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EXTENDED TO NOVEMBER 15, 2019

Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2018Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

A For the 2018 calendar year, or tax year beginning and ending

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

C Name of organization
ALLIANCE FOR A GREEN REVOLUTION IN AFRICA

D Employer identification number
98-0513530

E Telephone number
254-367-5000

G Gross receipts \$ **105,351,179.**

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ **WWW.AGRA.ORG**

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation **2006** **M** State of legal domicile **WA**

Part I Summary

1 Briefly describe the organization's mission or most significant activities **AGRA'S MISSION IS TO TRIGGER A UNIQUELY AFRICAN GREEN REVOLUTION THAT WILL TRANSFORM AGRICULTURE**

2 Check this box ☐ 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** **16**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** **15**

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) **5** **202**

6 Total number of volunteers (estimate if necessary) **6** **0**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** **0.**

7b Net unrelated business taxable income from Form 990-T, line 38 **7b** **0.**

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	89,020,653.	94,857,701.
9 Program service revenue (Part VIII, line 2g)	0.	0.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	493,472.	896,094.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	164,797.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	89,514,125.	95,918,592.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	45,677,993.	48,457,455.
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)	18,920,869.	22,670,292.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17 Other expenses (Part IX, column (A), lines 11a, 11b, 11c, 11d, 11f, 11g, 11h, 11i, 11j, 11k, 11l, 11m, 11n, 11o, 11p, 11q, 11r, 11s, 11t, 11u, 11v, 11w, 11x, 11y, 11z)	26,555,703.	23,942,544.
18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	91,154,565.	95,070,291.
19 Revenue less expenses - Subtract line 18 from line 12	-1,640,440.	848,301.
20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	66,138,714.	77,404,312.
22 Net assets or fund balances - Subtract line 21 from line 20	17,071,310.	23,502,890.
	49,067,404.	53,901,422.

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 *Lilian Nyanga'ya* **8 NOVEMBER 2019**
Date

▶ **LILIAN NYANGA'YA, CHIEF FINANCE OFFICER**
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name **LORI ROTHE YOKOBOSKY, CPA** Preparer's signature **LORI ROTHE YOKOBOSKY** Date **11/07/19** Check if self-employed ☐ PTIN **P01273422**

Firm's name ▶ **COHNREZNICK LLP** Firm's EIN ▶ **22-1478099**

Firm's address ▶ **4 BECKER FARM ROAD** Phone no. **973-228-3500**
ROSELAND, NJ 07068

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

832001 12-31-18

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

Form **990** (2018)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

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SCANNED DEC 17 2019

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IN AFRICA**

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Part III Statement of Program Service Accomplishments

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

☒ **X**

1	Briefly describe the organization's mission AGRA'S MISSION IS TO TRIGGER A UNIQUELY AFRICAN GREEN REVOLUTION THAT WILL TRANSFORM AFRICAN AGRICULTURE INTO A HIGHLY PRODUCTIVE, EFFICIENT, COMPETITIVE AND SUSTAINABLE SYSTEM THAT ASSURES FOOD SECURITY AND LIFTS MILLIONS OUT OF POVERTY.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code _____) (Expenses \$ <u>37,762,510.</u> including grants of \$ <u>28,162,048.</u>) (Revenue \$ <u>164,797.</u>) PIATA-PARTNERSHIP FOR INCLUSIVE AGRICULTURAL TRANSFORMATION IN AFRICA (PIATA) THE PURPOSE IS TO ENABLE AFRICAN AGRICULTURE ACTORS TO DO BUSINESS DIFFERENTLY AS THEY SUPPORT LEADERS TO DRIVE AN INCLUSIVE AGRICULTURAL TRANSFORMATION. THE INNOVATIVE PARTNERSHIP AIMS FOR INTEGRATED DELIVERY WITHIN AGRO-ECONOMIC ZONES AND ACROSS VALUE CHAIN ENHANCED IN-COUNTRY COORDINATION TO LEVERAGE WIDER INVESTMENTS AND DELIBERATE ENGAGEMENT WITH PRIVATE SECTOR TO BUILD, SUSTAINABLE SYSTEMS THAT WILL TRANSITION AGRICULTURE FROM SUBSISTENCE INTO A BUSINESS THAT WORKS. THE PROGRAM HAS FOUR KEY COMPONENTS;1) INCREASED STAPLE CROP PRODUCTIVITY2) STRENGTHENED AND EXPANDED ACCESS TO NATIONAL AND REGIONAL MARKETS3) INCREASED CAPACITY OF SMALL HOLDER FARMING HOUSEHOLDS AND AGRICULTURAL SYSTEMS TO BETTER PREPARE FOR AND ADAPT TO
4b	(Code _____) (Expenses \$ <u>8,193,496.</u> including grants of \$ <u>8,193,496.</u>) (Revenue \$ _____) AFRICAN ENTERPRISE CHALLENGE FUND- AECF PROJECTS IN AFRICA. AECF SUPPORTS BUSINESSES WORKING IN AGRIBUSINESS, RURAL FINANCIAL SERVICES, RENEWABLE ENERGY AND TECHNOLOGIES THE AECF IS ESSENTIALLY ABOUT STIMULATING PRO-POOR GROWTH IN THE FOLLOWING WAYS;-INCREASING THE PACE OF ECONOMIC GROWTH BY STIMULATING PRIVATE SECTOR INVESTMENT IN AGRIBUSINESS, FINANCIAL SERVICES, RENEWABLE ENERGY; IMPROVING THE PATTERN OF GROWTH BY ENABLING THE RURAL POOR TO PARTICIPATE IN GROWTH AS AGENTS AND BENEFICIARIES, ENSURING THAT THE CROSS-CUTTING DIMENSIONS OF POVERTY AND ENVIRONMENT ARE TACKLED IN MUTUALLY REINFORCING WAYS EMPOWERING THE POOR BY IMPROVING THEIR VOICE AND ROLE IN THE ECONOMY AS WELL AS THEIR INCOME.
4c	(Code _____) (Expenses \$ <u>1,485,559.</u> including grants of \$ _____) (Revenue \$ _____) AGRF-AFRICA GREEN REVOLUTION FORUM. AGRF IS AN ALLIANCE OF PARTNERS THAT CARE ABOUT, COMMIT TO AND DRIVE INCLUSIVE AGRICULTURAL TRANSFORMATION IN AFRICA. THE MISSION IS TO SECURE AFRICA'S RISE THROUGH AN AGRICULTURAL TRANSFORMATION
4d	Other program services (Describe in Schedule O) (Expenses \$ <u>38,483,528.</u> including grants of \$ <u>12,101,911.</u>) (Revenue \$ _____)
4e	Total program service expenses 85,925,093.

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SEE SCHEDULE O FOR CONTINUATION(S)

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Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A
- 2 Is the organization required to complete *Schedule B, Schedule of Contributors*?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*
- 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*
- 8 Did the organization maintain collections of works of art, historic treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*
- 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?
If "Yes," complete Schedule D, Part IV
- 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*
 - b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*
 - c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*
 - d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*
 - e Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*
 - f 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 (ASC 740)? *If "Yes," complete Schedule D, Part X*
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*
- b Was the organization included in consolidated, independent audited financial statements for the tax year?
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
- b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*
- 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? *If "Yes," complete Schedule G, Part I*
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*
- 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*
- 20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*
- b *If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?*
- 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*

	Yes	No
1	X	
2	X	
3		X
4		X
5		X
6		X
7		X
8		X
9		X
10	X	
11a	X	
11b		X
11c		X
11d		X
11e		X
11f	X	
12a		X
12b	X	
13		X
14a	X	
14b	X	
15	X	
16		X
17		X
18		X
19		X
20a		X
20b		
21		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	X	
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

X

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

	Yes	No
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	202	
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> (see instructions)	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
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)?	X	
b If "Yes," enter the name of the foreign country ► SEE SCHEDULE O See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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 as charitable contributions?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
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?		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		X

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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.

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	16	
b Enter the number of voting members included in line 1a, above, who are independent	15	
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?	2	X
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?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9	X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	X
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?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records **LILIAN NYANGA'YA, CHIEF FINANCE OFFICER - 212-297-0400**
P.O. BOX 66773, NAIROBI KENYA 00800

**ALLIANCE FOR A GREEN REVOLUTION
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

☒ X

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(1) CRISTINA DUARTE DIRECTOR	4.00	X						4,000.	0.	0.
(2) DR AGNES KALIBATA PRESIDENT-AGRA	40.00	X		X				154,811.	0.	155,596.
(3) DR. USHA ZEHR	4.00	X						4,000.	0.	0.
(4) FRANK BRAEKEN DIRECTOR	4.00	X						4,000.	0.	0.
(5) FRED SWANIKER DIRECTOR	4.00	X						4,000.	0.	0.
(6) H.E HAILEMARIAM DESSALEGN DIRECTOR	4.00	X						4,000.	0.	0.
(7) H.E JAKAYA KIKWETE DIRECTOR	4.00	X						2,000.	0.	0.
(8) HIXONIA NYASULU DIRECTOR	4.00	X						2,000.	0.	0.
(9) JOACHIM VON BRAUM DIRECTOR	4.00	X						0.	0.	0.
(10) JOSETTE SHEERAN DIRECTOR	4.00	X						5,000.	0.	0.
(11) JUDITH RODIN DIRECTOR	4.00	X						0.	0.	0.
(12) KANAYO MWANZE DIRECTOR	4.00	X						2,000.	0.	0.
(13) LINAH MOHOLO DIRECTOR	4.00	X						6,012.	0.	0.
(14) MARIA ANDRADE DIRECTOR	4.00	X						4,000.	0.	0.
(15) NICK AUSTIN DIRECTOR	4.00	X						0.	0.	0.
(16) RODGER VOORHIES DIRECTOR	4.00	X						0.	0.	0.
(17) STRIVE MASLYIWA CHAIRMAN	4.00	X		X				0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(18) LILIAN NYANGAYA CHIEF FINANCE OFFICER	40.00			X				213,041.	0.	26,007.
(19) ADAM GERSTENMIER CHIEF OF STAFF & STRATEGY	40.00				X			193,986.	0.	16,500.
(20) DAUDI SUMBA HEAD OF M&E	40.00				X			214,227.	0.	35,087.
(21) HILLARY TOROREY HEAD OF INTERNAL AUDIT	40.00				X			149,910.	0.	24,407.
(22) JOE DEVRIES VP-PROGRAM DEVELOPMENT & INNOVATION	40.00				X			231,893.	0.	18,000.
(23) VANESSA ADAMS VICE PRESIDENT COUNTRY SUPPORT	40.00				X			194,504.	0.	8,000.
1b Sub-total								1,393,384.	0.	283,597.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,393,384.	0.	283,597.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **7**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 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? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0	

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Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	33,626,523.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	61,231,178.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			94,857,701.			
	Business Code						
Program Service Revenue	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			913,250.			913,250.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6 a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		9,415,431.					
	b Less cost or other basis and sales expenses			9,432,587.			
	c Gain or (loss)			-17,156.			
	d Net gain or (loss)			-17,156.			-17,156.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a OTHER REVENUE		900099	164,797.	164,797.			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			164,797.				
12 Total revenue. See instructions			95,918,592.	164,797.	0.	896,094.	

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	48,457,455.	48,457,455.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	587,464.	475,278.	112,186.	
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	15,527,236.	12,577,059.	2,950,177.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,872,900.	1,517,049.	355,851.	
9 Other employee benefits	4,682,692.	3,792,981.	889,711.	
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	92,756.	82,553.	10,203.	
c Accounting	314,726.	280,106.	34,620.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	68,470.	60,938.	7,532.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	9,471,418.	8,429,562.	1,041,856.	
12 Advertising and promotion	20,547.	11,712.	8,835.	
13 Office expenses	926,954.	528,364.	398,590.	
14 Information technology	466,895.	266,130.	200,765.	
15 Royalties				
16 Occupancy	984,080.	560,926.	423,154.	
17 Travel	4,385,593.	3,859,322.	526,271.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,721,598.	2,612,734.	108,864.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	462,160.	115,540.	346,620.	
23 Insurance	44,206.	25,197.	19,009.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOREIGN CURRENCY TRANSL	957,219.	545,615.	411,604.	
b OTHER PROJECT EXPENSES	816,555.	467,234.	349,321.	
c VAT	681,235.	388,304.	292,931.	
d TRAINING	609,412.	347,365.	262,047.	
e All other expenses	918,720.	523,669.	395,051.	
25 Total functional expenses. Add lines 1 through 24e	95,070,291.	85,925,093.	9,145,198.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3,782,302.	1	15,216.
	2 Savings and temporary cash investments	21,523,059.	2	43,562,310.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	3,075,941.	4	2,450,965.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	144,091.	9	849,493.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	4,849,828.		
	b Less accumulated depreciation	3,793,564.	10c	1,056,264.
	11 Investments - publicly traded securities	36,482,188.	11	27,049,601.
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	2,064,607.
	14 Intangible assets		14	117,500.
	15 Other assets. See Part IV, line 11	0.	15	238,356.
16 Total assets. Add lines 1 through 15 (must equal line 34)	66,138,714.	16	77,404,312.	
Liabilities	17 Accounts payable and accrued expenses	7,516,368.	17	7,546,135.
	18 Grants payable	9,554,942.	18	6,821,594.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other 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	9,135,161.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	17,071,310.	26	23,502,890.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		14,606,600.	27	8,121,944.
28 Temporarily restricted net assets		34,460,454.	28	45,779,478.
29 Permanently restricted net assets			29	
Organizations that do not follow SFAS 117 (ASC 958), 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		49,067,054.	33	53,901,422.
34 Total liabilities and net assets/fund balances		66,138,364.	34	77,404,312.

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	95,918,592.
2	Total expenses (must equal Part IX, column (A), line 25)	2	95,070,291.
3	Revenue less expenses Subtract line 2 from line 1	3	848,301.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	49,067,054.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	3,986,067.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	53,901,422.

Part XII Financial Statements and Reporting

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

1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X	
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	2c		X
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?	3a		X
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	3b		

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Schedule A (Form 990 or 990-EZ) 2018 **IN AFRICA**

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	67715627.	69273265.	47305288.	89020653.	94857701.	368172534
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	67715627.	69273265.	47305288.	89020653.	94857701.	368172534
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)						195553928
6 Public support. Subtract line 5 from line 4						172618606

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	67715627.	69273265.	47305288.	89020653.	94857701.	368172534
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4209850.	3388941.	2554685.	493,472.	913,250.	11560198.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					164,797.	164,797.
11 Total support. Add lines 7 through 10						379897529
12 Gross receipts from related activities, etc. (see instructions)					12	

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	45.44	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	65.00	%
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <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"/>			

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 IN AFRICA

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 VI)						
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. 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 ☐

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Schedule A (Form 990 or 990-EZ) 2018 **IN AFRICA**

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

ALLIANCE FOR A GREEN REVOLUTION

Schedule A (Form 990 or 990-EZ) 2018 **IN AFRICA**

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Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
 - b** A family member of a person described in (a) above?
 - c** A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

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

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

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

	Yes	No
1		

Section D. All Type III Supporting Organizations

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

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- ☐ **a** The organization satisfied the Activities Test. *Complete line 2 below.*
 - ☐ **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
 - ☐ **c** The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

2 Activities Test. Answer (a) and (b) below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*

	Yes	No
2a		
2b		

3 Parent of Supported Organizations. Answer (a) and (b) below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

	Yes	No
3a		
3b		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)			

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 **IN AFRICA**

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI . See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 IN AFRICA

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Part VI.

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER REVENUE

2018 AMOUNT: \$ 164,797.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization **ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA**

Employer identification number
98-0513530

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<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" on Form 990, Part IV, line 7

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

Schedule D (Form 990) 2018

832051 10-29-18

**ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA**

Schedule D (Form 990) 2018

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Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

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

Schedule D (Form 990) 2018

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

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

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

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

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

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

Part XIII Supplemental Information.

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

PART V, LINE 4:

**THE ENDOWMENT FUNDS ARE USED TO MEET THE PROGRAM EXPENSE OBLIGATIONS
SUBJECT TO DONOR IMPOSED STIPULATIONS.**

PART X, LINE 2:

**AGRA IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C) (3) OF THE
UNITED STATES TAX CODE. US GAAP REQUIRES THAT CONSOLIDATED FINANCIAL
STATEMENTS REFLECT THE EXPECTED FUTURE TAX CONSEQUENCES OF UNCERTAIN TAX
POSITIONS THAT AN ENTITY HAS TAKEN OR EXPECTS TO TAKE ON A TAX RETURN,
PRESUMING THE TAX AUTHORITIES' FULL KNOWLEDGE OF THE POSITION AND ALL
RELEVANT FACTS. US GAAP ALSO REQUIRES THAT AN ENTITY RECOGNIZE THE BENEFIT
OF TAX POSITIONS WHEN IT IS MORE LIKELY THAN NOT THAT THE PROVISION WILL**

ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA

Schedule D (Form 990) 2018

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Part XIII Supplemental Information (continued)

BE SUSTAINABLE BASED ON THE MERITS OF THE POSITION. AGRA PERFORMED A RISK ASSESSMENT OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2018 AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS OR WHICH MAY HAVE ANY EFFECT ON ITS TAXEXEMPT STATUS. IT IS AGRA'S POLICY TO RECOGNIZE INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, IF ANY, AS AN EXPENSE. AS OF DECEMBER 31, 2018, AGRA HAD NO ACCRUED INTEREST OR PENALTIES.

PART V ENDOWMENT FUNDS

THE ENDOWMENT FUNDS ARE USED TO MEET THE PROGRAM EXPENSES OBLIGATIONS SUBJECT TO DONOR IMPOSED STLPULATLONS THAT ARE EXPECTED TO BE MET BY ACTIONS OF AGRA AT THE PASSAGE OF TIME BASIS OR BOTH.

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832055 10-29-18

SCHEDULE F
(Form 990)Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018Open to Public
Inspection

Name of the organization

**ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA**

Employer identification number

98-0513530**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on

Form 990, Part IV, line 14b

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SUB-SAHARAN AFRICA	1	202	GRANT MAKING		48,457,455.
3 a Subtotal	1	202			48,457,455.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	202			48,457,455.

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

Schedule F (Form 990) 2018

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IN AFRICA**

Schedule F (Form 990) 2018

98-0513530

Page **2**

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	10,827.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	337,521.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	435,837.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	33,430.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	274,837.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	19,300.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	40,895.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	57,092.	EFT	0.		

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

3 Enter total number of other organizations or entities

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Schedule F (Form 990) 2018

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IN AFRICA**

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Schedule F (Form 990)

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	113,282.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	67,365.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	82,865.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	36,630.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	7,140.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	12,260.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	160,384.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	76,334.	EPT	0.		
		SUB-SAHARAN AFRICA	PIATA	56,947.	EPT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	49,577.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	73,522.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	29,064.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	40,992.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	60,136.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	876,913.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	57,895.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	509,054.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	181,785.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	96,704.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	183,869.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	151,630.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	129,366.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	128,988.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	210,827.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	12,795.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	183,205.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	54,244.	EFT	0.		

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Part II. Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	406,106.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	26,100.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	220,582.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	170,300.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	241,975.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	311,997.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	77,225.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	20,880.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	15,660.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	250,855.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	89,288.	EFT	0		
		SUB-SAHARAN AFRICA	PIATA	240,906.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	132,023	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	183,446.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	227,419.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	88,335.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	183,800.	EFT	0		
		SUB-SAHARAN AFRICA	PIATA	150,000.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	263,295.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	220,207.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	162,750.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	51,280.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	148,766	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	177,442.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	136,673.	EFT	0		
		SUB-SAHARAN AFRICA	PIATA	94,405.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	471,506.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	225,506	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	488,288	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	523,679	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	111,644	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	334,940	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	34,936	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	25,363	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	13,125	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	15,225	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	44,413	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	463,892	EFT	0		
		SUB-SAHARAN AFRICA	PIATA	215,860	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	99,537	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	74,865	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	333,617	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	250,215	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	148,715	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	142,353	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entries Outside the United States (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	170,239	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	165,252	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	31,709	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	161,106	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	105,572	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	188,106	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	161,464	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	553,225	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	354,926	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	105,300.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	340,450.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	379,515.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	273,521.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	212,032.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	548,000.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	86,695.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	117,219.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	233,995.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	352,415.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	134,202.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	94,989.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	325,499.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	89,473.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	145,241.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	142,641.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	63,269.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	13,328.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	200,000.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	263,941.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	160,800.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	141,700.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	235,540.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	425,596.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	239,584.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	21,029.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	178,948.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	174,418.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	199,680.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	94,434.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	237,727.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	194,797.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	87,819.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	191,038.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	219,927.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	118,625.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	53,300.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	85,100.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	32,044.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	49,300.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	21,139.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	18,837.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	18,287.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	18,288.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	392,650.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	144,449	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	100,576	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	67,288	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	29,750	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	210,298	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	320,939	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	100,389	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	115,231	EFT	0		
		SUB-SAHARAN AFRICA	PIATA	382,006	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	167,526	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	174,879	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	21,506	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	384,080	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	324,458	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	343,235	EFT	0		
		SUB-SAHARAN AFRICA	PIATA	191,311	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	293,828	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	136,998	EFT	0		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PIATA	233,491.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	50,676.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	23,376.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	610,000.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	200,000.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	108,988.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	119,040.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	186,095.	EFT	0.		
		SUB-SAHARAN AFRICA	PIATA	334,797.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	FISPAP	119,916.	EFT	0		
		SUB-SAHARAN AFRICA	FISPAP	157,707.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	67,031.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	72,451.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	108,910.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	52,550.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	50,050.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	54,050.	EFT	0		
		SUB-SAHARAN AFRICA	FISPAP	51,550.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	FISPAP	135,937	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	183,600	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	108,000	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	44,650	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	22,400	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	41,700	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	102,848	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	111,060	EPT	0.		
		SUB-SAHARAN AFRICA	FISPAP	62,125	EPT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		SUB-SAHARAN AFRICA	FISPAP	20,160.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	97,275.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	747,958.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	190,082.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	89,730.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	101,011.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	74,196.	EFT	0.		
		SUB-SAHARAN AFRICA	FISPAP	87,250.	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	58,382.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	BMZ2017	89,936	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	197,545	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	717,886	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	174,876	EFT	0		
		SUB-SAHARAN AFRICA	BMZ2017	90,011	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	30,851	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	70,855	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	114,659	EFT	0.		
		SUB-SAHARAN AFRICA	BMZ2017	67,025	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	BMZ2017	61,043.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	221,411	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	120,232.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	204,059.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	210,000.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	170,000.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	157,150.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	300,000	EFT	0		
		SUB-SAHARAN AFRICA	SOILHEALTH	33,808.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SOILHEALTH	35,600.	EFT	0		
		SUB-SAHARAN AFRICA	SOILHEALTH	2,545	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	49,470.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	12,574.	EFT	0		
		SUB-SAHARAN AFRICA	SOILHEALTH	163,357.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	135,046	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	87,121.	EFT	0		
		SUB-SAHARAN AFRICA	SOILHEALTH	62,229.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	99,566.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SOILHEALTH	17,500.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	4,891.	EFT	0		
		SUB-SAHARAN AFRICA	SOILHEALTH	10,500.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	23,925.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	6,743.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	930.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	3,372.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	1,850.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	15,474.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SOILHEALTH	42,226.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	150,000.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	84,000.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	60,000.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	96,000.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	55,206.	EFT	0.		
		SUB-SAHARAN AFRICA	SOILHEALTH	37,882.	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	91,352.	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	37,185.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SEEDS	138,267	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	166,852	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	186,076	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	88,027	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	100,697	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	142,738	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	213,735	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	218,283	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	145,390	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SEEDS	71,803.	EFT	0.		
		SUB-SAHARAN AFRICA	SEEDS	128,119.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	173,118.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	276,071.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	100,607.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	50,526.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	10,000.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	47,876.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	41,953.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	POLADVOC	170,940.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	61,525.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	67,329.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	163,923.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	59,051.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	114,963.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	358,930.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	64,322.	EFT	0.		
		SUB-SAHARAN AFRICA	POLADVOC	59,125.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non cash assistance	(h) Description of non cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	POLADVOC	145,167.	EFT	0.		
		SUB-SAHARAN AFRICA	MARKETS	159,228.	EFT	0		
		SUB-SAHARAN AFRICA	MARKETS	472,764.	EFT	0.		
		SUB-SAHARAN AFRICA	MARKETS	200,000	EFT	0.		
		SUB-SAHARAN AFRICA	MARKETS	46,533.	EFT	0.		
		SUB-SAHARAN AFRICA	MARKETS	161,262.	EFT	0		
		SUB-SAHARAN AFRICA	MARKETS	66,243.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	231,583.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	75,000.	EFT	0		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	100,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	281,118.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	30,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	59,159.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	409,550.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	421,733.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	44,142.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	182,370.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	357,667.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	165,621.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	143,614.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	140,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	109,200.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	42,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	290,466.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	100,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	50,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	100,000.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	69,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	64,000.	EFT	0		
		SUB-SAHARAN AFRICA	AECF	86,994.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	57,996.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	83,150.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	170,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	274,878.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	100,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	26,950.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	67,200	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	53,731	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	35,820	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	100,000	EFT	0		
		SUB-SAHARAN AFRICA	AECF	50,000	EFT	0		
		SUB-SAHARAN AFRICA	AECF	200,000	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	129,000	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	219,255	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	190,932	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	59,990.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	106,617.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	203,308.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	291,840.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	87,909.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	98,124.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	200,321.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	35,326.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	35,326.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	205,922.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	151,617.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	27,308.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	161,042.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	100,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	96,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	50,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	35,200.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	84,006.	EFT	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	74,375.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	50,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	44,800.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	93,500.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	100,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	62,500.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	53,337.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	60,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	150,000.	EFT	0.		

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Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AECF	30,000.	EFT	0.		
		SUB-SAHARAN AFRICA	AECF	133,000.	EFT	0.		

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

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Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No

- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990) ☐ Yes ☒ No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ☐ Yes ☒ No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990) ☐ Yes ☒ No

Schedule F (Form 990) 2018

ALLIANCE FOR A GREEN REVOLUTION

Schedule F (Form 990) 2018

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Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

**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" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

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Inspection

Name of the organization

**ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA**

Employer identification number

98-0513530

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☒ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (such as maid, chauffeur, chef)

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

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

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

☒ Compensation committee

☒ Independent compensation consultant

☐ Form 990 of other organizations

☒ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

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

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

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

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

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III

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

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III

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

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

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

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

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

Schedule J (Form 990) 2018

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Page 2

Schedule J (Form 990) 2018

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

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

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

[illegible]

Schedule J (Form 990) 2018

Part III Supplemental Information

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

PART I, LINE 1A:

ALL INTERNATIONALLY RECRUITED EMPLOYEES ARE ENTITLED TO 50% OF RENT AND UTILITIES UP TO A MAXIMUM OF \$10,000 PER YEAR. REGIONALLY REVRUITED EMPLOYEES ARE ENTITLED HOUSING AND UTILITY ALLOWANCE UP TO A MAXIMUM OF \$27,000. INTERNATIONALLY RECRUITED EMPLOYEES ARE ALSO ENTITLED FO 100% REIMBURSEMENT FOR SECURITY RELATED EXPENSES.

PART I, LINE 1B:

A;; REIMBURSMENTS ARE MADE UPON RECEIPT OF INVOICE AND PROOF OF PAYMENT BY STAFF.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

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IN AFRICA**

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

**ACROSS THE CONTINENT INTO A HIGHLY PRODUCTIVE, EFFICIENT, COMPETITIVE
AND SUSTAINABLE SYSTEM THAT ASSURES FOOD SECURITY AND LIFTS MILLIONS
OUT OF POVERTY.**

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

**SHOCKS 4) STRENGTHENED CONTINENTAL, REGIONAL, AND GOVERNMENT
MULTI-SECTORAL COORDINATION AND MUTUAL ACCOUNTABILITY IN THE
AGRICULTURAL SECTOR.**

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAMS INCLUDE THE FOLLOWING:

- **FISFAP**
- **BMZ**
- **SOILHEALTH**
- **SEEDS**
- **POLADVOC**
- **MARKETS**

EXPENSES \$ 38,483,528. INCLUDING GRANTS OF \$ 12,101,911. REVENUE \$ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

**KENYA, GHANA, TANZANIA, MOZAMBIQUE,
SOUTH SUDAN, RWANDA, RWANDA**

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 99 IS PREPARED BY THE AGRA FINANCE UMT, REVIEWED BOTH INTERNALLY BY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Name of the organization **ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA**

Employer identification number
98-0513530

MANAGEMENT AND THE ATTORNEY IN RETAMER BEFORE FINALLY BEING SUBMITTED TO
FINANCE, HUMAN RESOURCE AND BUDGET COMMITTEE OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION WAS NOT INVOLVED IN ANY CONFLICT OF INTEREST TRANSACTIONS
IN THE EVENT THAT A CONFLICT OF INTEREST ARISES BETWEEN THE ORGANISATION
AND AN OFFICER OR DIRECT, THE CONFLICTED INDIVIDUAL WOULD RECUSE HIMSELF OR
HERSELF FROM THE ORGANIZATION'S DECISION MAKING PROCESS WITH RESPECT TO THAT
TRANSACTION THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS NOT AVAILABLE
TO THE PUBLIC.

FORM 990, PART VI, SECTION B, LINE 15:

THE SALARIES OF THE PRESIDENT, VICE PRESIDENT'S AND CHIEFS ARE SET BY THE
BOARD ON APPOINTMENT SUBSEQUENT CHANGES ARE SUBJECT TO APPROVAL OF THE
FINANCE, HUMAN RESOURCE AND BUDGET COMMITTEE OF THE BOARD AS PART OF THE
ANNUAL PERFORMANCE EVALUATION.

FORM 990, PART VI, SECTION C, LINE 19:

THE INCORPORATION DOCUMENTS OF AGRA ARE AVAILABLE FOR PUBLIC VIEW UPON
REQUEST THE FINANCIAL STATEMENTS ARE DISTRIBUTED TO OUR CORPORATION
DIRECTLY THE STATEMENTS ARE ALSO INCLUDED IN THE AGRA ANNUAL REPORT
DOCUMENT WHICH IS WIDELY DISTRIBUTED THE FINANCIAL STATEMENTS IS ALSO
AVAILABLE ON THE AGRA WEBSITE.

FORM 990, PART V, LINE 2

THE NUMBER OF EMPLOYEES REFLECTED ON PART V LINE 2 REPRESENTS BOTH
DOMESTIC AND FOREIGN INDIVIDUALS. THE ORGANIZATION HAS 7 US EMPLOYEES.

Name of the organization **ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA**

Employer identification number
98-0513530

FORM 990, PART VII:

**THE ORGANIZATION PAYS EMPLOYEES IN BOTH THE US AND KENYA. CERTAIN
INDIVIDUALS LISTED ON PART VII RECIEVED COMPENSATION IN KENYA SHILLING.
THESE AMOUNTS HAVE BEEN TRANSLATED INTO US DOLLARS FOR PURPOSES OF
PRESENTATION.**

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

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Name of the organization **ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA**

Employer identification number
98-0513530

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

(a) Name, address, and EIN (if applicable) 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
THE AECF WEST END TOWERS, GROUND FLOOR, KANJATA ROAD - 98-1394467, P.O. BOX 66773-0080, NAIROBI, KENYA	GRANT MAKING	MAURITIUS	21,112,830.	13,876,761.	AGRA

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on 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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
PARTNERS FOR SEED IN AFRICA FUND - 99-0368170, P.O. BOX 66773-0080, NAIROBI, KENYA	GRANT MAKING	DELAWARE	501(C)(3)	PF	AGRA		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule R (Form 990) 2018

ALLIANCE FOR A GREEN REVOLUTION

Schedule R (Form 990) 2018 **IN AFRICA**

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Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on 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?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on 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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
AFRICAN SEED INVESTMENT FUND									
PO BOX 66773-0080									
NAIROBI, KENYA	INVESTMENT	MP		C CORP	194,691.	2,409,112.	99.99%	X	

ALLIANCE FOR A GREEN REVOLUTION

Schedule R (Form 990) 2018 **IN AFRICA**

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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, 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?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

	Yes	No
1a		X
1b		X
1c	X	
1d		X
1e		X
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l		X
1m		X
1n	X	
1o	X	
1p		X
1q		X
1r		X
1s		X

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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

IN AFRICA

Schedule R (Form 990) 2018

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Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Schedule R (Form 990) 2018

ALLIANCE FOR A GREEN REVOLUTION
IN AFRICA

Schedule R (Form 990) 2018

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Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Lined area for supplemental information.