

Return of Organization Exempt From Income Tax

2009

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning **07/01**, 2009, and ending **06/30**, 20 **10**

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization **UNITED STATES FUND FOR UNICEF**
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
125 Maiden Lane 10th Floor
 City or town, state or country, and ZIP + 4
New York, NY 10038

D Employer identification number
13 : 1760110

E Telephone number
 (**212**) **686-5522**

G Gross receipts \$ **245,778,400**

F Name and address of principal officer: **CARYL M STERN**
125 Maiden Lane, New York, NY 10038

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ **www.unicefusa.org**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1947** **M** State of legal domicile: **NY**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: Saving Childrens Lives Around the World by (1) informing the American people of the needs of children in developing countries (2) creating an awareness of the diversity of human cultures, of the commonality of human needs and interests and other (Continued on Schedule O, Statement 2)				
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3 Number of voting members of the governing body (Part VI, line 1a)	3	19		
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18		
	5 Total number of employees (Part V, line 2a)	5	168		
	6 Total number of volunteers (estimate if necessary)	6	30,000		
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0		
b Net unrelated business taxable income from Form 990-T, line 34	7b	0			
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	236,845,429	Current Year	239,539,559
	9 Program service revenue (Part VIII, line 2g)		0		0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-11,760,225		1,404,597
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		614,036		2,705,942
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		225,699,240		243,650,098
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		175,206,207		192,162,051
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		18,016,509		18,518,447
	16a Professional fundraising fees (Part IX, column (A), line 11e)		50,298		932,504
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 28,681,020				
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		30,206,920		31,066,394	
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		223,479,934		242,679,396	
19 Revenue less expenses. Subtract line 18 from line 12		2,219,306		970,702	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	119,792,953	End of Year	118,878,817
	21 Total liabilities (Part X, line 26)		76,177,521		73,969,554
	22 Net assets or fund balances. Subtract line 21 from line 20		43,615,432		44,909,263

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: **Edward G Lloyd, Executive VP/CFO & Treasurer** Date: _____

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed Preparer's identifying number (see instructions): _____

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ EIN: _____ Phone no.: _____

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: **Saving Childrens Lives Around the World by (1) informing the American people of the needs of children in developing countries (2) creating an awareness of the diversity of human cultures, of the commonality of human needs and interests and other responsibility to share in the world's resources and benefits (3) soliciting and (Continued on Schedule O, Statement 3)**

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ **8,062,217** including grants of \$ **0**) (Revenue \$ **0**)
Children & Youth Services, General/Other: The USF has reached hundreds of thousands of supporters through issue oriented videos, television and public radio service announcements, a variety of publications and the internet via our website (www.unicefusa.org). The various USF communication teams work hard to educate the public about the challenges facing the worlds children which is the global mission of UNICEF. This year millions of children joined adult volunteers to support our trademark fundraiser Trick or Treat. Tens of thousands of companies and individuals were informed about UNICEF through the greeting cards program. Educators using TeachUNICEF resources to increase awareness of the programs and activities of UNICEF

4b (Code:) (Expenses \$ **192,162,051** including grants of \$ **192,162,051**) (Revenue \$ **0**)
Children & Youth Services: The board of directors of the US Fund for UNICEF (USF) has authorized grants to the United Nations Childrens Fund and other Non Government Organization assisted projects from contributions and in kind gifts received by the USF. These grants and transfers were used by UNICEF and other NGOs in more than 156 countries and territories solely for those assistance projects approved by the board of directors. UNICEF HIV/AIDS projects included preventing HIV infection in young people, mother to child transmission and protection, care and support for orphans and children in families made vulnerable by HIV/AIDS. UNICEF childhood immunization work included projects to prevent measles, polio, tuberculosis and maternal and neonatal tetanus in impoverished areas. UNICEF girls education projects included those designed to increase the number of girls in school in countries where girls lag behind boys in enrollment, training female teachers, improving girls safety, providing appropriate girls facilitiesand promoting curriculums and learning environments that are free of gender bias. UNICEF nutritional projects were implemented that focused on proper nourishment (Continued on Schedule O, Statement 4)

4c (Code:) (Expenses \$ **648,030** including grants of \$ **0**) (Revenue \$ **0**)
Children & Youth Services, General/Other: Through USF Office of Public Policy and Advocacy in Washington D. C., the USF acts as an advocate for the well being of the worlds children. One of the special functions of the Public Policy Office is to advise both the Administration and Congress on the needs of the worlds children. Through the advocacy efforts of USF, the U S Government allocated \$132.25 million to UNICEF in 2009. The U S Government funding is provided directly to UNICEF and is not reflected as revenue in Part I.

4d Other program services. (Describe in Schedule O.) **See Schedule O, Statement 5**
(Expenses \$ **116,500** including grants of \$ **116,500**) (Revenue \$ **0**)

4e **Total program service expenses** ▶ **200,988,798**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<input checked="" type="checkbox"/>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	<input checked="" type="checkbox"/>	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		<input checked="" type="checkbox"/>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<input checked="" type="checkbox"/>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<input checked="" type="checkbox"/>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		<input checked="" type="checkbox"/>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	<input checked="" type="checkbox"/>	
	<ul style="list-style-type: none"> • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> • Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> • Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i> 		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	<input checked="" type="checkbox"/>	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.</i>	<input checked="" type="checkbox"/>	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<input checked="" type="checkbox"/>
14a	Did the organization maintain an office, employees, or agents outside of the United States?		<input checked="" type="checkbox"/>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	<input checked="" type="checkbox"/>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i>	<input checked="" type="checkbox"/>	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		<input checked="" type="checkbox"/>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	<input checked="" type="checkbox"/>	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input checked="" type="checkbox"/>	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		<input checked="" type="checkbox"/>
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	✓	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		✓
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	✓	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>	✓	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		✓
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		✓
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		✓
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		✓
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		✓
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		✓
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		✓
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		✓
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	✓	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		✓
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		✓
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	✓	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	✓	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		✓
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		✓
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	45
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	<input checked="" type="checkbox"/>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	168
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)	2b	<input checked="" type="checkbox"/>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<input checked="" type="checkbox"/>
b	If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<input checked="" type="checkbox"/>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<input checked="" type="checkbox"/>
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	<input checked="" type="checkbox"/>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<input checked="" type="checkbox"/>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	<input checked="" type="checkbox"/>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<input checked="" type="checkbox"/>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<input checked="" type="checkbox"/>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	<input checked="" type="checkbox"/>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	<input checked="" type="checkbox"/>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<input checked="" type="checkbox"/>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a material diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Does the organization have members or stockholders?		<input checked="" type="checkbox"/>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		<input checked="" type="checkbox"/>
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	<input checked="" type="checkbox"/>	
8b	b Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
9a	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<input checked="" type="checkbox"/>

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	<input checked="" type="checkbox"/>	
10b	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	<input checked="" type="checkbox"/>	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		<input checked="" type="checkbox"/>
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	<input checked="" type="checkbox"/>	
13	Does the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Does the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
15b	b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	<input checked="" type="checkbox"/>	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<input checked="" type="checkbox"/>
16b	b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► [See Schedule O, Statement 6](#)
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► [Edward G Lloyd, \(212\)922-2557](#)
[125 Maiden Lane, New York, NY 10038](#)

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

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. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
Anthony Pantaleoni Chairman & Dir.	2	✓		✓				0	0	0
Peter Lamm Vice Chairman & Director	2	✓		✓				0	0	0
Gary M Cohen Director & Secretary	2	✓		✓				0	0	0
Caryl M Stern President, CEO & Director	50	✓		✓	✓	✓	407,601	0	65,290	
Tea Leoni Director	2	✓					0	0	0	
Kathi P Seifert Director	2	✓					0	0	0	
Henry Schleiff Director	2	✓					0	0	0	
Bruce Gordon Director	2	✓					0	0	0	
Pamela Fiori Director	2	✓					0	0	0	
Amy L Robbins Director	2	✓					0	0	0	
Sherrie Rollins Westin Director	2	✓					0	0	0	
Nelson Chai Director	2	✓					0	0	0	
Dolores Rice Gahan DO Director	2	✓					0	0	0	
Susan Berresford Director	2	✓					0	0	0	
Dan Brutto Director	2	✓					0	0	0	
Vince Hemmer Director	2	✓					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	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
Robert Manoukian Director	2	<input checked="" type="checkbox"/>						0	0	0
Mary Callahan Erdoes Director	2	<input checked="" type="checkbox"/>						0	0	0
James A Block Director	2	<input checked="" type="checkbox"/>						0	0	0
Andrew Beer Director	2	<input checked="" type="checkbox"/>						0	0	0
Jim Walton Director	2	<input checked="" type="checkbox"/>						0	0	0
Edward G Lloyd EVP & Treasurer	50			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		348,969	0	58,481
Richard Esserman Asst. Treasurer, VP of Finance & Budget	45			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		181,649	0	41,102
Lynn Stratford Asst. Secretary, Chief of Staff	45			<input checked="" type="checkbox"/>				162,308	0	26,596
Cynthia McCaffrey Senior VP	45				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		281,750	0	46,358
Robert Thompson Senior Vice President	45				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		318,536	0	25,304
Jay Aldous Senior Vice President	45				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	241,049	0	47,551
Roslyn Carnage Vice President	45					<input checked="" type="checkbox"/>		177,637	0	40,769
Continued On Schedule J2										
1b Total								2,857,595	0	482,088

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ **26**

	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>	<input checked="" type="checkbox"/>	
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>	<input checked="" type="checkbox"/>	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		<input checked="" type="checkbox"/>

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.

(A) Name and business address	(B) Description of services	(C) Compensation
STUDIOCOM, P O BOX 933505, Atlanta, GA 31191-3505	Internet Marketing Consul	1,875,471
Public Interest Data Inc, 1800 Diagonal Road, Suite 400, Alexandria, VA 223	Database Mngement & Pi	711,330
Paradyze Matera, 5 Hanover Square, 6th Floor, New York, NY 10004	List Management & Rental	619,508
Convio, 11400 Burnet Road, Austin, TX 78758	Web Design, Processing, I	367,068
Target Marketeam Inc, 1050 Crown Point Parkway Suite 400, Atlanta, GA 30	Fundraising Consultant	471,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ **11**

Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a	1,200,466				
	b Membership dues	1b	0				
	c Fundraising events	1c	4,183,197				
	d Related organizations	1d	0				
	e Government grants (contributions).	1e	0				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	234,155,896				
	g Noncash contributions included in lines 1a-1f: \$		80,655,391				
	h Total. Add lines 1a-1f ▶		239,539,559				
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶			0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		1,404,597	0	0	1,404,597	
	4 Income from investment of tax-exempt bond proceeds ▶		0	0	0	0	
	5 Royalties ▶		1,528,942	0	0	1,528,942	
	6a Gross Rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)		0	0		
		d Net rental income or (loss) ▶					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)		0	0		
		d Net gain or (loss) ▶					
	8a Gross income from fundraising events (not including \$ 4,183,197 of contributions reported on line 1c). See Part IV, line 18	a		1,344,902			
		b Less: direct expenses	b	1,344,902			
		c Net income or (loss) from fundraising events ▶		0	0	0	0
	9a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses.		b					
c Net income or (loss) from gaming activities ▶							
10a Gross sales of inventory, less returns and allowances	a		1,960,400				
	b Less: cost of goods sold	b	783,400				
	c Net income or (loss) from sales of inventory ▶		1,177,000	0	0	1,177,000	
Miscellaneous Revenue		Business Code					
11a							
	b						
	c						
	d All other revenue			0	0	0	
	e Total. Add lines 11a-11d ▶			0			
12 Total revenue. See instructions. ▶			243,650,098	0	0	4,110,539	

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) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,032,152	1,032,152		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	191,129,899	191,129,899		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,100,527	202,384	423,462	474,681
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	13,033,777	2,396,879	5,015,154	5,621,744
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,134,317	208,598	436,464	489,255
9 Other employee benefits	2,218,217	407,925	853,528	956,764
10 Payroll taxes	1,031,609	189,710	396,944	444,955
11 Fees for services (non-employees):				
a Management				
b Legal	195,894	32,105	71,872	91,917
c Accounting	183,500		183,500	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	932,504			932,504
f Investment management fees				
g Other	5,298,897	2,708,091	791,276	1,799,530
12 Advertising and promotion				
13 Office expenses	501,706	121,121	256,219	124,366
14 Information technology	238,130		238,130	
15 Royalties				
16 Occupancy	2,785,664	608,642	1,202,120	974,902
17 Travel	1,360,171	277,197	379,326	703,648
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	240,030	48,917	66,940	124,173
20 Interest				
21 Payments to affiliates	116,500	116,500		
22 Depreciation, depletion, and amortization	1,681,860	197,955	443,675	1,040,230
23 Insurance	224,575	47,722	112,130	64,723
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Equipment, repairs and supplies	786,327	138,730	402,302	245,295
b Mailing list rental	610,289	0	0	610,289
c Postage and Shipping for Fundraising	6,278,074	0	0	6,278,074
d Outside Printing and Telemarketing	8,567,404	1,059,022	470,382	7,038,000
e				
f All other expenses	1,997,373	65,249	1,266,154	665,970
25 Total functional expenses. Add lines 1 through 24f	242,679,396	200,988,798	13,009,578	28,681,020
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,226,526	1	3,843,717
	2 Savings and temporary cash investments	21,259,182	2	21,843,353
	3 Pledges and grants receivable, net	30,241,525	3	24,141,352
	4 Accounts receivable, net	0	4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L			6
	7 Notes and loans receivable, net	0	7	
	8 Inventories for sale or use	0	8	
	9 Prepaid expenses and deferred charges	946,594	9	828,756
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	47,404,708		
	b Less: accumulated depreciation	6,556,255		
	11 Investments—publicly traded securities	22,126,245	10c	40,848,453
	12 Investments—other securities. See Part IV, line 11	700,258	11	24,503,020
	13 Investments—program-related. See Part IV, line 11		12	1,778,336
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	1,129,479	14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	119,792,953	15	1,091,830	
		16	118,878,817	
Liabilities	17 Accounts payable and accrued expenses	3,656,591	17	6,425,993
	18 Grants payable	25,330,962	18	20,897,595
	19 Deferred revenue	0	19	
	20 Tax-exempt bond liabilities	43,510,000	20	42,885,000
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			
			22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	3,679,968	25	3,760,966
26 Total liabilities. Add lines 17 through 25	76,177,521	26	73,969,554	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	11,828,084	27	16,669,453
	28 Temporarily restricted net assets	30,249,019	28	26,685,481
	29 Permanently restricted net assets	1,538,329	29	1,554,329
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	43,615,432	33	44,909,263
34 Total liabilities and net assets/fund balances	119,792,953	34	118,878,817	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

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.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

- Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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	No
2a		✓
2b	✓	
2c	✓	
3a		✓
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization UNITED STATES FUND FOR UNICEF	Employer identification number 13 1760110
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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 11, 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.)
- 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 organization that normally receives: (1) more than 33⅓% 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 33⅓% 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
 - e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 - h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	356,838,256	218,309,035	219,824,737	236,845,429	239,539,559	1,271,357,016
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	356,838,256	218,309,035	219,824,737	236,845,429	239,539,559	1,271,357,016
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)						680,257,615
6 Public support. Subtract line 5 from line 4.						591,099,401

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	356,838,256	218,309,035	219,824,737	236,845,429	239,539,559	1,271,357,016
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,783,507	2,975,820	3,440,222	-11,760,225	1,404,597	-2,156,079
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 IV.)	11,307,209	6,756,963	8,545,268	614,036	2,705,942	29,929,418
11 Total support. Add lines 7 through 10						1,299,130,355
12 Gross receipts from related activities, etc. (see instructions)					12	0
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	45.5 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	51 %
16a 33⅓% support test—2009. If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33⅓% support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
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 ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for 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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

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

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

Political Campaign and Lobbying Activities

2009

Open to Public Inspection

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

▶ Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

- If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
 - Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
 - Section 527 organizations: Complete Part I-A only.

- If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
 - Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization UNITED STATES FUND FOR UNICEF	Employer identification number 13 1760110
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group.

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	293,126													
c	Total lobbying expenditures (add lines 1a and 1b)	293,126													
d	Other exempt purpose expenditures	242,386,270													
e	Total exempt purpose expenditures (add lines 1c and 1d)	242,679,396													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
c Total lobbying expenditures	280,365	292,019	288,673	293,126	1,154,183
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	280,365	292,019	288,673	0	861,057

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

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**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
UNITED STATES FUND FOR UNICEF

Employer identification number
13 : 1760110

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

	Held at the End of the Tax Year
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 8/17/06	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, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, 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 XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$
- (ii) Assets included in Form 990, Part X ▶ \$
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
 a Revenues included in Form 990, Part VIII, line 1 ▶ \$
- 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 XIV.
- 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" to 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 XIV and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b** If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	1,538,329	1,440,829			
b Contributions	16,000	97,500			
c Net investment earnings, gains, and losses	0	0			
d Grants or scholarships	0	0			
e Other expenditures for facilities and programs	0	0			
f Administrative expenses	0	0			
g End of year balance	1,554,329	1,538,329			

2 Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment ▶ 0 %
- b** Permanent endowment ▶ 100 %
- c** Term endowment ▶ 0 %

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" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	41,506,422	2,655,118	38,851,304
c Leasehold improvements	0	307,126	250,775	56,351
d Equipment	0	2,157,878	1,684,517	473,361
e Other	0	3,433,282	1,965,845	1,467,437
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				40,848,453

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other Alternative Investments	1,778,336	End-of-Year Market Value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	1,778,336	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Deferred bond acquisition costs	1,091,830
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	1,091,830

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
Federal income taxes	0	
Liabilities under split-interest agreements	3,654,925	
Due to affiliate	106,041	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	3,760,966	

2. FIN 48 Footnote. In Part XIV, 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.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	243,650,098
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	242,679,396
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	970,702
4	Net unrealized gains (losses) on investments	4	612,673
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	-289,544
9	Total adjustments (net). Add lines 4 through 8	9	323,129
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	1,293,831

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	243,973,227
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	612,673
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV.)	2d	-289,544
e	Add lines 2a through 2d	2e	323,129
3	Subtract line 2e from line 1	3	243,650,098
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	0
b	Other (Describe in Part XIV.)	4b	0
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	243,650,098

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	242,679,396
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV.)	2d	0
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	242,679,396
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	0
b	Other (Describe in Part XIV.)	4b	0
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	242,679,396

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part V, Line 4 - The principal amount is permanently restricted but the investment income can be used by the organization to advance its exempt purpose.

Schedule D, Part X - In 2010, USF adopted the guidance of Accounting Standards Codification (ASC) 740-10, Accounting for Uncertainty in Income Taxes, which addresses the accounting for uncertainties in income taxes recognized in an enterprise's financial statements. USF utilizes a threshold of more likely than not recognition and derecognition of tax positions taken or expected to be taken in a tax return. The adoption of ASC 740-10 did not have a material effect on the changes of net assets or financial position of USF.

Schedule D, Part XI, Line 8 - Change in Value related to Split Interest Agreements (CGA, PIFS & CRUTS)

Statement of Activities Outside the United States

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

2009

**Open to Public
Inspection**

Name of the organization
UNITED STATES FUND FOR UNICEF

Employer identification number
13 : 1760110

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

1 For grantmakers. 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 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sch F, Stmt 1					
Totals ▶	0	0			191,129,899

Accounts and Activities Outside the United States

		Offices	Employees	Total
Region	Central America and the Caribbean	0	0	79,588,059
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
Region	East Asia and the Pacific	0	0	3,850,968
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
Region	Europe (including Iceland and Greenland)	0	0	314,923
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
Region	Middle East and North Africa	0	0	913,118
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
Region	Russia and the newly independent States	0	0	989,283
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
Region	South America	0	0	3,212,510
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
Region	South Asia	0	0	1,075,137
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
Region	Sub-Saharan Africa	0	0	101,185,901
Activities	Grantmaking			
Services	Grant making to support UNICEF and other NGO sponsored programs.			
	Total:	0	0	191,129,899

Grants To Organization Outside US

		Cash Grant	Non-Cash Assistance
Region	Central America and the Caribbean	79,101,018	487,041
Grant	For Emergencies and education programs		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance	Grant included emergency kits including clothing, blankets and toiletries and other miscellaneous supplies.		
Valuation	FMV		
Region	East Asia and the Pacific	3,850,968	0
Grant	For Emergencies, Education, Child Survival & HIV programs		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance			
Valuation			
Region	Europe (including Iceland and Greenland)	314,923	0
Grant	Research relating to evidence-based decision making in designing maternal, neonatal and child health interventions and strengthening the evidence base for maternal/child health.		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance			
Valuation			
Region	Middle East and North Africa	913,118	0
Grant	For Child Survival programs, education & emergencies.		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance			
Valuation			
Region	Russia and the newly independent States	989,282	0
Grant	For Child Survival, Child Protection and Emergencies		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance			
Valuation			
Region	South America	3,212,510	0
Grant	For Child Survival programs, education, emergencies and HIV programs.		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance			
Valuation			
Region	South Asia	1,075,137	0
Grant	For Child Survival Programs, education, emergencies and HIV programs		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance			
Valuation			
Region	Sub-Saharan Africa	21,036,551	80,149,350
Grant	For Child Survival programs, education, emergencies and HIV programs.		
Cash Disbursement	Wire Transfer		
Non-Cash Assistance	Grants of Mectizan-Pharmaceutical medicine for the treatment of Onchocerciasis. A grant of Solar Charges to UNICEF Uganga for use in the emergency.		
Valuation	FMV		

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 SNOWFLAKE GAL (event type)	(b) Event #2 UNICEF BALL (event type)	(c) Other events 5 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,421,028	1,594,225	2,512,846	5,528,099
	2 Less: Charitable contributions	731,778	1,300,475	2,150,944	4,183,197
	3 Gross income (line 1 minus line 2)	689,250	293,750	361,902	1,344,902
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	0	0	0	0
	7 Food and beverages	173,804	264,355	150,526	588,685
	8 Entertainment	0	0	0	0
	9 Other direct expenses	222,388	295,140	238,689	756,217
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(1,344,902)
11 Net income summary. Combine line 3, column (d), and line 10 ▶				0	

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	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. Combine line 1, column d, and line 7 ▶					

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities: _____		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," explain: _____ _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," explain: _____ _____		
11	Does the organization operate gaming activities with nonmembers?	11	
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?	12	

			Yes	No
13	Indicate the percentage of gaming activity operated 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?	15a		
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 ▶			
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> 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?	17a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Amount of cash grant	Amount of non-cash assistance
Name and address	Tulane University Office of Research Administration 1430 Tulane Avenue New Orleans, LA 70112	50,000	
EIN	72-0423889		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Research relating to evidence based decision making in designing maternal, neonatal and child health interventions and strengthening the evidence base for maternal/child health.		
Name and address	University of North Carolina Chapel Hill Office of Sponsored Research 104 Airport Drive Suite 2200 Chapel Hill, NC 27599-1350	155,132	0
EIN	56-6001393		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Research relating to evidence-based decision making in designing maternal, neonatal and child health interventions, and strengthening the evidence base for maternal/child health.		
Name and address	Harvard University Harvard School of Public Health Office of Financial Services 677 Huntington Avenue 10th Floor Boston, MA 02115	45,283	0
EIN	04-3066727		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Research study to develop and deploy new and improved evidence on the causes and determinants of maternal, neonatal and child morbidity and mortality, on intervention coverage, and on the effectiveness of interventions to inform and influence global priorities and programs.		
Name and address	Futures Institute 41-A New London Turnpike Glastonbury, CT 06033	262,737	0
EIN	20-4816286		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Software development relating to evidence-based decision making in designing maternal, neonatal and child health interventions.		

Name and address	John Hopkins University 615 N Wolfe Street W1100 Baltimore, MD 21205-2178	174,000	
EIN	52-0595110		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Research relating to evidence-based decision making in designing maternal, neonatal and child health interventions, and strengthening the evidence base for maternal/child health.		
Name and address	Social Development Center for Community Affairs 625 Atlantic Avenue 3rd Floor Box 5 Brooklyn, NY 11217	25,000	0
EIN	20-1386726		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	The grant is provided in support of and exclusively used for the purchase of basic medical supplies, food and water and these are made available on a daily basis for children affected by the earthquake in Haiti as part of the immediate relief phase in a camp set up by SDCCA for these small victims.		
Name and address	TASK FORCE FOR GLOBAL HEALTH (INTERNATIONAL TRACHOMA INITIATIVE) 441 Lexington Avenue Suite 1101 New York, NY 10017	300,000	0
EIN	13-4084161		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant			
Name and address	AIRLINE AMBASSADOR INTERNATIONAL 418 California Avenue P O Box 459 Moss Beach, CA 94038	15,000	0
EIN	75-2679444		
IRC code section	501 (C) (3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant			

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization UNITED STATES FUND FOR UNICEF	Employer identification number 13 1760110
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Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in 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 indemnification 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	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input checked="" 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 in 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?	4a	✓
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	✓
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.	4c	✓
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	✓
b Any related organization? If "Yes" to line 5a or 5b, describe in Part III.	5b	✓
6 For persons listed in 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?	6a	✓
b Any related organization? If "Yes" to line 6a or 6b, describe in Part III.	6b	✓
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	✓
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	✓
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Caryl M Stern	(i)	335,601	72,000	0	36,861	28,429	472,891	0
	(ii)	0	0	0	0	0	0	0
Edward G Lloyd	(i)	300,000	45,000	3,969	32,308	26,173	407,450	0
	(ii)	0	0	0	0	0	0	0
Robert Manoukian	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Nelson Chai	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Jim Walton	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Gary M Cohen	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Mary Callahan Erdoes	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Peter Lamm	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Tea Leoni	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Kathi P Seifert	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Henry Schleiff	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Bruce Gordon	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Pamela Fiori	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Amy L Robbins	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Sherrie Rollins Westin	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0
Anthony Pantaleoni	(i)	0	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0	0

**SCHEDULE J-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule J (Form 990)

▶ Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.

▶ See Instructions for Schedule J (Form 990).

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

UNITED STATES FUND FOR UNICEF

Employer identification number

13 1760110

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (Schedule J, Part II)

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Dolores Rice Gahan DO	(i)	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0
Dan Brutto	(i)	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0
Vince Hemmer	(i)	0	0	0	0	0	0
	(ii)	0	0	0	0	0	0
Richard Esserman	(i)	180,450	1,199	0	19,744	21,358	222,751
	(ii)	0	0	0	0	0	0
Lynn Stratford	(i)	162,308	0	0	16,231	10,365	188,904
	(ii)	0	0	0	0	0	0
Jay Aldous	(i)	240,000	1,049	0	26,193	21,358	288,600
	(ii)	0	0	0	0	0	0
Cynthia McCaffrey	(i)	245,000	36,750	0	25,000	21,358	328,108
	(ii)	0	0	0	0	0	0
Roslyn Carnage	(i)	176,468	1,169	0	19,411	21,358	218,406
	(ii)	0	0	0	0	0	0
Martin Rendon	(i)	220,873	1,060	0	22,275	21,358	265,566
	(ii)	0	0	0	0	0	0
Robert Thompson	(i)	250,000	68,536	0	3,846	21,358	343,740
	(ii)	0	0	0	0	0	0
Susan Kotcher	(i)	222,812	0	0	3,215	21,358	247,385
	(ii)	0	0	0	0	0	0
Lisa Szarkowski	(i)	147,653	0	0	14,641	10,530	172,824
	(ii)	0	0	0	0	0	0
Helene Vallone-Rafaele	(i)	145,698	0	0	15,902	21,358	182,958
	(ii)	0	0	0	0	0	0
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

▶ Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

UNITED STATES FUND FOR UNICEF

Employer identification number

13 1760110

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
							Yes	No	Yes	No
A	New York City Development Agency	13-5160382		06/01/2007	7,910,000	Acquire and equip the NY office space		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
B	New York Industrial Development Agency	13-5160382		06/01/2007	35,600,000	Acquire and equip the NY office space		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
C										
D										
E										

Part II Proceeds

	A		B		C		D		E	
1 Total proceeds of issue	7,910,000		35,600,000							
2 Gross proceeds in reserve funds	0		0							
3 Proceeds in refunding or defeasance escrows	0		0							
4 Other unspent proceeds	0		0							
5 Issuance costs from proceeds	0		0							
6 Working capital expenditures from proceeds	0		0							
7 Capital expenditures from proceeds	0		35,600,000							
8 Year of substantial completion	2007		2007							
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9 Were the bonds issued as part of a current refunding issue?		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>						
10 Were the bonds issued as part of an advance refunding issue?		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>						
11 Has the final allocation of proceeds been made?	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>							
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>						

Part III Private Business Use

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>						
2 Are there any lease arrangements with respect to the financed property which may result in private business use?		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>						

Part III Private Business Use (Continued)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts with respect to the financed property which may result in private business use?		✓		✓						
b Are there any research agreements with respect to the financed property which may result in private business use?		✓		✓						
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	✓		✓							
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0 %		0 %		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . ▶		0 %		0 %		%		%		%
6 Total of lines 4 and 5		0 %		0 %		%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	✓		✓							

Part IV Arbitrage

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		✓		✓						
2 Is the bond issue a variable rate issue?		✓		✓						
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		✓		✓						
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?		✓		✓						
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5 Were any gross proceeds invested beyond an available temporary period?		✓		✓						
6 Did the bond issue qualify for an exception to rebate?		✓		✓						

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

**Open To Public
Inspection**

Name of the organization UNITED STATES FUND FOR UNICEF	Employer identification number 13 : 1760110
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Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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				
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				
20 Drugs and medical supplies	✓	5	80,073,750	FMV
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Sch M, Stmt 1)				
26 Other ▶ (.)				
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	9
---	----	---

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

Description of Other Types of Property

		lines on Part I	Contributions	Revenues
Description	Toothpaste, toothbrushes & soap	Yes	1	218,296
Method of determining revenues	FMV			
Description	Desktop Computers	Yes	1	19,000
Method of determining revenues	FMV			
Description	Solar Chargers	Yes	1	75,600
Method of determining revenues	FMV			
Description	Soap Bars	Yes	1	11,745
Method of determining revenues	FMV			
Description	Blankets	Yes	1	7,000
Method of determining revenues	FMV			
Description	Shipping of Emergency Supplies to Haiti	Yes	1	250,000
Method of determining revenues	FMV			

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

UNITED STATES FUND FOR UNICEF

Employer identification number

13 1760110

Form 990, Part VI, Section A, Line 2 - Anthony Pantaleoni Chairman of the Board and Tea Leoni Director: Father and Daughter

Form 990, Part VI, Section B, Line 11 - After the return is prepared by the staff, it is reviewed by the Controller, VP of Finance and Budget & CFO. Additionally, a copy of the return is sent to the organization's legal counsel for review. The CFO reviews the return with the audit committee prior to filing. After the review process, the return is filed electronically with the CFO signing the return.

Form 990, Part VI, Section B, Line 12c - Every Staff member is required annually to sign a form that ensures everyone is aware of and in compliance with the Conflict of Interest Policy. Human Resources collects this information. In addition, every Board member and principal officer annually completes a Conflict of Interest Disclosure Statement disclosing the facts relating to any actual or potential financial interest or stating that he or she has no reportable financial interest that would constitute a conflict or potential conflict of interest, and acknowledging that they reviewed, understand and agree to comply with the Conflict of Interest Policy. The organization has an extensive Conflict of Interest Policy that essentially requires any Board member or principal officer with a conflict or potential conflict of interest to disclose the existence and all material facts regarding any interest in a transaction or matter being considered by the Board or a Board Committee and to leave the meeting in which the transaction or matter is discussed and voted upon.

Form 990, Part VI, Section B, Line 15 - 15 (A) Every time a new contract with the President and CEO is done, a comparability study is conducted by an independent employee benefits and compensation company. The Compensation Committee, which is comprised of at least 3 independent members of the Executive Committee of the Board of Directors, reviews the comparability study and the performance of the CEO (or in the case of a new CEO, the individuals qualifications and experience) in determining the nature and total compensation to be included in the President's written contract. In addition, the Compensation committee conducts the annual review of the President and CEO and considers the amount, if any, of the annual bonus to be awarded. The Compensation Committee reviews its findings and recommendations with the independent members of the Executive Committee, which votes on the terms of any new contract and the amount, if any, of the annual bonus. The deliberations and decisions of the Compensation Committee are contemporaneously documented. 15 (B) Additionally, the salary of the key employees are presented by the President to the Compensation committee. The independent members of the compensation committee review the compensation of the key employees and make recommendation to the Executive committee for approval. Only the independent members of the Executive committee can vote on the action related to the compensation of the the key employees.

Form 990, Part VI, Section C, Line 19 - The governing documents, Conflict of Interest Policy and the financial statements are available to the public upon request.

Schedule R, Part V, Line 1b - Grant to other Organization

Reasonable Cause Explanations

Explanation

Approved Extension on File

Activity Or Mission Description

Description

responsibility to share in the world's resources and benefits (3) soliciting and receiving funds and other property for the purposes stated herein and (4) participating in coordinating planning with voluntary agencies engaged in child relief;

Mission Description

Description

receiving funds and other property for the purposes stated herein and (4) participating in coordinating planning with voluntary agencies engaged in child relief;

Second Program Service Accomplishments Description

Description

for both children and mothers that included providing Vitamin A supplements to strengthen immune systems and preventing iodine deficiency which can cause brain damage and physical retardation. UNICEF and USF also assisted a number of areas affected by emergency situations by providing clean water, medical supplies, basic health services, educational and recreational supplies.

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Grant to Affiliate	116,500	116,500	0
Total:		116,500	116,500	0

States Where Copy Of Return Is Filed

States

AK

AL

AR

AZ

CA

CO

CT

DC

FL

GA

HI

IL

IN

KS

KY

LA

MA

MD

ME

MI

MN

MO

MS

MT

NC

ND

NE

NH

NJ

NM

NV

NY

OH

OK

OR

PA

RI

SC

SD

TN

TX

UT

VA

WA

WI

WV

Fundraiser Activity Information

Name	Activity	C1	Gross Receipts	Amount Or Retained By Contractor	Net To Organization
The Share Group Inc	Telemarketing	No	999,573	827,504	172,069
Infocision Management Corporation	Telemarketing	No	791,936	105,000	686,936
Total:			1,791,509	932,504	859,005

C1 = Fundraiser control of funds?

Description of Identification of Related Tax-Exempt Organizations

Name and EIN	UNITED STATES FOR UNICEF IN KIND ASSISTANCE CORPORATION (20-3287404)
Address	125 Maiden Lane 10th Floor New York, NY 10038
Primary activities	Providing Medicines to Save Children's Lives
State or foreign country	NY
Exempt code section	501 (c) (3)
Public charity status	509 (a) (3) type 1
Direct controlling entity	N/A

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
- ▶ Attach to Form 990.
- ▶ See separate instructions.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

UNITED STATES FUND FOR UNICEF

Employer identification number

13 1760110

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
See Schedule O, Statement 8					

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		<input checked="" type="checkbox"/>
b Gift, grant, or capital contribution to other organization(s)	<input checked="" type="checkbox"/>	
c Gift, grant, or capital contribution from other organization(s)		<input checked="" type="checkbox"/>
d Loans or loan guarantees to or for other organization(s)		<input checked="" type="checkbox"/>
e Loans or loan guarantees by other organization(s)		<input checked="" type="checkbox"/>
f Sale of assets to other organization(s)		<input checked="" type="checkbox"/>
g Purchase of assets from other organization(s)		<input checked="" type="checkbox"/>
h Exchange of assets		<input checked="" type="checkbox"/>
i Lease of facilities, equipment, or other assets to other organization(s)		<input checked="" type="checkbox"/>
j Lease of facilities, equipment, or other assets from other organization(s)		<input checked="" type="checkbox"/>
k Performance of services or membership or fundraising solicitations for other organization(s)		<input checked="" type="checkbox"/>
l Performance of services or membership or fundraising solicitations by other organization(s)		<input checked="" type="checkbox"/>
m Sharing of facilities, equipment, mailing lists, or other assets		<input checked="" type="checkbox"/>
n Sharing of paid employees		<input checked="" type="checkbox"/>
o Reimbursement paid to other organization for expenses		<input checked="" type="checkbox"/>
p Reimbursement paid by other organization for expenses	<input checked="" type="checkbox"/>	
q Other transfer of cash or property to other organization(s)		<input checked="" type="checkbox"/>
r Other transfer of cash or property from other organization(s)		<input checked="" type="checkbox"/>

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(1)	UNITED STATES FOR UNICEF IN KIND ASSISTANCE CORPORATION	b	116,500
(2)	UNITED STATES FOR UNICEF IN KIND ASSISTANCE CORPORATION	p	116,500
(3)			
(4)			
(5)			
(6)			

