



LESSONS OF HISTORY



VISION

We seek a world of hope, tolerance and social justice, where poverty has been overcome and people live in dignity and security.

CARE Canada will be a global force and a partner of choice within a worldwide movement dedicated to ending poverty. We will be known everywhere for our unshakable commitment to the dignity of people.

MISSION

CARE Canada's mission is to serve individuals and families in the poorest communities in the world. Drawing strength from our global diversity, resources and experience, we promote innovative solutions and are advocates for global responsibility. We facilitate lasting change by:

- Strengthening capacity for self-help;
- Providing economic opportunity;
- Delivering relief in emergencies;
- Influencing policy decisions at all levels;
- Addressing discrimination in all its forms.

Guided by the aspirations of local communities, we pursue our mission with both excellence and compassion because the people whom we serve deserve nothing less.

CARE INTERNATIONAL WORKED IN OVER 70 COUNTRIES IN 1999

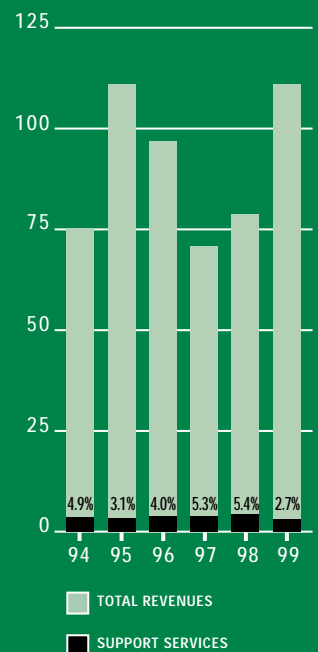
IN 1999 CARE CANADA SUPPORTED PROJECTS IN:

- | | | |
|-----------------------|----------------|---------------|
| 1. Afghanistan | 10. Haiti | 19. Palestine |
| 2. Albania | 11. Honduras | 20. Peru |
| 3. Bangladesh | 12. Indonesia | 21. Rwanda |
| 4. Bosnia-Herzegovina | 13. India | 22. Sri Lanka |
| 5. Burundi | 14. Kosovo | 23. Sudan |
| 6. Cameroon | 15. Kenya | 24. Tanzania |
| 7. Cuba | 16. Mozambique | 25. Zambia |
| 8. Egypt | 17. Nicaragua | 26. Zimbabwe |
| 9. El Salvador | 18. Niger | |



TOTAL REVENUES AND SUPPORT SERVICES (MILLIONS OF DOLLARS)

SUPPORT SERVICES AS A PERCENTAGE OF REVENUES



CARE AT A GLANCE

QUESTIONS DONORS OFTEN ASK

How does CARE respond in emergencies?

When an emergency occurs in or near any one of more than 70 developing countries in which CARE has offices – such as, among others, Central America, the Balkans or Sierra Leone in 1999 – CARE field staff perform an immediate assessment of the most critical needs and we support their lifesaving efforts with funds, qualified personnel, food, medicine and other relief supplies. A substantial portion of this relief is provided by individual donors responding to our emergency appeals and is matched by institutional contributions.

How can I support CARE?

You may wish to donate via cheque or money order, or make a credit-card donation using your VISA, American Express or MasterCard. You can also support our work through monthly donations (CARE Plan), bequests,

annuities and life-insurance donations. Donations can also be made securely over the Internet at www.care.ca. For more information, contact the Donor Relations Team at CARE Canada at 1-800-267-5232.

How do you choose which projects to support?

CARE project proposals are developed by CARE staff in close collaboration with local governments and organizations, and with the people themselves. This ensures that our projects address real needs in the countries where we work. The funds that we raise are for the specific purpose of supporting CARE projects in developing countries.

What are Your Administration Costs?

The audited statements for 1999 in this report (and the chart on the inside cover) show that they remained extremely low at 2.7% of total expenditure, including the cost of fundraising.

1946

When the first CARE packages arrived in post-war Europe in 1946, they were the earliest offerings of an organization that in half a century would grow to become the largest private relief and development agency in the world. The original package contained a humble selection of basic foods—meats, broth, honey and jam, raisins, milk and eggs, flour, sugar, coffee and chocolate—and soon became the century's best known symbol of compassion from afar.



That first European relief operation proved the principle on which CARE had been created—that immediate relief in time of emergency is the foundation of effective development. In 1999, that kind of relief continued to be a critical focus of CARE activity, as CARE emergency response teams took the generosity of Canadians into the rubble of both natural disaster and human conflict, delivering unprecedented levels of aid at unprecedented speed.

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United Nations holds first session
Nuremberg: Nazi war criminals tried
First CARE packages arrive in Europe
CARE Canada incorporated



Marshall offers economic aid plan
to Europe
Transistor: A bit of electronic wizardry
600+ mph! Yeager breaks sound barrier
1.8 million CARE packages to 19
European countries

Gandhi assassinated
State of Israel created
Communist spy mania grips America
U.N. passes Human Rights Declaration

MESSAGE FROM THE CHAIR

It is a pleasure to report that the affairs of CARE Canada remain in good order, and that the organization completed the fiscal year in a positive position. Indeed, during the year, gross revenues were the second highest in the organization's history.

Natural disasters and man-made conflicts throughout the world provided much work for CARE's relief teams. While we deplore the onset of such emergencies we are pleased that we have the skills and expertise to respond. One of our most pressing challenges is to provide ongoing capacities for rapid response to disaster relief; while we know what needs to be done and are able to do it, funding is a continuing problem for the development and retention of such capacity.

CARE Canada continues to provide long-term development assistance throughout the world. Exciting new ventures in the provision of small credit, the supplying of agricultural inputs close to farmers who need it, the reinforcing of basic foods with micronutrients, basic and primary health care for mothers and children, the development of community management of water distribution, and assistance with finding potable water supplies, all form a part of what we do. And those initiatives are organized and managed by those closest to the scene—the people who will benefit from them. In my view, that is indeed sustainable development.

Canada is a fortunate country in terms of its economic well-being, political systems and public services. Canadians are generous to those in other parts of the world who are less well-off and to those who suffer from the effects of disaster and conflict. We are grateful for their support, and I am pleased to report that fundraising targets exceeded expectations during 1999. That support is a crucial component of CARE Canada's ability to

continue to provide professional levels of service to those in need.

We are also grateful for continuing support from the Canadian International Development Agency (CIDA), and other international funding institutions. We share the common objective of assisting the poor in developing countries, and the support of CIDA, the United Nations and other institutional donors is critical to CARE's efforts

CARE Canada is a part of the international federation CARE International, and it has been my privilege to be a member of its Board and to serve as Treasurer and a member of the Executive Committee. During 1999 CARE International embarked on a visioning exercise in which its members examined the common purpose of the organization. The new vision and mission statement appears on the inside cover of this annual report, and is the result of a collaborative effort among ten national members and personnel from many of the CARE offices throughout the world. In the next year CARE International will be examining its structure to see if changes are necessary to reflect its updated goals and objectives.

CARE Canada's Board of Directors is made up of men and women who volunteer their time and expertise in the service of those with whom CARE works overseas. I thank them for their advice, counsel, professionalism and dedication, and they join me in paying tribute to the CARE staff in Canada and internationally who, under the able direction of A. John Watson, make such a positive contribution to the lives of so many in need throughout the world.



Peter Crossgrove

Chair:



Actor Reagan earns more than President Truman
Berlin airlift includes 500,000 CARE packages
Ecuador quake kills 4,600
Newfoundland enters Confederation as Canada's
10th province

CARE's first year of operations in India
North Korean communists invade South
First black athlete in U.S. tennis championship



Churchill back in power at 77
First novel instant success for author
Salinger
CARE helps homeless South Korean war
widows and children

BOARD OF DIRECTORS (OCTOBER 1998-1999)
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PREMDOR Inc.

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Transportation Consultant

SECOND VICE-CHAIR

The Hon. James A. Grant, PC, QC
Chair Emeritus
Stikeman Elliott

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Executive Director
CARE Canada

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Partner
Borden Elliot Scott & Ayles

PROGRAMME ADVISOR

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Former Minister of Foreign Affairs

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Consultant
Anita Saar and Associates

Robert J. Tweedy
Chair
Sklar-Pepler Furniture Corp.

Albert Schweitzer awarded Nobel Peace Prize
Eva Peron dies; Argentina mourns
Japan granted full sovereignty



Stalin dead
Salk polio vaccine a success

Senator McCarthy under attack
Bannister breaks four-minute mile
West Germany admitted to NATO

Once again, the necessity for emergency response dominated our work during 1999. Beginning with the Hurricane Mitch disaster in the autumn of 1998, and through the Kosovo war and the violence in East Timor, CARE Canada was involved in assisting those in need.

The after effects of Mitch were horrific. Fortunately CARE was present in the hardest hit countries, and we were able to mobilize quickly to provide shelter, food, water and some of the other necessities of life. The task of rebuilding both shattered homes and shattered lives is a more long-term task for the people involved; we remain willing to help them however we can.

Prior to the NATO bombing of Kosovo, CARE Canada was running projects to assist with shelter and the provision of warmth during the winter months. During April, May and June we assisted refugees flowing into Albania and set up a full-scale programme there. CARE Canada remains in Albania, helping the desperately poor people of that country to find a measure of peace and security through economic development and public infrastructure and support.

CARE Canada is the lead member for CARE International in Indonesia and we have run projects in East Timor for several years. During 1999 unrest in East Timor, along with growing international pressure and a changing and unstable Indonesian political situation, led to the promise of a referendum on independence. Overseen by the UN, the vote at the end of August resulted in an overwhelming victory for those seeking independence. Supporters of continued integration with Indonesia reacted against the vote with violence and killing. In mid-September, Indonesia agreed to accept a UN force in East Timor and later in the fall a vote in the

Indonesian parliament called for the creation of an independent state.

CARE had evacuated staff to West Timor during the worst of the violence, most of whom made their way back during October and November. Food distribution and the provision of shelter were the first order of business.

I visited Kosovo in the early winter, and East Timor in May and November 1999. In both cases I was struck with the ability of political and militia leaders to incite people to acts of barbarism against their neighbours. Ethnic violence based on group hatred is a dreadful disease of the late 20th century and I fear we will continue to see its resurgence as the new millennium begins.

CARE finds itself working in areas where this awful hatred takes hold of populations and the resulting violence and conflict kills and disrupts lives. These are new circumstances for humanitarian organizations and we are engaging in academic and practical research to



1955

By 1955—the year CARE moved into Egypt to undertake what would eventually be the largest food-aid programme ever coordinated by a North American agency—the CARE package itself had become a minority part of CARE's overall budget. By that time, CARE experience had shown that community-based development could help people identify and acquire the skills and tools needed to secure their own welfare.



In 1999, CARE Canada continued that diversity. Working in over 70 countries, CARE spearheaded development programming beyond emergency assistance in a wide variety of disciplines, including water and community health, agroforestry and conservation, small enterprise development and income generation.

Einstein, physicist and humanist, dies
Disneyland opens
Glenn Gould records the "Goldberg Variations" by Bach
CARE spearheads food-aid programme in Egypt

Blacks boycott buses in Montgomery, Alabama
CARE rushes food aid to Hungary following bloody revolt

European Economic Community treaty signed
Ghana, formerly Gold Coast, independent

MESSAGE FROM THE EXECUTIVE DIRECTOR

enable us better to understand both the context and the best responses. There are practical dilemmas which face us. For instance, the humanitarian code by which most international non-governmental organizations govern themselves rightly sets out the principle of neutrality. However, recently created war-crimes tribunals seek testimony from those close to the ground, and indeed such tribunals can compel the giving of evidence. What is a humanitarian organization to do? If its staff witness atrocities, should they state this publicly and on the record? Will their mere presence deter such activity? If not, are they endangering their ability to help the afflicted by agreeing to testify against those who committed acts of aggression?

There are no easy answers to such questions. CARE Canada published a monograph tackling some of these issues last year. "Mean Times" made a considerable impact on the foreign policy community and we intend to follow-up that research with further work which marries academic and intellectual thought with practical experience. We will be aided in that endeavour by the

implementation of new technologies, and the creation of virtual libraries and centres of excellence by i2K, the independent information-technology business trust.

I end by paying tribute to the CARE Canada staff throughout the world. They work hard and effectively, often under extremely difficult circumstances. 1999 was not an easy year, and I am happy to acknowledge and praise their efforts.



A. John Watson
Executive Director.

Birth defects linked to thalidomide
USA launches first satellite into orbit
Canada enters era of supersonic flight with first flight
of the Avro Arrow

Castro leads Cuba revolution
Blue whales in danger of extinction



Ceylon elects world's first female leader
Eleven new states created in Africa
Kennedy elected President

CARE CANADA PROJECTS

The projects that follow are listed under their programming sectors to allow for easy comparison with our audited financial statements.

Projects listed below are CARE Canada-managed activities.

The value of the sector activity figures shown include all CARE Canada-managed projects in all Country Offices, and all projects in CARE Canada lead Country Offices.

AGROFORESTRY AND CONSERVATION



TOTAL PROGRAMME SECTOR EXPENSE

\$5,836,130

CARE Canada works with poor farmers to develop long term solutions to hunger and poverty, by providing access to credit, improved seeds, farming tools and appropriate technology. To protect the environment, CARE promotes activities such as agroforestry—the planting of trees with crops to enrich degraded soil and prevent erosion.

BURUNDI - Promoting Rational Use of Firewood

CAMEROON - Soil and Water Conservation

CUBA - Local Community and School Gardens

HAITI - Urban Horticulture

KENYA - Agroforestry Extension

NICARAGUA - Erosion Control

ZAMBIA - Livingstone Food Security

ZAMBIA - Promotion and Marketing of Fuel-Efficient Stoves

ZIMBABWE - Small Dams and Irrigation

ZIMBABWE - Household Livelihood Security in Community-Managed Drought Mitigation Projects

1961



CARE's tree planting programme in Guatemala was begun in 1961 with a gift of 1400 trees to those who had been resettled on Guatemala's Pacific Coast. By 1967—Canada's Centennial—more than 250,000 trees had been planted. Only a decade later, the forests, orchards, lumber yards, construction companies and furniture manufacturing businesses based on these growing trees were yielding a substantial income for several thousand families.

The success of the tree planting project was ensured by the collaboration of many CARE organizations around the world. United as a federation of unique and independent agencies with a common goal, the members of CARE International combined their talents then as they do now—by identifying, training and deploying development expertise around the world.



CARE tree programme underway in Guatemala
Yuri Gagarin is first man in space
Berlin divided by Communist wall
CARE trains the first group of Peace Corps volunteers.

3,000 die in Peru landslide
John Glenn is first American to orbit Earth
Cuban missile crisis

1962

African nations form unity organization
Soviet Union puts first woman in space
John F. Kennedy killed in Dallas

1963

CARE CANADA PROJECTS

WATER AND COMMUNITY HEALTH



TOTAL PROGRAMME SECTOR EXPENSE

\$16,749,907

CARE Canada helps people gain access to basic primary health care through public education, nutrition, social services outreach and health worker training programmes. These health activities are complemented by programming in water and sanitation which reduces the incidence of water-related diseases and dehydration.

BOSNIA-HERZEGOVINA / CROATIA - Mission Development
 BURUNDI - Mission Support
 Muramvya Water Systems Rehabilitation
 Improvement of Water Sources
 CAMEROON - Village Water Supply and Management
 STD/AIDS Prevention for Truck Drivers (AIDSPAT)
 STDs and Unwanted Pregnancies Prevention Among Youth
 CUBA - Integrated Rural Water Supply Project
 HAITI - South Integrated Project Phase II
 HONDURAS - Sustainable Water and Sanitation
 INDIA - Maternal and Infant Survival
 INDONESIA - Sulawesi Rural Community Development
 Capacity Building and Community Self-Management
 Acute Respiratory Infection
 Programme Development
 KENYA - Child Survival
 Girl Child Development Network
 Early Childhood Development
 Programme Development and Mission Support
 HIV/AIDS Prevention
 MOZAMBIQUE - Sustainable Water in Machaze
 NICARAGUA - Water for Today and Tomorrow
 PALESTINE - Citizenship and Democracy
 PERU - Rural Water and Health
 RWANDA - Kibungo Water Rehabilitation
 Mobile Health Centres
 Gikongoro Community Shelter
 ZAMBIA - Copperbelt Urban Livelihood Project
 Peri-Urban Whole Child Health
 Infant and Child Mortality Reduction
 Programme Development and Mission Support
 ZIMBABWE - Micronutrient Initiatives
 Women's Health and Development Programme

1966

By the time CARE moved into northern India with emergency food supplies in 1966, CARE expertise in communication and logistics was revered around the world. In emergencies, life itself can depend on the difference between minutes and hours, and CARE relief teams are celebrated for their efficiency in getting aid to the right people at the right time.

In 1999, that same expertise found new energy in i2K—CARE Canada's specialized agency for establishing and maintaining emergency communication with advanced and appropriate technologies.

i2K Rapid-Deployment Communication (RADEC) teams are equipped and trained to move into disaster zones, then enable multi-organization communication and coordination through specially designed Intranet sites accessible through the World Wide Web.

Tested this year during Hurricane Mitch relief operations in Central America, and refugee assistance operations in Kosovo, RADEC teams proved that using state-of-the-art communication technologies can radically reduce overlap, speed up delivery and maximize cost effect.



The Beatles invade North America
 Sydney Poitier named Best Actor

UNICEF awarded Nobel Peace Prize
 U.S. troops authorized to fight in Vietnam
 Race riots in Watts
 Canada replaces the Union Jack flag with the
 Maple Leaf

CARE's relief operations in Bihar saves
 millions of lives.
 Opposition to Vietnam War grows
 Miniskirt raises hemlines and eyebrows



SMALL ENTERPRISE DEVELOPMENT AND INCOME GENERATION



TOTAL PROGRAMME SECTOR EXPENSE

\$43,484,954*

*INCLUDES VALUE OF CONTRIBUTIONS IN KIND AND FOOD FOR RMP (SEE NOTE 4 OF FINANCIAL STATEMENTS)

CARE Canada is committed to improving economic security and expanding income opportunities for poor people, especially women. By providing access to credit and helping to create savings mechanisms, CARE helps people invest in themselves and increase their earning power.

BANGLADESH - RMP

EGYPT - ESMA, Egyptian Small and Micro-Enterprise Association

INDONESIA - Organizational Evolution (current Programme Grant)

KENYA - CIDA Youth Internship

NICARAGUA - CIDA Youth Internship

NICARAGUA - CIDA Youth Internship

PERU - CIDA Youth Internship

TANZANIA - Canadian Initiative for Poverty Reduction

ZAMBIA - Kalulushi (World Bank)

ZAMBIA - REAP Rural Enterprise and Agribusiness Promotion (IFAD)

ZAMBIA - Urban Restructuring and Water Supply Project

ZAMBIA - WUSC Youth Internship

ZIMBABWE - Monetization Study (misc. income)

ZIMBABWE - SEDTAP

ZIMBABWE - CIDA Youth Internship

1969

The 250,000 protesters who marched against war in Washington in 1969 knew that the brutality of military action itself is only one of the horrors of armed conflict. For battleground inhabitants, recovering from wholesale destruction is its own kind of hardship.



In 1999, CARE helped lessen that hardship in Kosovo. Establishing five refugee camps in neighbouring Albania, CARE offered comfort, shelter and sustenance to some 125,000 homeless, thereby helping to relieve the burden on small border communities.

Then, when the guns stopped firing, CARE staff transformed refugee camps into transit sites, and helped Kosovars as they moved back home to rebuild their lives. Establishing safe areas along the homeward trail, CARE teams were able to offer food and shelter for a night's rest to travellers before they carried on.

Canada's Expo '67 is a Centennial sensation
First heart transplant
First commercial microwave oven



Trudomania! Pierre Elliott Trudeau sworn in as Prime Minister of Canada
Martin Luther King assassinated
Soviet tanks invade defiant Prague
San Francisco heart of hippie movement



First flight of the Concorde
First human on the moon
250,000 protesters march against Vietnam War

CARE CANADA PROJECTS

EMERGENCY ASSISTANCE



TOTAL PROGRAMME SECTOR EXPENSE

\$40,830,246

CARE meets the challenge of natural and human devastation through a three-pronged strategy which includes disaster preparedness, quick and effective response, and help with recovery. CARE provides food, basic health care, temporary shelter, seeds and tools, and support for rehabilitation activities to millions of people every year.

AFGHANISTAN - Kabul Widows Emergency Feeding Project

ALBANIA - Mission Establishment

Kosovo Refugee Assistance

Search and Outreach/Mobile Assistance Project

UNHCR Kosovo Refugee Camp Management

Transportation Management

BANGLADESH - Bangladesh Flood Response

BOSNIA-HERZEGOVINA/CROATIA -

CARE Experts for Bosnia

Building Peace in North West Bosnia

REACH – Strategies for Turnover

Collective Centre Assistance Project for Republika

Srpska

BURUNDI - Mubanga Housing Construction

CAMEROON - Food Distribution in Northern Provinces

Food Distribution in Prisons

EL SALVADOR - Emergency Reconstruction Programme

HONDURAS - Mitch Emergency and Rehabilitation

Regional Emergency Logistics Unit

INDONESIA - Emergency Project

Fires and Drought Emergency

Fires and Drought Emergency

KENYA - Drought Intervention – WFP

Flood Assistance – UNHCR

Somalia Refugee Assistance Project – UNHCR

Somalia Refugee Assistance Project – WFP

NIGER - Emergency Food Aid Project

PERU - Emergency Relief for Flood Victims

SUDAN - North Sudan Wau Emergency – CIDA

SRI LANKA - Food Security

ZAMBIA - Emergency Drought Relief / Livelihood and

Asset Protection

Rural Roads Rehabilitation

ZIMBABWE - Community Supplementary Feeding Project

1970

In 1970, 12 million school children in India were able to eat nutritious meals every day because CARE had established a solid base of generous donors through a quarter century of programming around the world. Donations of money were essential to CARE's ability to help, but much more than money was offered and accepted. Then, as now, there were also those who dedicated time, resources and even their lives to help the world's poorest people through CARE.

In 1999, we were reminded that people's inspiration for giving is as varied as their backgrounds. Some have benefited from CARE programming themselves. Some have seen the transforming effect of CARE projects first-hand. Others have been impressed by the dedication of CARE personnel they have met. The variety is remarkable; at CARE, we simply call the phenomenon The Chain Of Giving.



"October Crisis". Martial law in Canada, troops sent into Montreal
Tidal wave sweeps away 150,000 victims in Pakistan
CARE feeds, clothes and shelters 600,000 Peruvian earthquake survivors
12 million Indian school children now receiving CARE food

Bangladesh established
CARE feeds refugees from East Pakistan
China enters United Nations
Mariner 9 placed in Mars orbit

Quake levels Managua; 10,000 lives lost
Last Apollo moon visit ends
Team Canada defeats Soviet national hockey team

OUR PARTNERS

THE CARE NETWORK AND ITS INSTITUTIONAL DONORS

CARE International

CARE International operates in over 70 developing countries. Its members are CARE Australia, CARE Canada, CARE Danmark, CARE Deutschland, CARE France, CARE Japan, CARE Norge, CARE Österreich, CARE UK and CARE USA.

CARE Canada

CARE Canada is an operational agency that, as a member of the CARE International network, supports development projects and relief operations around the world. It is also the lead agency responsible for coordinating the overall efforts of the CARE International network in Bosnia-Herzegovina, Burundi, Cameroon, Croatia, Indonesia, Kenya, Zambia and Zimbabwe. CARE International has also appointed CARE Canada coordinator for its programmes in Albania and Cuba.

Our work would not be possible without the commitment of our institutional donors, particularly the Canadian International Development Agency (CIDA). We take this opportunity to thank all of them for their significant support of CARE Canada.

CARE Canada and CIDA

CIDA Matching Funds

Public donations to CARE Canada are often matched by the Canadian International Development Agency (CIDA), in varying ratios depending on the type of project to which they are applied. CARE Canada projects receive funding from three different branches of CIDA: Canadian Partnership, Bilateral Programmes and Multilateral Programmes.

Canadian Partnership

For every dollar donated to projects under this branch, CIDA contributes three dollars. These projects, which are initiated by a non-profit, non-government organization like CARE, encourage partnerships between Canadian and developing country participants. Self-reliance and maximum use of the local resources in the host country are also emphasized.

Bilateral Programmes

Under this branch the usual practice is that CIDA contributes 100 per cent of costs and that CARE Canada and its partners make substantial in kind contributions. These projects, which call for an agreement between the Government of Canada and the host government, are normally larger in scope. These development projects are often capital-intensive and involve infrastructure development such as building roads, warehouses, water supply and sanitation systems, or integrated community development.

Multilateral Programmes

International Humanitarian Assistance (IHA) projects under this branch meet the immediate relief needs of disaster victims, with CIDA funding up to 100 per cent of costs. It also provides for emergency food distribution in famine areas. As well, the Food Aid Center (FACE) supports food monetization and food swaps where proceeds are used for rehabilitation or long-term development activities.

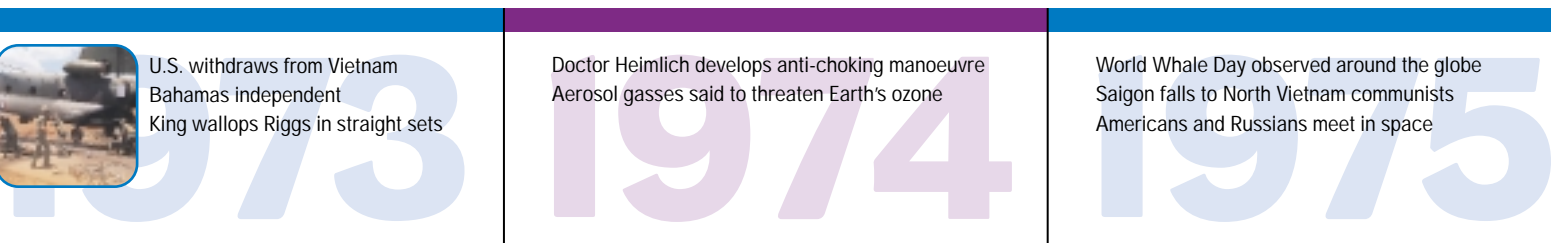


U.S. withdraws from Vietnam
Bahamas independent
King wallops Riggs in straight sets

Doctor Heimlich develops anti-choking manoeuvre
Aerosol gasses said to threaten Earth's ozone

World Whale Day observed around the globe
Saigon falls to North Vietnam communists
Americans and Russians meet in space

Halton/Getty / Liaison Agency



OUR PARTNERS

CARE CANADA AND THE MULTILATERALS

The UN family of specialized agencies includes the UN High Commissioner for Refugees (UNHCR), and the World Food Programme (WFP). CARE Canada enters into contracts with these agencies, in countries where it is the lead CARE member, for assistance to refugees and the delivery of food.

CARE Canada has a growing relationship with the World Bank and through CARE International with ECHO, the European Community's humanitarian assistance organization.

CORPORATE ADVISORY GROUP (QUÉBEC)

A group of Quebec-based professionals and business people have formed an advisory group to support CARE Canada activities and fundraising, particularly in the corporate world and with foundations.

PRESIDENT

Gilles Varin

Executive Vice-President Société immobilière Élan International

VICE-PRESIDENT

Céline Robitaille Lamarre, Ph.D.

Linguist, Administrator

FOUNDING MEMBERS

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Partner, Robinson, Sheppard, Shapiro Barristers & Solicitors

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Robert M. Vachon, Jr

President, Christie Group Ltd.

The Hon. Pierre H. Vincent

Tax Lawyer



Humans have wiped out 1% of all animal species since 1900
Devastating quake kills thousands in China
Viking 1 lands on Red Planet
Summer Olympics in Montreal



Roots draws largest TV audience ever
Treaty gives Panama control of canal in 1999
Nobel Peace Prize to Amnesty International

First test-tube baby born
Begin and Sadat win Peace Prize
Coca-Cola now in China

1978

OUR PARTNERS

OTHER INSTITUTIONAL PARTNERS

Canadian Council for International Co-operation (CCIC), Canadian Foodgrains Bank, Canadian Public Health Association, Centre d'étude et de coopération internationale (CECI), Christian Children's Fund of Canada, Department of Foreign Affairs and International Trade, European Union (DG-VIII), International Development Research Centre (IDRC), International Fund for Agricultural Development (IFAD), United Nations Children's Fund (UNICEF). The foreign assistance agencies of the governments of Denmark, Norway, the Netherlands and the United Kingdom.

1981

When CARE took over the management of relief operations in Somalia in 1981, its 35 years of experience proved invaluable. Not only did CARE have the expertise to coordinate the activities of many agencies; it also had the support of a loyal donor community around the world. In Canada, the generosity of individual donors was strengthened by the support of a handful of visionary foundations.

In 1999, that support was strengthened through generous—and increasing—contributions from the foundations whose names appear on Page 17 of this report. These organizations have given CARE reliable funding for ongoing programmes of considerable size, and have affirmed CARE's work as a critically important contribution that Canadians make to the world.

Among many, we wish to underline the exceptional contributions of the Marcelle et Jean Coutu Foundation, the Edward Assh Foundation and the EJLB Foundation.



Egypt and Israel sign peace treaty
Two hurricanes hit U.S. and Caribbean
Brezhnev, Carter sign SALT II pact



Rhodesia becomes Zimbabwe
Workers in Gdansk organize union
Mt. St. Helens erupts
Terry Fox begins his "Marathon of Hope" to raise money for cancer research



CARE takes over relief in Somalia
Iran releases hostages
Space shuttle Columbia completes first orbital flight
AIDS, a new plague, identified

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Cetnarski, Edmund
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Muriuki, Peter
Nip, Nelson
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Vineburg, Rubin

Canada adopts a new Constitution to replace the 1867
British North America Act
Global anti-nuke demonstrations
E.T. goes home... to the bank
Argentina invades Falklands



CARE FOR THE EARTH campaign protects
environment in developing countries
22 African nations face starvation
Lech Walesa gets Nobel Prize



Second-hand smoke linked to cancer
900,000 Filipinos march against Marcos

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At CARE Canada we value the support of each of our thousands of donors across the country. While many of those who contributed to CARE choose to remain anonymous, we would like to publicly thank all those who make possible the work that we do. This list represents only a few whose recent support has been significant.

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1985

One of the great lessons of development history is that the most enduring benefits come from teaching people the skills they need to improve their own situations. Since its beginnings in 1985, CARE Rural Maintenance Programme in Bangladesh has done just that. The Programme gives Bangladeshi women the opportunity to change their own lives by learning road maintenance skills, working for a regular salary, undertaking a savings programme, then developing small businesses that can sustain their incomes into the future.

The programme is an unqualified success on many levels. It helps destitute women—among the most vulnerable populations in Bangladesh. It offers income while building marketable skills. It increases confidence and self-esteem. And it helps tens of thousands every year. With programme graduates now numbering more than 100,000, the Rural Maintenance Programme is more than just aid; it is telling proof that development really works.



1985
 Gorbachev is new Soviet leader
 Teenagers "hack" into Pentagon computer
 Titanic wreck found after 73 years
 "Shamrock Summit" held in Québec City
 CARE Canada begins the Rural Maintenance Programme in Bangladesh

1986
 Challenger explodes; seven astronauts lost
 Chernobyl nuclear disaster worst in history
 CARE-sponsored solar-powered village water system is officially inaugurated.
 Vancouver hosts the World Exposition

1987
 First nuclear arms reduction treaty signed
 Market crash worse than '29
 Meech Lake Accord fails
 Canada introduces the "loonie"
 CARE helps half a million farmers in Chad

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1988

When CARE rallied to support victims of a devastating earthquake in Armenia in 1988, the response team knew that the 30,000 lifesaving food parcels were only a beginning. Every natural disaster has deep impact long after the event.

That lesson came home in 1999 when Hurricane Mitch made a whirlwind sweep through Central America, leaving massive flooding and devastation in its wake.

CARE partnered with local authorities and the international community to respond, reaching more than a million people and delivering nearly \$25 million in aid for the recovery effort. Families in Honduras, Nicaragua, El Salvador and Guatemala relied on CARE for food, clean water, shelter materials and basic medicines.

Once the emergency was over, those same families faced the task of rebuilding their lives. CARE has pledged to help the people of Central America recover from this terrible disaster and to turn Mitch from a tragedy into a catalyst for transformation, using the lessons of our development experience to help build more inclusive and responsive social organizations in the societies that suffered the devastation.



Canada, U.S. sign free-trade agreement
CARE aids victims of devastating earthquake in Armenia
15th Winter Olympics held in Calgary
Wayne Gretzky traded to the Los Angeles Kings



Berlin Wall demolished
14 women shot to death at the University of Montreal's school of engineering
Canada stops issuing one dollar bills

Nelson Mandela freed after 27 years
Iraq invades Kuwait
West and East Germany reunited
Hubble space telescope launched

1990


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Soviet Union breaks up
 Persian Gulf War ends
 Standoff between Mohawk Indians and
 security forces in Quebec

Formal end to Cold War declared
 The Toronto Blue Jays defeat the Atlanta Braves to
 win the World Series
 U.S. lifts trade sanctions against China
 CARE Canada begins the Skills and Resources for
 Community Productivity project in Kenya

South Africa adopts majority-rule constitution
 CARE Canada begins direct humanitarian aid in Bosnia

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In Burundi and Zaire, CARE Canada spearheads CARE International relief efforts for Rwandan refugees fleeing genocide



World's first cloned sheep
 CARE helps more than 800,000 farm families improve crop yields, plant trees, manage forests, irrigate land and conserve soil

France ends nuclear testing
 Germany observes first Holocaust Remembrance Day

1994

1995

1996

This year we are pleased to announce the formation of a new donor club, The Circle of Caring.

A planned gift through a bequest in your will, or through a gift of life insurance, a charitable remainder trust or a charitable gift annuity is an important and meaningful way of expressing support for CARE's work. By making a planned gift to CARE, you can help us continue to help those in need around the world.

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<i>Nanaimo, BC</i> | Ethel M. Walker
<i>Ottawa, ON</i> | Laura E. Wood
<i>Newdale, MB</i> |
| Eugène Bergeron
<i>Quebec, QC</i> | Jean Elizabeth Irving
<i>Hamilton, ON</i> | | |
| Edith A. Batson
<i>Toronto, ON</i> | Donald Le Quesne
<i>Pickering, ON</i> | | |
| Arthur Blyton
<i>Kitchener, ON</i> | Alice E. MacInnes
<i>Halifax, NS</i> | | |
| Marie Bourguignon
<i>Nepean, ON</i> | John McKague
<i>Cobourg, ON</i> | | |
| Gladys B. Boyd
<i>Ottawa, ON</i> | Raymond J. Moore
<i>Ottawa, ON</i> | | |
| Dorothy Brandt
<i>Hamilton, ON</i> | Audrey E. Morton
<i>Etobicoke, ON</i> | | |
| Elizabeth Colbourne
<i>Toronto, ON</i> | J. Harry O'Byrne
<i>Ottawa, ON</i> | | |
| Henry Milford Courtney
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<i>Toronto, ON</i> | | |
| Margaret Ann Cranston
<i>Winnipeg, MB</i> | Thomas Samuel Parkhouse
<i>Guelph, ON</i> | | |
| Maria Darja
<i>Saskatoon, SK</i> | Harry Charles Paterson
<i>Victoria, BC</i> | | |
| William T. Davies
<i>London, ON</i> | Ora J. Saunders
<i>Brampton, ON</i> | | |

1999

At the close of a century, CARE stands as one of the world's pre-eminent development agencies, working in a broad range of disciplines to help people survive—and prosper—all around the world. The work is made possible by the continuing generosity of Canadians, who since 1946 have proved eager to share what they have with others.

Many of today's regular contributors to CARE were themselves recipients of CARE aid in the past. Some have told us that their very lives had once depended upon the CARE packages sent to Europe by those in North America who knew they had an urgent and critical role to play.

For these, and for all of us in an ever-growing CARE family, this is the great lesson of history—that caring matters, and that helping others saves lives, then changes lives forever.



Hong Kong returns to Chinese rule
Mother Teresa dies
Princess Diana killed in car crash
James Cameron's "Titanic" unsinkable at the box office



Probe finds frozen water on moon
Arab-Israeli peace talks move forward
CARE Canada provides the necessities of life for victims of Hurricane Mitch

World awaits Y2K bug
CARE Canada implements a full-scale programme in Albania to assist refugees of the war in Kosovo
Once again, UN declares Canada to be "the best country on Earth in which to live."

FINANCIAL STATEMENTS

AUDITORS' REPORT TO THE DIRECTORS

We have audited the statement of financial position of CARE Canada as at June 30, 1999 and the statements of operations, changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of CARE Canada's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of CARE Canada as at June 30, 1999 and the results of its operations and its cash flows for the year then ended in accordance with generally accepted accounting principles.

KPMG LLP

Chartered Accountants
Ottawa, Canada
October 6, 1999

STATEMENT OF FINANCIAL POSITION

JUNE 30, 1999, WITH COMPARATIVE FIGURES FOR 1998

	1999	1998
ASSETS:		
Cash and short-term investments	\$ 21,442,307	\$ 13,209,675
Amounts receivable	3,769,542	1,547,716
Contributions receivable from donors	3,879,416	3,211,531
Project advances for field operations	3,196,161	7,397,837
Prepaid expenses	496,719	479,533
Capital assets (note 4)	262,869	147,802
	\$ 33,047,014	\$ 25,994,094
LIABILITIES AND NET ASSETS:		
Accounts payable and accrued liabilities	7,525,501	6,126,043
Programme advances from donors	22,605,972	17,371,965
	30,131,473	23,498,008
Funds held in trust (note 5)	229,794	219,486
Net assets:		
Unrestricted	2,422,878	2,128,798
Invested in capital assets (note 4)	262,869	147,802
	2,685,747	2,276,600
Commitments (note 8)		
	\$ 33,047,014	\$ 25,994,094

See accompanying notes to financial statements.

Approved by the Board:

Director



Director



FINANCIAL STATEMENTS

STATEMENT OF OPERATIONS

YEAR ENDED JUNE 30, 1999, WITH COMPARATIVE FIGURES FOR 1998

	1999	1998
SUPPORT AND REVENUE:		
Donations:		
Unrestricted	\$ 3,488,328	\$ 3,625,251
Restricted	242,225	128,019
Canadian Government (CIDA) contributions	24,111,013	15,948,494
Other contributions	50,362,941	40,593,291
Contributions-in-kind (note 6)	30,779,812	15,226,623
Provincial Government contributions	23,574	21,766
Interest income	468,453	260,191
Miscellaneous	1,054,784	792,786
	110,531,130	76,596,421
EXPENSES:		
Programme activities:		
Water and community health	16,749,907	17,286,917
Small enterprise development and income generation	12,705,142	8,290,194
Agroforestry and conservation	5,836,130	6,565,459
Contributions-in-kind (note 6)	30,779,812	15,226,623
Emergency assistance	40,830,246	25,478,493
	106,901,237	72,847,686
Membership in CARE International	198,408	191,262
	107,099,645	73,038,948
Support services:		
Management and general	1,936,891	2,805,096
Fund raising, public and donor relations	1,085,447	1,322,835
	3,022,338	4,127,931
	110,121,983	77,166,879
Excess (deficiency) of revenue over expenditures	\$ 409,147	(\$570,458)

See accompanying notes to financial statements

STATEMENT OF CHANGES IN NET ASSETS

YEAR ENDED JUNE 30, 1999, WITH COMPARATIVE FIGURES FOR 1998

	Unrestricted	Invested in capital assets	Total 1999	Total 1998
Net assets, beginning of year	\$ 2,128,798	\$ 147,802	\$ 2,276,600	\$ 2,847,058
Excess (deficiency) of revenue over expenditures	409,147	-	409,147	(570,458)
Acquisition of capital assets	(172,376)	172,376	-	-
Amortization of capital assets	57,309	(57,309)	-	-
	\$ 2,422,878	\$ 262,869	\$ 2,685,747	\$ 2,276,600

See accompanying notes to financial statements

FINANCIAL STATEMENTS

STATEMENT OF CASH FLOWS

YEAR ENDED JUNE 30, 1999, WITH COMPARATIVE FIGURES FOR 1998

	1999	1998
CASH PROVIDED BY (USED FOR):		
Operating activities:		
Excess (deficiency) of revenue over expenditures	\$ 409,147	\$ (570,458)
Items not involving cash:		
Amortization of capital assets	57,309	57,000
	<u>466,456</u>	<u>(513,458)</u>
Changes in non-cash working capital		
Decrease (increase) in amounts receivable	(2,221,826)	(244,499)
Decrease (increase) in contributions receivable from donors	(667,885)	2,036,914
Decrease (increase) in project advances for field operations	4,201,676	(7,229,172)
Decrease (increase) in prepaid expenses	(17,186)	(94,685)
Increase (decrease) in accounts payable and accrued liabilities	1,399,458	1,955,631
Increase (decrease) in programme advances from donors	5,234,007	8,353,345
	<u>7,928,244</u>	<u>4,777,534</u>
	<u>8,394,700</u>	<u>4,264,076</u>
Financing and investing activities:		
Acquisition of capital assets	(172,376)	(65,053)
Disposal of capital assets	-	53,838
Increase in funds held in trust	10,308	
	<u>(162,068)</u>	<u>(11,215)</u>
Increase in cash and short-term investments	8,232,632	4,252,861
Cash and short-term investments, beginning of year	13,209,675	8,956,814
Cash and short-term investments, end of year	<u>\$ 21,442,307</u>	<u>\$ 13,209,675</u>
Consisting of:		
Cash	8,710,282	9,368,351
Short-term investments	12,732,025	3,841,324
	<u>21,442,307</u>	<u>13,209,675</u>

See accompanying notes to financial statements.

1. DESCRIPTION

CARE Canada is an independent member of CARE International. CARE Canada was established in 1946 and incorporated under Part II of the Canada Corporations Act in 1977. CARE Canada is a non-profit, non-governmental organization in the field of relief, reconstruction and development in developing countries and is governed by a volunteer board of directors whose services are provided at no cost to the organization.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Financial statement presentation:

These financial statements include the assets and liabilities of CARE Canada's Canadian operations and the nine overseas Country Offices (Albania, Burundi, Cameroon, Croatia/Bosnia & Herzegovina, Cuba, Indonesia, Kenya, Zambia and Zimbabwe) for which it has responsibility, and expenses and revenues for which CARE Canada and its nine overseas Country Offices enter into contracts with donors for the funding of projects in various countries.

Contributions and donated services:

Grain and other contributions-in-kind received from multilateral donors, Government of Canada and other organizations are recorded as revenue and programme activity expenses at fair market value. Wherever government and local communities in countries in which CARE Canada operates contribute labour, services, transportation and storage facilities to various projects, the value of such contributions is not reflected in the financial statements because of the difficulty of measurement. Similarly, contributions by various media for public information and fund raising campaigns are not reflected in the financial statements because of the difficulty of measurement.

Expense allocation:

The majority of expenses can be directly identified with programme activities or support services and are charged accordingly. Certain support services have been allocated to programme activities.

Donor restricted funds:

Donor restricted funds are recorded as liabilities and subsequently transferred to revenue when such funds are utilized in accordance with donor restrictions.

Canadian Government (CIDA) and other contributions:

The Organization enters into contracts with the Canadian Government (CIDA) and other donors for the funding of projects in various countries. These funds are recorded as revenue in the statement of operations as related expenses are incurred. Any management fee that is applicable to the organization is recorded as revenue in the statement of operations in accordance with the terms in the individual contracts. Contributions received in excess of donors' share of funds expended in the current year for project activities represent unspent externally restricted contributions for expenditures in future years, and are shown in the statement of financial position as programme advances from donors. Any contributions expended in excess of the contributions received from the donors are shown in the statement of financial position as contributions receivable from donors.

Agricultural commodities:

The organization may receive funding to purchase commodities which when sold are designated for specific CARE project activities. The proceeds are recorded as programme advances from donors. Revenue and expense is recognized in the statement of operations as the funds are utilized in project activities.

Capital assets:

Equipment and leasehold improvements acquired for direct use in projects are expensed in the year of acquisition. Equipment and leasehold improvements that are not project specific are capitalized and amortized over their estimated useful life. Amortization is provided on a straight-line basis over the estimated useful lives as follows:

(Capital Assets - continued):

	Useful life
Buildings	15 years
Leasehold improvements	5 years
Furniture, fixtures and equipment	5 years
Office equipment	5 years
Computer hardware/software	3 years

Foreign currency translation:

Monetary assets and liabilities denominated in foreign currencies are translated into Canadian dollars at exchange rates in effect at the balance sheet date. All other assets and liabilities are translated at their historical rate. Revenue and expense items are translated using average rates for the periods covered by the contract. Any resulting foreign exchange gains or losses are charged to the project activities or administrative expenses as appropriate.

Use of estimates:

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Actual results could differ from those estimates.

3. CARE COUNTRY OFFICES ASSETS AND LIABILITIES:

Assets and liabilities located in countries outside of Canada and included in the statement of financial position at June 30 are as follows:

	1999	1998
Cash and short-term investments	\$ 13,112,949	\$ 10,044,873
Amounts receivable	2,028,942	1,462,846
Contributions receivable from donors	3,410,598	1,894,365
Prepaid expenses	496,719	457,484
Capital assets	121,878	147,802
	<u>\$ 19,171,086</u>	<u>\$ 14,007,370</u>
Accounts payable	\$ 6,407,748	\$ 5,080,924
Programme advances from donors	9,206,889	5,832,980
Advances - CARE Canada	3,556,449	3,093,466
	<u>\$ 19,171,086</u>	<u>\$ 14,007,370</u>

4. CAPITAL ASSETS:

	Cost	Accumulated amortization	1999 Net book value	1998 Net book value
Leasehold improvements	\$ 56,902	\$ 56,902	\$ -	\$ -
Building	223,476	111,731	111,745	127,572
Furniture and fixtures	543,025	543,025	-	-
Office equipment	274,583	264,450	10,133	20,230
Computer hardware/software	175,722	34,731	140,991	
	<u>\$ 1,273,708</u>	<u>\$ 1,010,839</u>	<u>\$ 262,869</u>	<u>\$ 147,802</u>

Cost and accumulated amortization at June 30, 1998 amount to \$1,101,332 and \$953,530 respectively.

5. FUNDS HELD IN TRUST:

The organization's funds held in trust consist of short term investments which are held in trust for the donors. Use of the investment income of \$10,925 (1998: \$11,526) earned on these investments has been restricted by the donors.

6. CONTRIBUTIONS-IN-KIND:

Included in this amount is \$12,665,347 (1998: \$13,708,582) of funds made available to the organization by the Government of Bangladesh. The Government of Canada donates grain to the Government of Bangladesh who sells the grain locally. Proceeds realized on the sale of grain are made available to the organization for use in project activities in Bangladesh.

7. LINE-OF-CREDIT:

An unsecured line-of-credit of \$2,000,000 is available for use by CARE Canada. Advances under the line-of-credit bear interest at the bank's prime rate and are repayable on demand. As at June 30, 1999, the line-of-credit was not being utilized by CARE Canada.

8. COMMITMENTS:**a) Leases**

CARE Canada is committed to payments under operating leases in Country Offices and in Canada expiring in 2003. Minimum annual payments for the next five years are approximately as follows:

	Country Offices	Canada	Total
2000	\$ 846,594	202,156	1,048,750
2001	\$ 130,693	216,625	347,318
2002	\$ 12,620	216,625	229,245
2003	\$ -	144,427	144,427
2004	\$ -	-	-

b) Letter of credit

A guaranteed letter of credit in the amount of \$441,900 has been assigned to the Canadian International Development Agency for the services and expenses relating to the Canadian Experts in Bosnia II project.

9. FINANCIAL INSTRUMENTS:

The carrying value of cash and short-term deposits, amounts receivable, contributions receivable from donors, project advances for field operations, accounts payable and accrued liabilities and programme advances from donors approximate their fair value due to the relatively short periods to maturity of these financial instruments.

10. COMPARATIVE FIGURES:

Certain of the 1998 comparative figures have been reclassified to conform with the financial statement presentation adopted in 1999.

11. UNCERTAINTY DUE TO THE YEAR 2000 ISSUE:

The Year 2000 Issue arises because many computerized systems use two digits rather than four to identify a year. Date-sensitive systems may recognize the year 2000 as 1900 or some other date, resulting in errors when information using year 2000 dates is processed. In addition, similar problems may arise in some systems which use certain dates in 1999 to represent something other than a date. The effects of the Year 2000 Issue may be experienced before, on or after January 1, 2000, and, if not addressed, the impact on the operations and financial reporting may range from minor errors to significant systems failure which could affect CARE Canada's ability to conduct normal business operations. It is not possible to be certain that all aspects of the Year 2000 Issue affecting CARE Canada, including those related to the efforts of customers, suppliers or other third parties, will be fully resolved.

IS MY DONATION ELIGIBLE FOR A TAX CREDIT?

Yes. All donations to CARE Canada are eligible for tax credit under registration number 11883 8333 RR0001.

CARE Canada is incorporated as a non-profit organization under charter granted by the Minister of Consumer and Corporate Affairs and has been granted tax-exempt status by the Minister of National Revenue. Registration Number 11883 8333 RR0001.

This Annual Report covers the period July 1, 1998-June 30, 1999. /Annual Report/, /CARE Canada/, /non-governmental organization/, /development/, /international development/, /Third World/, /emergency assistance.

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