	30,831	13,214	208,795	0
	(ii)	0	0	0	0	0	0	0
9 MARIA D BARRIOS QUINTANA DIRECTOR, BUSINESS DEVT.	(i)	160,001	0	0	30,752	12,656	203,409	0
	(ii)	0	0	0	0	0	0	0
10 EMILY B TYREE ASSOCIATE DIR, COMMUNICATIONS	(i)	154,402	0	0	30,633	11,614	196,649	0
	(ii)	0	0	0	0	0	0	0
11 AINE M DODDY DIRECTOR, DONOR MARKETING	(i)	156,955	0	0	19,907	12,629	189,491	0
	(ii)	0	0	0	0	0	0	0
12 LAUREN GORYN CONTROLLER (UNTIL 09/24)	(i)	146,390	0	0	23,150	11,129	180,669	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
------------------	-------------

Additional Data

Return to Form

Software ID:

Software Version:

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
ACTION AGAINST HUNGER - USA

Employer identification number

13-3327220

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	61	591,254	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	874	15,984,561	CATALOGUE ACFIN/FMV
20 Drugs and medical supplies	X	216	2,128,022	CATALOGUE ACFIN/FMV
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
Other (OTHER PROGRAM)	X	167	535,719	FMV
▶ <u>SUPPLIES</u>)				
Other (GALA GIFTS)	X	4	2,001	FMV
▶)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	Yes	No
		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	THE NUMBER IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS.
PART I, LINE 32B:	ACTION AGAINST HUNGER USA USES CARS (CHARITABLE ADULT RIDES & SERVICES), A 501(C)(3) NONPROFIT SOCIAL ENTERPRISE OWNED BY A NONPROFIT SUPPORTING NONPROFITS THROUGH VEHICLE DONATIONS, TO PROCESS VEHICLE DONATIONS. ACTION AGAINST HUNGER USES THE GIVING BLOCK, A COMPANY OFFERING CRYPTOCURRENCY DONATION SOLUTIONS FOR NONPROFITS AND CHARITIES, TO PROCESS CRYPTOCURRENCY DONATIONS. AAHUSA DID NOT RECEIVE ANY DONATED VEHICLES OR CRYPTOCURRENCY DURING THE YEAR ENDED DECEMBER 31, 2024.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE O
(Form 990)

(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization
ACTION AGAINST HUNGER - USA

Employer identification number

13-3327220

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS, REVIEWED BY SENIOR MANAGEMENT AND PROVIDED TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. HOWEVER, IN THE EVENT THAT APPROVAL IS NEEDED BETWEEN MEETINGS, THE BOARD OF DIRECTORS HAS AUTHORIZED THE FINANCE COMMITTEE OF THE BOARD TO CONDUCT A THOROUGH REVIEW OF THE 990 WITH MANAGEMENT (TO INCLUDE INFORMING ANY BOARD MEMBER OF THEIR BEING REFERENCED IN ANY SECTION OTHER THAN THE LIST OF MEMBERS OF THE BOARD) AND, ACTING BETWEEN BOARD MEETINGS, TO AUTHORIZE RELEASE OF THE 990. IN THIS EVENT, A COPY OF THE FORM 990 WOULD BE E-MAILED TO ALL MEMBERS PRIOR TO FILING WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 12C	PROCEDURES FOR ADDRESSING A CONFLICT OF INTEREST: - EACH BOARD MEMBER ANNUALLY SIGNS A CONFLICT OF INTEREST POLICY. - WHERE A MATTER HAS BEEN BROUGHT UP BEFORE THE BOARD OF DIRECTORS AND THE BOARD OF DIRECTORS HAS CONCLUDED THAT A CONFLICT OF INTEREST EXISTS, THE CHAIRMAN OR PRESIDENT OF THE BOARD OR COMMITTEE OF THE BOARD, IF APPROPRIATE, APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION, CONTRACT, OR ARRANGEMENT. - AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE DETERMINES WHETHER THE ORGANIZATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION, CONTRACT, OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. - IF A MORE ADVANTAGEOUS TRANSACTION, CONTRACT, OR OTHER ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE DETERMINES BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION, CONTRACT, OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER IT IS FAIR AND REASONABLE TO THE ORGANIZATION, AND MAKES ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION, CONTRACT, OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION. - EMPLOYEES ARE ASKED TO ANNUALLY DISCLOSE ANY POSSIBLE CONFLICT OF INTEREST. IF A CONFLICT OCCURS, THE EXECUTIVE DIRECTOR REVIEWS THE ISSUE AND APPROPRIATE CORRECTIVE AND DISCIPLINARY ACTION IS TAKEN, WHERE APPROPRIATE.
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE'S ROLE IS TO REVIEW AND SET THE COMPENSATION FOR THE EXECUTIVE DIRECTOR/CEO (UTILIZING INDEPENDENT BENCHMARKS AND RELATED INFORMATION). IN ESTABLISHING THE CEOS COMPENSATION THE COMMITTEE LOOKS AT ECONOMIC CONDITIONS, CONDITIONS OF THE ORGANIZATION, AND SUCCESSES UNDER CEO LEADERSHIP. THE EXECUTIVE DIRECTOR COMPLETES PERFORMANCE REVIEWS OF THE SENIOR STAFF AND DISCLOSES THEM TO THE COMPENSATION COMMITTEE. THE COMMITTEE ALSO REVIEWS THE SALARIES OF KEY STAFF AND CONSULT ON SALARY QUESTIONS REGARDING THE SENIOR STAFF TEAM SHOULD THEY ARISE. THE PROCESS IS DOCUMENTED AND RECORDED IN THE ORGANIZATION BOARD NOTES. THE LAST COMPENSATION REVIEW FOR THE EXECUTIVE DIRECTOR'S COMPENSATION WAS IN JULY 2022.
FORM 990, PART VI, SECTION C, LINE 19	IN KEEPING WITH ONE OF THE CORE PRINCIPLES (TRANSPARENCY) OF ITS FOUNDING CHARTER, ACTION AGAINST HUNGER ACF-USA PROVIDES THE PUBLIC WITH ACCESS TO ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS VIA THE ORGANIZATION'S WEBSITE, WWW.ACTIONAGAINSTHUNGER.ORG .
FORM 990, PART IX, LINE 24E	TRAINING: PROGRAM SERVICE EXPENSES 5,305,085. MANAGEMENT AND GENERAL EXPENSES 153. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 5,305,238. WATER & SANITATION: PROGRAM SERVICE EXPENSES 3,768,851. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 3,768,851. FREIGHT: PROGRAM SERVICE EXPENSES 3,654,564. MANAGEMENT AND GENERAL EXPENSES 155. FUNDRAISING EXPENSES 33. TOTAL EXPENSES 3,654,752. NON CONSUMABLES: PROGRAM SERVICE EXPENSES 1,723,586. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 1,723,586. LICENSES & SUBSCRIPTIONS: PROGRAM SERVICE EXPENSES 297,442. MANAGEMENT AND GENERAL EXPENSES 254,996. FUNDRAISING EXPENSES 743,604. TOTAL EXPENSES 1,296,042. NUTRITION: PROGRAM SERVICE EXPENSES 714,751. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 714,751. SECURITY: PROGRAM SERVICE EXPENSES 598,023. MANAGEMENT AND GENERAL EXPENSES 4,928. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 602,951. WAREHOUSE: PROGRAM SERVICE EXPENSES 413,794. MANAGEMENT AND GENERAL EXPENSES 1,585. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 415,379. ELECTRICAL SYSTEMS: PROGRAM SERVICE EXPENSES 250,554. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 250,554. EQUIP. RENTAL & MAINT.: PROGRAM SERVICE EXPENSES 185,522. MANAGEMENT AND GENERAL EXPENSES 19,899. FUNDRAISING EXPENSES 3,924. TOTAL EXPENSES 209,345. FOOD: PROGRAM SERVICE EXPENSES 143,891. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 143,891. STAFF RECRUITMENT: PROGRAM SERVICE EXPENSES 9,963. MANAGEMENT AND GENERAL EXPENSES 17,555. FUNDRAISING EXPENSES 2,362. TOTAL EXPENSES 29,880. PAYROLL PROCESSING FEES: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 28,727. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 28,727. RADIOS: PROGRAM SERVICE EXPENSES 8,565. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 8,565. FUNDRAISING EXPENSES: PROGRAM SERVICE EXPENSES 3,750. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 4,275. TOTAL EXPENSES 8,025.
FORM 990, PART XI, LINE 9:	EXCHANGE LOSS -283,410.

Additional Data

Return to Form

Software ID:

Software Version: