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This year RDT celebrates its 50th year in India. 50 years of turning hopelessness and despair into dignity, change and equality.

Vicente and I reached Anantapur in 1969 with no funds, no organisation and no team. We were four people. I was 21 years old, a young journalist living in Mumbai along with Vicente Ferrer and two volunteers from his previous place of work in Maharashtra.

Many people have asked me over the years why we left everything behind and came with Vicente to work in Anantapur. Vicente had a powerful conviction, a very clear vision and he never had a doubt about it. He inspired me, and in the years that followed he inspired many others of the following:

Firstly, that the eradication of extreme poverty and suffering in the world is not a dream. It is an achievable goal. Secondly, that we cannot leave this eradication of extreme poverty only to the Government and big institutions. Each of us plays a role in it.

As Vicente once said “As long as there is suffering in the world, RDT will continue working”, and that is exactly what we have been doing for the last years, and especially during the recent COVID-19 outbreak.

Every obstacle, every calamity, every crisis contains in itself an opportunity for greater solidarity, empathy and understanding in the world. This crisis definitely contains the seed of a new future, we have to water it and take care of it. We have to go forward with strength and faith that together we can make a better world.

ANNE FERRER
This year, 2019, has been a milestone for us. Rural Development Trust (RDT) completed 50 years in Anantapur. The organisation was founded in 1969 with the vision that, together with the people, we can bring a change in the lives of the poor by providing them with the tools and resources to make a dignified life for themselves – a goal that we strongly believe in and continue to pursue.

We can proudly say that we have made it happen, thanks to the trust and help given by our supporters, the communities we work with, the Government and other institutions. Apart from celebrating the achievements, the 50th anniversary has brought us great motivation to introspect and to find ways to adapt and to keep improving as an organisation.

From our little corner in Anantapur district, we will continue to work to achieve global challenges. The future of RDT is outlined in three major directions: creating bridges of solidarity and mutual support among people, institutions and corporates, promoting equal opportunities for all along with the eradication of gender discrimination, and last but not the least, addressing the need to take care of our environment. Humanity can no longer ignore our planet’s desperate call.

This recent unprecedented global pandemic has shaken our entire lives and I would like to take a moment to thank all the frontliners and essential workers who have been tirelessly working at the frontline to save our lives and to keep us all safe. It has been a very challenging year, but it has reaffirmed something that we already knew: we cannot move forward if we do not do it collectively.

Moncho Ferrer
RDT aims to tackle poverty, suffering and inequality in its diverse manifestations. Our programmes in multiple sectors are implemented in over 3,755 villages.

Through the process local leadership is promoted to ensure that communities are the main actors in their own development.
MISSION
Empowering rural communities in India and supporting them in their struggle to eradicate poverty, suffering and injustice.

VISION
A caring, just and equitable society

DHARMA
Concern for others
Work beyond duty
Pursuit of excellence
Reaching as many poor as possible

WHERE WE WORK

Andhra Pradesh
- Ananthapuramu
- Kurnool
- Prakasam
- Guntur
- Nellore
- Vijaywada

Telangana
- Bhoopalpalli
- Nagar Kurnool
- Nalagonda
Sustainable Development demands the active engagement of various stakeholders in society. RDT acts as a ‘facilitator’ between these different stakeholders.

Supporting the government in implementing different schemes and policies and assisting the communities to access them.

Engaging with citizens and institutions in India and abroad to promote solidarity and thereby supplement the efforts of RDT.

Developing strategies to align the needs of the communities with the CSR objectives of our corporate partners to leverage impact.

Facilitating the formation of community-based organisations to enable the community to be the driving force in their development.

Rural Development Trust (RDT)
OUR IMPACT

2019-2020

3,755 villages covered under RDT’s programmes
1,73,086 children’s education supported and followed through
3,454 houses built for families with limited or no resources
5,09,892 saplings distributed to farmers to improve their income
100% enrolment at the primary level across project regions

93,829 women empowering themselves and others in sanghams
1,22,936 people received awareness in general health camps
33,336 PWDs creating a supportive network through vikalangula sanghams
26,751 people actively involved and participating in the CDCs.
8,97,888 visits received for medical attention by the hospital network

Recognitions received
“Ignacio Ellacuria de Cooperación 2019” award by the Government of Basque Country, Spain to Anne Ferrer. (February, 2020)
“Eenadu Vasundara Mahila” award in the Best Social Work 2020 category in Hyderabad to Anne Ferrer. (March 2020)
Our Work

We conduct robust, well-entrenched projects designed to ensure access to quality education, primary and hospital healthcare, sustainable livelihoods for the families in the region, housing and basic services; to support the empowerment of women, people with disabilities and tribal communities, and to unleash the full potential of future generations through culture and sports.
WOMEN EMPOWERMENT

WORKING TOWARDS A GENDER EQUAL SOCIETY

© Albert Uriach/RDT
1 out of 3 women worldwide have experienced gender violence in their lifetime, 38.5% of women in rural India are illiterate and more than 50% of them suffer chronic anaemia. Patriarchy oppresses more than half the population worldwide, and although gender-based discrimination affects men and women, most of its victims are women and girls.

RDT’s approach is based on the promotion and support of Women Self-help groups as an essential tool, not only to strengthen women’s voices, prompting their empowerment and independence at the individual and collective level, but also to challenge the deeply rooted patriarchal values. We also promote the engagement of adolescents (girls and boys) and men through awareness campaigns and workshops to achieve a more gender equal society.

**Economic independence and access to property**

Access to sustainable livelihoods and to economic resources encourages women’s self-employment thereby leading to their autonomy. In the reported year RDT supported women Self-Help Groups wherein 46,267 women have benefited from RDT’s income generation programmes and health interventions. Moreover, this year, the 1,358 women who enrolled in our various skill training programmes have been employed. In order to increase their social status within the community and secure their future, RDT has also assessed 4,014 women to obtain property land rights.

**Standing together for equality**

As one of the UN Sustainable Development Goals, providing women and girls living in vulnerable situations with tools to develop their leadership skills and ensuring access to education is essential for achieving gender equality. During 2019-2020, over 14,184 women have joined the Women Sangham Network group, a secondary level grassroots organization; and 7,776 Sangham leaders have attended leadership training programmes. A total of 167 workshops about girls’ education and women’s rights were conducted for adolescents (boys and girls) in the villages.

**Society free of violence and gender discrimination**

Through its 8 counselling centers RDT has supported 1,838 people who underwent gender violence situations, contributing to break the silence surrounding this issue. Similarly, 30 girls and women in distress were given assistance at RDT’s Shelter Home where they were not only provided accommodation and food but also given access to vocational training, formal education and psychological support.

**Stepping into the public sphere**

Over 21,985 people (women & men) participated together on Women’s International Day, 8th of March, in over 264 villages across Anantapur and Kurnool district for the eradication of violence against women and to stop child marriages. Up to 12,046 men and women also participated on 25th of November, International day for the Elimination of Violence against Women. Sangham members prepared the materials and role plays for the occasion in coordination with the local district authorities.
Saraswathi was only 17 years old when she was married and by the age of 26 had become a widow with three daughters (4, 6 and 10 years old) to care for. Ostracised by her neighbours and her in-laws, she decided to move back to her parents’ place. Shortly after, in 2019, she joined RDT Women Sangham, a “place of mutual help and support” as she defines it. “I realised that if we share our problems and thoughts they become easier to handle. I am learning something in every meeting and I am becoming more confident about the future, both for myself and my daughters”, she points out.

This year Saraswathi joined the 8th of March celebrations in Bathalapalli, the mandal headquarter, for the first time in her life. “At first I was surprised to see so many women getting together for such an occasion, but it has given me a lot of strength and motivation. I had a lot of fun!”, she remarks.
DISABILITY INCLUSIVE DEVELOPMENT

ENSURING EQUAL OPPORTUNITIES AND RIGHTS FOR PERSONS WITH DISABILITIES.

©Pablo Lasaosa/RDT
There are over 26.8 million people with disabilities (PWDs) living in India according to the 2011 census data. The barriers they face are not just physical but also systemic and attitudinal. Due to lack of awareness, especially in rural areas, PWDs are considered to be a liability which often results in medical neglect and discrimination.

Since the late 80s, we have been focusing on facilitating their access to rehabilitation, government resources and education, which will enable them to be self-reliant and assert their rights. Parallelly, we are committed to changing people’s attitudes and eradicate the stigma associated with disabilities.

**Special and Inclusive Education**

Education plays a vital role in enabling people with disabilities become self-reliant. 805 children with and without disabilities are pursuing formal education in 8 inclusive centres while 536 children are in 8 special centres that combine education along with rehabilitation, mainly for intellectual disabilities and cerebral palsy. They are encouraged to participate in various sports and cultural activities to enhance their capabilities. Additionally, 6,384 children with disabilities were provided with assistance at different levels, including professional and technical courses.

**Health and Medical Rehabilitation**

Timely medical care can significantly improve the quality of life for PWDs. Through our Hospital network we identify disabilities in infants and also in adults, and conduct surgeries. 3,532 children up to 6 years were provided therapy through our Early Intervention programme (at the field and hospital level). Also, out of 841 PWDs who attended screening camps organised by RDT, 267 were identified for corrective surgeries. With the aim of increasing independence, our orthopaedic workshops fabricated and delivered 4,624 aids and appliances for PWDs.

**Economic Empowerment**

Financial security paves the way to independence and self-confidence. For this, 638 youth with disabilities were trained in English, vocational and soft skills in order to help them secure jobs in retail and corporate sector while 85 youth studied at the Professional School of Languages to enhance their employability. Also, 1,965 PWDs have taken loans from fund and mini-banks operated through sanghams for income-generation activities. Another essential aspect is to mobilise government resources, like job cards, medical certificates, scholarships, government land sites, etc.

**Social Empowerment**

In order to foster independence and create a network of support, PWDs are part of 2,772 Vikalangula Sanghams, which focuses on awareness, resource mobilization and rights. Out of these, 1,981 people are part of mandal samakhyas to represent the group’s issues at the block and district level. To further the empowerment of PWDs from a young age, RDT runs the only Special Olympics Training centre in Andhra Pradesh where over 40 teens are trained in sports as well as in learning life and vocational skills.

*This project is implemented in partnership with Association of People with Disability and Youth4Jobs

**Professional School of Foreign Languages is run by our local implementing partner, Rayalaseema Development Trust**
CELEBRATING DIFFERENCES, STRENGTHENING INCLUSION

For the first time RDT organised Srujana, a cultural festival exclusively for children with intellectual disabilities and cerebral palsy in January, 2020. 168 children from nine RDT centres participated in different categories like singing and dance, including two wheelchair dance performances and a free dance section for all children to perform together.

“We follow special techniques like gestures and colourful lights and follow-up with them throughout practice. Their perseverance and desire for learning is admirable,” says Lalitha, RDT cultural organiser who trains children with and without disabilities.

“I am very happy to be a part of this event. My favourite hero is Ramcharan and I want to dance like him,” says Mahesh, 12, who lives in the Centre for Intellectual Disabilities, in Urvakonda and participated in the solo dance and free dance categories.
COMMUNITY HEALTH

PROMOTING HEALTH AND WELL-BEING IN RURAL AREAS
Women’s Health
Adolescent girls and women in rural areas lack awareness related to their health and are at a greater risk of malnutrition and chronic illnesses. 524 awareness workshops were conducted in schools and villages for adolescent girls on menstruation, diet, consequences of early marriages, and to tackle the widespread prevalence of anemia. 966 risk pregnancies were detected and referred to hospitals by CHWs, who provide antenatal check-ups to promote institutional deliveries and awareness on family planning and reproductive healthcare.

Awareness and Capacity Building
Lack of awareness aggravates health problems in rural communities who tend to rely on home remedies and believe in superstitions. RDT bridges this gap in awareness through a network of Community Health Workers (CHWs) and Health Organisers (HOs). 3,794 awareness camps were mainly organised in different villages by 929 CHWs, covering topics like gender, personal hygiene, STDs, gynaecological issues, sanitation, seasonal and chronic diseases, immunisation, etc. They also provide knowledge on how to access government health benefits and schemes.

HIV/TB Awareness and Counselling
Apart from awareness imparted through camps in villages, HOs follow-up with HIV/TB patients to ensure they adhere to their medication, under the supervision of medical staff from our Hospital for Infectious Diseases. 369 infected and affected widows participated in the self-helps groups where they can have access to awareness and counseling services, RDT loans and funds as well as to Government resources. Up to 159 children living with HIV/AIDS stay in two special residential centers that provide them with healthcare, education and psychosocial support.

Improve Nutrition in Vulnerable Population
Lack of knowledge and resources causes many families to follow poor dietary habits. Because of this, people are more prone to undernutrition and illnesses, especially women and children. 1,510 nutrition centres are run by CHWs in different villages mainly addressing the needs of children below five years, antenatal women as well as new mothers and elderly people lacking family support and/or suffering from chronic diseases. The CHWs record the weights of children and mothers once a month in sample locations on specific dates.
BREAKING TABOOS, REGAINING HEALTH

Lack of knowledge about their own bodies leaves adolescent girls, especially in rural areas in a vulnerable position. The Community Health sector tackles this by organising workshops for adolescent girls on nutrition, sexuality and hygiene in schools and villages.

In these workshops a team of nurses conduct check-ups for all attendees: weight, height and haemoglobin count to detect cases of anaemia. Why? Because 49% of women in the Anantapur district suffer from this illness, which affects menstruation and induces weakness, pale skin, headaches, chest pain, dizziness, etc. It can also cause complications for pregnant women. Iron pills and folic acid are given to those who are severely anaemic.

The workshops are organised three times throughout the course for follow-up. They also become a safe space to discuss about education and queries that adolescents are hesitant to ask their parents.

©RDT
RURAL HOSPITALS.

MAKING ACCESSIBLE, AFFORDABLE AND QUALITY HEALTHCARE A REALITY FOR ALL
In India, 75% of the healthcare infrastructure, including medical professionals, is concentrated in urban areas where only 27% of the total Indian population lives. The remaining 73% of the population lacks adequate medical facilities. To address this gap, in 1978 RDT started its first rural clinic and later expanded the hospital network, which now includes multiple specialties.

The challenge here is not just to provide quality healthcare that is accessible to the rural population but also to debunk myths that affects their health and to make them aware of the importance of not neglecting early symptoms of illnesses.

RDT General Hospitals
RDT runs 2 secondary-level hospitals at Bathalapalli* and Kalyandurg and a primary-level hospital at Kanekal** to provide quality healthcare to the rural population. During the reported year, 46,522 hospital admissions were accepted. Special attention is given to the health of women, children and people with disabilities. 14,017 women were assisted with institutional deliveries and 2,574 neonates were looked after in the Neonatal Intensive Care Unit (NICU). The orthopaedics and traumatology department received 24,339 visits this year.

Hospital for Infectious Diseases (HID)
To tackle the burden and stigma associated with HIV and TB, the HID acts as a referral centre in the region and for six districts. 5,772 hospitalisations were accepted for the reported year. 2,464 TB patients are registered in this centre while out of 7,489 HIV patients registered for ART (Antiretroviral Therapy), 672 patients receive second-line of ART with a 95.68% adherence rate. The mycobacteriology lab also acts as reference nodal centre of the government for TB.

Rural and Mobile Clinics
In a country where the rural population has to walk for many kilometres and spend a considerable part of their income to access medical facilities, rural clinics become essential. To make basic healthcare affordable and accessible, RDT runs 6 rural clinics which collectively received 1,33,466 medical visits in the reported year. RDT also runs two mobile clinics and a rural clinic in Manuru, located in Srisailam forest, and which focuses on awareness along with basic health care for tribal communities, specially the Chenchus tribal community.

Referrals and Follow-up Care
The concentration of multi-specialised centres in urban areas puts the rural population at risk. For this, RDT Hospital Network concerns itself with diagnosis of patients to refer them to the appropriate local specialists or higher institutions in nearby cities like Hyderabad or Bangalore. In cases of need, they are also provided with financial assistance. This year, 1,712 patients were referred to local specialists while 1,552 patients were referred to higher institutions in the reported year.

*Accredited hospital under the Dr. YSR Aarogyasri health scheme by the Government of Andhra Pradesh on 25th June
**Kanekal Hospital is managed by our local partner Women Development Trust
A TOUGH BATTLE FOR LIFE

“The body pain was so unbearable that I preferred death,” expresses Nageshwara, who has been fighting tuberculosis for the last three years. This has had fatal consequences for his health and also for his family’s financial situation as they are daily wagers.

After years of paying thousands at different hospitals through loans and being misdiagnosed, he arrived at HID. Due to the delay in the diagnosis, incorrect treatments and poor adherence to medicines, what was initially a common TB developed in extreme drug-resistant (XDR) tuberculosis.

“I am regaining my strength slowly,” says Nageshwara, who has difficulties getting up but remains hopeful. Dr. Jaya, who is treating him, is also optimistic but with caution. “People suffering from drug-resistant TB must adhere to treatment for at least one year and it takes two years to determine if the disease has been eradicated.”
ECOLOGY AND SUSTAINABLE LIVELIHOODS

PRESERVING THE ENVIRONMENT FOR A BETTER TOMORROW.
India is considered to be the fifth most vulnerable country to climate change. In Ananthapuramu district (AP), where 75% of the population live in rural areas and 80% of all workers are engaged in agriculture, this poses a direct threat to the survival of thousands who depend on the weather conditions and water availability. Due to the lack of rain and its changing pattern (average annual rainfall of 535mm) as well as a waning forest cover, the ground water has been depleting year after year in the district, forcing thousands into seasonal migration or into leaving the lands uncultivated.

**Water preservation and responsible consumption**

Through the construction of 13 percolation tanks and 20 check dams, we promote the conservation of rainwater for domestic consumption as well as for crops and to grow fodder for the cattle. The construction of these infrastructures is done in co-ordination with the 179 Ecology Development Committees and carried out by locally available masons and materials. With RDT’s support, during 2019-2020, up to 2,253 farmers from Rayalaseema area shifted to drip and micro irrigation systems.

**Environment regeneration activities**

Anantapur district’s forest and tree cover is at about 13.5%, still far from the country’s forest policy targeted at 33%. Afforestation and conservation offer watershed protection, prevent soil erosion and mitigate climate change. For this purpose, 4,03,247 plants have been dibbled this year for afforestation purposes through a massive plantation campaign. An awareness campaign was conducted through the celebration of international days and essay competitions for children in the villages.

**Agriculture, food security and diversified livelihoods**

In order to promote food security, reduce rural migration and ensure economic stability for the families living in rural areas, RDT supports farmers to access diversified livelihoods programmes and promotes crop diversification and rotation. During 2019-2020, 1,555 farmers shifted from groundnut mono cropping to diversified crops, 1,157 women farmers joined our livelihoods program and 4,08,737 fruit trees were distributed with a double goal: to generate permanent income and to contribute to fight global warming.

**Land Development**

RDT supports farmers to carry out land development activities to prevent soil erosion and to increase its fertility. During 2019-2020, 1,433 families completed the boulder clearance in 5,942 acres in 28 villages while 625 farmers have been actively involved in border bunds tasks and 390 farmers have used tank silt application in 1,388 acres of land. All these activities are necessary to protect the top soil of the land, increase its water retaining capacity and improve its productivity.
WATER IS LIFE

For the 400 inhabitants of Obaganippalli, the lack of water had become a chronic problem. “No crops were growing and families migrated,” says Padmavathi, a resident of the village. “We approached RDT and they supplied water tanks and fodder for 2 months, but most importantly, they encouraged us to form an Ecology Development Committee,” she explains. The 18 selected members of the committee, belonging to different communities and with the guidance of RDT staff, chose the location to build 7 RWHS. 165 out of the 180 bore wells were recharged, providing irrigation to over 900 acres.

“The water brought the village back to life, the productivity and diversity of crops improved and the amount of cattle increased,” shares Dhanunjaha, member of the committee. “RDT has given us the knowledge to solve our own problems and to take care of the natural resources.”
STRENGTHENING ACCESS TO BASIC SERVICES AND DIGNIFIED SHELTER.
Rural Infrastructure
We partner with communities to increase their asset base, by providing them with the infrastructure that they lack and/or the resources to build them. 3,326 women and 234 people with disabilities have ownership of the houses that were constructed by RDT in the reported year. 25 supplementary schools-cum-community centers were also constructed, which became community assets and are used as tuition schools for children and a space to conduct meetings and to organise gatherings for the village.

Water and Sanitation
Lack of clean drinking water as well as sanitation facilities is a gateway for the transmission of different diseases in the community. To promote hygiene, health and overall well-being of individuals and communities even in the remotest areas, RDT constructs and facilitates access to pipelines and storage tanks. 28 Reverse Osmosis Plants were installed to provide potable water in villages. 111 awareness sessions on importance of hygiene and sanitation were conducted in villages.

Public Utility Buildings
We assist the government in expanding public facilities by undertaking repairing works or by building new structures which improves the infrastructure available to the rural population. These include electrification, village roads and causeways, laboratories, classrooms, toilets and compound walls for educational institutions. 10 government schools and colleges were assisted through the construction of new classrooms. RDT also constructed an anganwadi centre in collaboration with an Australian NGO, The Anganwadi Project, which constructs anganwadis all over India.

RDT Infrastructure
RDT’s growth over the years, both in terms of staff as well as the reach has been accompanied by infrastructure needs. RDT undertakes the construction of offices, field offices, meeting halls and staff quarters for effective functioning of projects at the grassroot level. To carry out programmes in different areas of development and to provide services to rural people, the habitat sector undertakes the construction of hospital facilities, water bodies, residential centers and schools, skill centres, orphanages, sports amenities, etc.

According to official figures, 13.20 million households in India are in dilapidated conditions. Housing not only provides security but is also an asset that gives families the confidence to build their lives.

RDT believes that individual and collective asset ownership is instrumental in bridging social disparity arising from lack of resources. Hence, RDT works on increasing access to safe and secure habitable environments and community infrastructure that contributes towards breaking the cycle of poverty for the rural population. Many of the sector’s projects are developed along with the Government, or under existing public schemes and campaigns.
AN ABODE OF SECURITY AND HAPPINESS

“Nobody came to meet us earlier, but now everybody, especially our relatives respect us and treat us as equals. The discrimination has stopped,” says 30-year old Ramu, who used to live with his wife and two children in a latrine.

Ramu and Lakshmi work as farmers in their one acre of land and as daily labourers in others’ fields, but they never had the resources to build a place they lovingly called home or had a bathroom and toilet. “Our new house has wide rooms in which the children can study and rest, and also shelves and a toilet that we can freely use. We don’t have to worry about insects, men or bad weather. We feel proud to invite our friends and relatives over. We can begin to build our lives as a family in this new house,” explains Lakshmi.
EDUCATION FOR TRANSFORMATION
SECURING FUTURE OPPORTUNITIES FOR ALL CHILDREN

©Barbara Mompo/RDT
The global challenge for education is not just about providing access, but also about ensuring quality and equal opportunities. More than 27% of the country’s youth are excluded from education, employment or training, and this number is exacerbated in rural areas of the country due to limited access, lack of facilities and connectivity problems.

Aligning our objectives with the SDGs, we work to bridge gaps between primary, higher and technical education through direct initiatives and by supporting the Government and community-based organisations. We are proud to state that we have achieved 100% enrolment at the primary level across over 3,000 villages we work in.

**Partnering with the Government**

RDT acts as a facilitator, supporting the public schools’ network by improving their infrastructure (check Habitat sector for more information) as well as by assisting them with materials (sports kits and lab material), spreading awareness and promoting extracurricular activities. This year, RDT Education staff conducted awareness workshops in 302 High Schools about the value of education, the consequences of dropping out and the risks of early marriages, and motivated 75 schools and 749 children to engage and organise activities related to the preservation of the environment.

**Access to quality employment**

Our General Support Programme and the Special Scholarship Programme has contributed to transforming the lives of 17,682 youths from disadvantaged communities (46% girls) by supporting their access to graduation, post-graduation and technical education, often in premier institutions across India. The Professional School of Foreign Languages*, located at four different locations and offering two different curriculums, has also contributed in tackling youth unemployment in rural areas, as 92% of the students secure jobs shortly after completing the one-year course.

**Promoting quality education for all**

1,279 tuition centres across Anantapur and Kurnool districts are currently providing supplementary education to children from vulnerable communities for classes I to V. These centres are chiefly run by the Community Development Committees, which mostly assume the maintenance cost and the salaries of the Community-Based teacher. To ensure that every child has the best possible access to formal education, we distributed 6,781 bicycles, school materials to 64,393 children and up to 74,614 uniforms during the reported year.

**Holistic approach in education**

Providing opportunities for children to participate in sports and artistic activities, regardless of their gender or economic and social background is essential for their holistic development. RDT started conducting cultural activities in 1978 and since then, they have become an integral part of all our programmes with children. We conducted over 197 cultural programmes at the villages during 2019-2020 and 228 children (57% girls) took part in RDT’s Annual Arts and Quiz Festival.

*Professional Schools of Foreign Languages are run by our local implementing partner Rayalaseema Development Trust*
Manasa (13) and her friends from Ramapuram, Kosigi mandal, are very excited because of the Mobile Library visits to the village, which takes place 2 to 3 times per month. On those days she and her friends run to the meeting point of the village, under the tamarind tree, where the friendly librarian awaits them. "I like to come here with my friends to read and watch videos. It is nice to see people from all ages approaching the van, even some of the elderly from the villages come here to learn how to read and write," explains Manasa.

The Mobile Library Project (Sanchara Grandhalayam) aims to inculcate the habit and joy of reading to the youth, motivate illiterate adults to learn to read as well as to write. It has become a useful tool to bridge the digital literacy gap. The two mobile libraries regularly visit 32 villages and dozens of Government High Schools throughout the Adoni Region (Kurnool district), reaching out to hundreds of people.
SPORTS FOR DEVELOPMENT
UNLEASHING THE FULL POTENTIAL OF RURAL CHILDREN AND YOUTH

©Ernest Abhishek/ASA
Development Centres

These centres were created as additional hubs to provide structured support and to hone the skills of talented children identified at the grassroot level in various locations. Currently, four development centres** with well-maintained infrastructure and indoor facilities are run for cricket, football, hockey, kabaddi and tennis. Children here are trained by full-time coaches and are provided with training gear and equipment, supplementary nutrition that aligns with their training needs and educational support including daily computer and English classes.

Grassroots Programmes

Following a pyramid approach, ASA’s grassroots programmes provide regular and sustainable access to participation in sport through village and mandal clubs, sub-centres and government schools. 96 centres cater up to 6 sporting disciplines: cricket, football, hockey, judo, kabaddi and kho-kho. Children who participate in grassroots programs are provided with regular sport sessions for 6 days a week, training gear and kits, access to grounds as well as coaches who are trained and supported by RDT.

Anantapur Sports Village (ASV)

This day-boarding and full-time residential academy aims to nurture talented and motivated athletes by providing access to professional sports infrastructure, training and education to succeed at professional levels. Student-athletes are trained in one of the seven sports like cricket, hockey, football, judo, tennis, softball, kabaddi and kho kho and are provided with accommodation, food, educational support and guidance to apply for scholarships and jobs as well as federations and academies at the state and national level.

Besides improving well-being and overall confidence, sports can be an effective tool in bridging gaps as it cuts across hierarchies and economic, cultural and social barriers.

RDT is aware that sports can greatly contribute towards socio-educational development and also can improve career prospects for many. Given the urban-rural divide, the initiatives of RDT and the Anantapur Sports Academy’s (ASA)* are implemented to create access to the best possible sports infrastructure, as well as to educate and empower children and youth, especially girls and people with disabilities, as a way of bridging gaps and ending discrimination at all levels.

Nadal Educational and Tennis School (NETS)

This project, carried out in partnership with Fundación Rafa Nadal, is a non-residential centre which offers professional tennis coaching, training materials, nutrition, daily computer and English classes to children as young as 6. Beside this, bi-annual health check-ups are conducted to ensure that no health issues are neglected. Currently, 263 children including 83 girls are trained by NETS in a sport that was thought to be beyond rural children’s access until a few years ago.

* RDT carries out most of the sports programme through ASA which is part of our local implementing partner, Rayalaseema Development Trust, except for NETS, which is directly run by RDT.

** In Bathalapalli, Atmakur, Dharmavaram and NETS in Anantapur.
“When I play tennis I feel everything is possible,” exclaims Ganesh. “I feel lucky to be a part of this team,” adds D. Sirisha. They are among the 10 children with physical disabilities selected to be part of the first batch of RDT wheelchair tennis players.

This programme started in June 2019** and since then, these athletes have been training twice a week and practising special exercises every morning to strengthen their upper limbs.

“These children’s progress has been radical - not only physically but also socially and emotionally. Before they used to wait outside the court. Now they go inside eagerly to start and are not shy of anything or anyone. We plan to enroll them in national and international competitions over a period of time,” explains Dasarath Ramadu, Director of Disability Inclusive Development at RDT.

**This programme is carried out in partnership with the Indian Wheelchair Tennis Tour (IWTT), Bangalore and Astha, an NGO working for the empowerment of PWDs.
In 2019, RDT celebrated 50 years of its existence in India. 50 years of turning hopelessness and despair into dignity, change and equality.

Anne and Vicente Ferrer arrived in Anantapur in 1969 with a vision of reducing inequalities and creating a caring and just society. Today, we are a passionate and dedicated team working towards the development of the land and the people.

This is how we commemorated this special occasion:

**Dignity Change Equality - A special motto for a special year**

After some serious brainstorming, it was decided that 'Dignity Change Equality' was the motto that more accurately summarized our philosophy and our work through these years. It was incorporated in our official logo and was used on signboards, stationery, RDT vehicles, publications, etc. All this creative process was done in collaboration with Ms. Meetu Grover and Mr. Salil Sakhalkar, communications and design consultants.

**Postcards of hope - Voices from the grassroots**

We distributed around 14,000 postcards to the families and around the villages that we have been working with as a medium through which we could listen to what the communities have to say and use it to guide us in our way forward.

**Parivarthana - Our story**

Produced by RDT with technical assistance from the Delhi-based company “Black Ticket Films”, this 9-minute documentary showcases the journey of MMHalli, one of the villages where RDT initially began working in. It encapsulated the realities that is reflected across thousands of villages that RDT has been working with.

"As a child, my parents refused to send me to school because to them girls were to be married and sent away. My brother's constant support and assistance from RDT made it possible for me to be the first woman with a university degree in my region"

Adilakshmi,
Librarian at Anantapur Public Library

**Handmade diaries - A souvenir of life-changing testimonies**

With the support of over 120 artisans from IDT Handicraft centres, we produced over 3,000 diaries to be distributed among our staff and well-wishers. Each page has reflective words from the communities about RDTs work and testimonies of their own progress over the last 50 years.

©Ramamohan/RDT

©Cristofol Oliver/RDT

©Cristofol Oliver/RDT

©Ramamohan/RDT
Since the COVID-19 outbreak in India, RDT started working as a single unit using all its resources and expertise to contain and fight this pandemic. The situation demanded from the organisation and individuals to push beyond our capacities to minimize the impact of this pandemic on the most vulnerable.

Following the guidelines of the Government and local authorities and keeping people’s needs in mind, RDT worked in four main areas*:

Healthcare facilities
RDT Bathalapalli Hospital and its Mycobacteriology lab appointed as COVID-19 Centre and testing lab by the district authorities (April 2020).
RDT Kalyandurg Hospital remained open to ensure access to healthcare, especially for women and children.

Production of preventive materials
Over 5,000 local tailors and artisans involved in the production of fabric facemasks to be distributed among the communities and frontliners.

Awareness at the grassroots
Role plays were conducted, along with the distribution of pamphlets and posters in all villages.

Food distribution
Cooked meals and basic food provisions provided to migrants and jobless daily wagers.

*The information contained in this page refers to the work done from March 2020 onwards.
AUM 2020

128 runners assembled at the RDT Main Office in Ananthapuramu on Friday, 24th January 2020 and reached the finishing line on 25th January, 2020 to conclude the fifth edition of the Anantapur Ultramarathon (AUM) at RDT Hospital premises, Bathalapalli. It is the annual fundraising event of RDT that kicked off the 50th anniversary celebrations in 2019.

The runners covered a distance of 170 KMs, in teams of four, through the villages and scenic countryside of Ananthapuramu to enable 39 families in Srisailam to improve their living conditions, a challenge that they successfully accomplished before their run! Additionally, 130 runners participated in the Anantapur 10K, which started at the resting place of Vicente Ferrer in RDT Hospital in Bathalapalli and concluded along with the ultrarunners.

INDIA FOR INDIA

The humble initiative that started in 2012 by people in the villages under the slogan, “Spandinchu Sayam Andinchu” (Let your hearts respond and hands help) has now spread to towns and even cities well outside our project areas and has even incorporated a monthly payroll programme.

The aim is to mobilise citizens and institutions in India to fight poverty and eradicate suffering and by doing so, supplementing and fostering the efforts of RDT.

1,62,567 hundis, kept by people all year round, were broken on 19th April 2019 like every year to commemorate the birth anniversary of Vicente Ferrer, RDT’s Founder. The proceeds from the communities, were donated to RDT’s programmes for education for orphaned children and supplementary nutrition.
GOVERNANCE

Board of Trustees

Mr. M. Thippeswamy
Chairperson

Dr. Y.V. Malla Reddy
Trustee

Mr. Sahadev Shetty
Trustee

Ms. Eli Jessintha
Trustee

Mr. Moncho Ferrer
Trustee

Management
Ms. Anne Ferrer, Executive Director
Mr. Moncho Ferrer, Programme Director

Women core team
Platform for women at all levels in the organisation to discuss gender related issues and promote women’s skills and leadership capacities.

Senior core team
Overall executive body of the organisation, for policy and decision making

General core team
To guide and monitor the work in all programmes and sectors across the different regions

PEOPLE AT RDT

Human Resources Development Department conducts regular trainings on RDT vision and vision as well as on policy, gender, participatory methods and best practices to improve our staff knowledge and capacities. As part of RDT efforts to achieve gender balance and to promote a safe and dignified workplace during 2019 the organisation conducted a gender audit with the support of Martha Farrell Foundation.

Our Staff

<table>
<thead>
<tr>
<th></th>
<th>Male</th>
<th>Males with disabilities</th>
<th>Female</th>
<th>Females with disabilities</th>
<th>Total</th>
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<tr>
<td>Support</td>
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<td>2</td>
<td>113</td>
<td>1</td>
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<tr>
<td>Grassroot</td>
<td>682</td>
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<td>769</td>
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<tr>
<td>Middle Level Leadership</td>
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<td>1</td>
<td>66</td>
<td>2</td>
<td>198</td>
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<tr>
<td>Senior Leadership</td>
<td>113</td>
<td>1</td>
<td>80</td>
<td>0</td>
<td>194</td>
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<tr>
<td><strong>Total</strong></td>
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<td><strong>82</strong></td>
<td><strong>1028</strong></td>
<td><strong>51</strong></td>
<td><strong>2140</strong></td>
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</tbody>
</table>
FORGING PARTNERSHIPS, TRANSFORMING REALITIES

In order to address the current global challenges and achieve a sustainable development, RDT collaborates with the government, local, national and international organizations.

Local Partner Trusts*

- Rayslaseema Development Trust
- Women Development Trust
- Integrated Development Trust
- Dharmavaram Boys Town
- Accion Fraterna –Ecology Centre

Global Partnerships

- Fundación Vicente Ferrer (Spain) since 1996
- Vicente Ferrer Foundation (US) since 2016
- Stiftung Vicente Ferrer (Germany) since 2019
- Friends of RDT (UK) since 2017

Our project partners:

- Martha Farrell Foundation
- CHILDLINE (1098) – Central Government initiative run by RDT in Anantapur.
- Andhra Pradesh State Housing Corporation Limited
- The Anganwadi Project
- Health Medical and Family Welfare Dept., Government of AP
- District Medical and Health Office Department (DM&HO), Ananthapuramu
- Government Children Immunization program
- District Women & Child Development Agency, Anantapur - DW & CDA
- Integrated Child Development Services – ICDS
- Child Welfare Committee, Anantapur - CWC
- Dr. YSR Aarogyasri health scheme by the Government of Andhra Pradesh
- Andhra Pradesh State AIDS Control Society (APSACS) through National AIDS Control Organization (NACO)
- Revised National TB Control Program (RNTCP).
- National Neonatology Forum of India
- Sankalp India Foundation (Thalassemia care)
- Research partner of Christian Medical College (CMC) in association with the Indian Council of Medical Research to study enteric (typhoid) fever in India.
- Bhavishyath Counselling
- District Education Authority
- Sri Krishna Devaraya University Anantapur
- Krishi Vignana Kendra.
- New Renewable Energy Resources Development Corporation of Andhra Pradesh Ltd. (NREDCAP Ltd).
- Indian Institute of Oil Seeds & Research (IIOR) under the control of Indian Council of Agricultural Research (ICAR)-Delhi.
- Village Energy Group, Australia
- APD India (Association of People with Disability)
- Youth4Jobs
- SACRED
- VHV (Anantha Vikalangula HakkulaVedika) –District federation of PWD
- Nirmaya Health Insurance Program (Govt)
- Mobility India
- Special Olympics Bharat
- Indian Wheelchair Tennis Tour
- Fundación Rafa Nadal

*Some members of RDT Trust are also trustees on our local partners.

CSR PARTNERSHIPS

We are glad to collaborate with the following corporates in these projects:

Sapthagir Camphor Limited:
Construction of Drainage System to improve sanitation across one village in Bukkaraya Samudram

We Are Water Foundation India and ROCA Bathroom Products Pvt. Ltd:
Water Sanitation and Hygiene Project in various villages across P. Dornala area (Srisailam region)

Grant Assistance for Grassroots Human Security Projects (GGP) Unit Consulate General of Japan in Chennai:
Medical equipment of essential need for RDT Bathalapalli Hospital
FINANCIAL AUDIT

V.K. MADHAVA RAO & CO.
CHARTERED ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To

The Board of Trustees of
Rural Development Trust
Anathalaparambu.

I. Opinion:

We have audited the attached Financial Statements of Rural Development Trust
(The Trust), Anathalaparambu, which comprise the Balance Sheet as at 31st March
2020 and also the statement of Income and Expenditure Account and the Receipts and
Payments Account for the year ended on that date and notes to the financial
statements, including a summary of Significant Accounting Policies.

In our opinion, the accompanying financial Statements give a true and fair view of the
financial position of the Trust as at 31st March, 2020 and of its excess of Income over
Expenditure for the year then ended in accordance with the Accounting Standards
issued by the Institute of Chartered Accountants of India (ICAI).

II. Basis for Opinion:

We have conducted the audit in accordance with auditing Standards or Auditing (SAs)
issued by ICAI. Our Responsibilities under those standards are further described in the
Auditor’s Responsibilities for the Audit of the Financial Statements Section of our
report. We are independent of the Trust in accordance with the Code of Ethics issued
by ICAI that are relevant to our audit and we have fulfilled our other ethical
responsibilities in accordance with these requirements. We believe that the audit
evidence we have obtained is sufficient and appropriate to provide a basis for our
opinion.

Off: 3-40-75, Plot No. 31, Wellington Road Vijaynagar Colony,
Pochalla, Secunderabad - 500 005 Tel: (040) 27847766 Mob: 98855 26495.
e-mail: sudhakanvelore@gmail.com

V.K. MADHAVA RAO & CO.
CHARTERED ACCOUNTANTS

III. Responsibilities of Management and Those Charged with Governance for the
Financial Statements:

Management is responsible for preparation of these financial statements that give a true
and fair view of the state of affairs, results of operations and cash flows of the Trust in
accordance with the accounting principles generally accepted in India. This
responsibility also includes maintenance of adequate accounting records for
safeguarding of the assets of the Trust and for preventing and detecting frauds and other
irregularities; selection and application of appropriate accounting policies; making
judgments and estimates that are reasonable and prudent; and design, implementation
and maintenance of adequate internal financial controls, that were operating effectively
for ensuring the accuracy and completeness of the accounting records, relevant to the
preparation and presentation of the financial statements that give a true and fair view
and are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, Management is responsible for assessing the
Trust’s ability to continue as a going concern, disclosing, as applicable, matters related
to going concern and using the going concern basis of accounting unless the
Management either intends to liquidate the Trust or to cease operations, or has no
realistic alternative but to do so.

The Management is also responsible for overseeing the Trust’s financial reporting
process.

IV. Auditor’s Responsibilities for the Audit of the Financial Statements:

Our objectives are to obtain reasonable assurance about whether the financial statements as
a whole are free from material misstatement, whether due to fraud or error, and to issue an
auditor’s report that includes our opinion. Reasonable assurance is a high level of
assurance, but is not a guarantee that an audit conducted in accordance with SAs will
always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SAs, we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to these risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing our opinion on the effectiveness of the Trust’s internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.

- Conclude on the appropriateness of management’s use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Trust’s ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor’s report to the related disclosures in the financial statements or, if such disclosures

Form: kentucky
Date: 22nd December, 2020

V.K. MADHAVA RAO & CO.
CHARTERED ACCOUNTANTS

are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor’s report. However, future events or conditions may cause the Trust to cease to continue as a going concern.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.
# Financial Statements

## RURAL DEVELOPMENT TRUST :: ANANTHAPURAMU

### RECEIPTS AND PAYMENTS ACCOUNT FOR THE PERIOD 1st APRIL 2019 to 31st MARCH 2020

<table>
<thead>
<tr>
<th>RECIPTS</th>
<th>SCHEDULE</th>
<th>AMOUNT</th>
<th>PAYMENTS</th>
<th>SCHEDULE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening Balance</td>
<td></td>
<td></td>
<td>Education for Transformation Programme</td>
<td>SCH - A</td>
<td>48,76,68,579.70</td>
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<td>Cash</td>
<td>SCH - I</td>
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<td>Bank</td>
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<td>Feeding and Sustainable Livelihood Programme</td>
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<td>32,65,20,044.74</td>
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<td>Field / Area Offices</td>
<td>SCH - I-A</td>
<td>4,18,84,318.65</td>
<td>Community Health Programme</td>
<td>SCH - C</td>
<td>18,24,50,545.33</td>
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<tr>
<td>Grants Received</td>
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<tr>
<td>Foreign Grants</td>
<td>SCH - II</td>
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<td>Rural Hospitals Programme</td>
<td>SCH - D</td>
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<td>Foreign Grants - Specific</td>
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<td>Local Grants - Specific</td>
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<td>Women Empowerment Programme</td>
<td>SCH - E</td>
<td>9,46,01,725.46</td>
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<td>Donation</td>
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<td>Habitat Programme</td>
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<tr>
<td>Other Receipts / Income</td>
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<td>Interest</td>
<td>SCH - III</td>
<td>55,85,07,314.55</td>
<td>Disability Inclusive Development Programme</td>
<td>SCH - G</td>
<td>16,95,61,824.13</td>
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<td>Dividends</td>
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<td>Income on Investments</td>
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<td>91,25,162.00</td>
<td>Partnership Programme</td>
<td>SCH - H</td>
<td>4,11,61,009.15</td>
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<td>Other Receipts - Insurance Claims</td>
<td>SCH - IV</td>
<td>11,34,448.00</td>
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<td>Hospital Income</td>
<td></td>
<td>21,24,23,059.44</td>
<td>Area Development Program</td>
<td>SCH - I</td>
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<td>Nursing School Income</td>
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<td>Sale of Scrap</td>
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<td>4,85,123.00</td>
<td>Sports for Development Programme</td>
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<td>48,18,882.13</td>
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<td>Sale of Fixed Assets</td>
<td>SCH - IV</td>
<td>23,80,600.00</td>
<td>Central Offices and Campuses Departments</td>
<td>SCH - K</td>
<td>11,32,53,555.41</td>
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<td>Current Liabilities - Staff Welfare</td>
<td>SCH - V</td>
<td>4,22,80,992.23</td>
<td>Monitoring &amp; Evaluation Department</td>
<td>SCH - L</td>
<td>1,17,73,744.15</td>
</tr>
</tbody>
</table>

As per our report of even date attached for MSV K Madhava Rao & Co Chartered Accountants

CAI Firm Registration No: 001096

VM SUDHAKAR
Proponent
Membership No: 202151
UDIN: 20202151AAAUSA2838
<table>
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<tr>
<th>RECEIPTS</th>
<th>SCHEDULE No.</th>
<th>AMOUNT</th>
<th>PAYMENTS</th>
<th>SCHEDULE No.</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td>INTER PROGRAM TRANSFERS [PER CONTRACT]</td>
<td>SCH - VI</td>
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<td>INTER PROGRAM TRANSFERS [PER CONTRACT]</td>
<td>SCH - X - N</td>
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<td>CAPITAL EXPENDITURE</td>
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<td>REVENUE EXPENDITURE - PAYMENT AGAINST CURRENT LIABILITIES</td>
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<td>Advances from Other Program</td>
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<td>Advances to Other Programs</td>
<td>SCH - VII</td>
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<td>Advances from Other Projects</td>
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<td>Refund of Government Advances &amp; Bills</td>
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<td>Recovery of Staff Advance</td>
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<td>4,04,500.00</td>
<td>Advances to Staff</td>
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<td>Refund of Advances from Suppliers &amp; Others</td>
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<td>Advances to Suppliers &amp; Others</td>
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<td>TDS on Interest Receivable from Income Tax</td>
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<td>Refund of Other Advances</td>
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<td>TDS Receivable from Income Tax</td>
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<td>Current Assets - GST</td>
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<td></td>
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<td>GST - Input Tax Credit</td>
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<td>REALIZATION OF FIXED DEPOSITS / INVESTMENTS</td>
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<tr>
<td>Bank Investment / Fixed Deposits</td>
<td>SCH - VIII</td>
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<td>Bank Investment / Fixed Deposits</td>
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<td>REALIZATION OF GRANTS FOR FY 2018-19</td>
<td>SCH - VIII-A</td>
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<td>Current Asset - Unconsumed Hospital Purchases A 31 03 2020</td>
<td>SCH - VIII-B</td>
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<td>Unconsumed Hospital Purchases A 31 03 2020</td>
<td></td>
<td>3,13,83,471.02</td>
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</tbody>
</table>

As per our report of even date attached for M/S V K MADHAVA RAO & Co Chartered Accountants
ICAI Firm Registration No: 001908S

VM SUDIKAAR
Proprietor
Membership No: 202151
UDIN: 20202151A4AAADU2838

RECEIPTS                                      | SCHEDULE No. | AMOUNT  | PAYMENTS                                      | SCHEDULE No. | AMOUNT  |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Asset - Unconsumed Hospital Purchases A 31 03 2019</td>
<td>SCH - VIII-B</td>
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<td></td>
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<tr>
<td>Unconsumed Hospital purchases (consumed this year)</td>
<td>SCH - XI</td>
<td>4,82,65,088.05</td>
<td>Other Deposits</td>
<td>SCH - XII</td>
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<td>Other Deposits (Radial)</td>
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<td>1,00,000.00</td>
<td>Other Deposits (Electricity)</td>
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<td>Current Liabilities - EMD</td>
<td>SCH - XII-A</td>
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<td>Current Liabilities - GST PAYMENT DUE</td>
<td>SCH - XIII-B</td>
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<td>Current Liabilities - GST</td>
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<td>GST Payment Due to Government [Net]</td>
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<td>Current Liabilities - Income Tax Payment Due</td>
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<td>Current Liabilities - Provident Fund Payment</td>
<td>SCH - XIII-D</td>
<td>47,47,002.00</td>
<td>Field / Area Offices</td>
<td>SCH - I-A</td>
<td>9,17,79,232.14</td>
</tr>
<tr>
<td>Provident Fund Deducred Amount Due to Govt. [Net]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Liabilities - Profession Tax Payment</td>
<td>SCH - XIII-E</td>
<td>31,100.00</td>
<td>CTDs / DDs on Hand (AT YEAR END)</td>
<td>SCH - I-B</td>
<td>39,07,277.55</td>
</tr>
<tr>
<td>Profession Tax Deducred Amount Due to Govt. [Net]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>484,38,79,078.64</td>
<td>TOTAL</td>
<td></td>
<td>484,38,79,078.64</td>
</tr>
</tbody>
</table>

Significant accounting policies and notes on accounts: XXI
The Schedules referred to above form an integral part of the financial statements.
RURAL DEVELOPMENT TRUST :: ANANTHAPURAMU
INCOME AND EXPENDITURE ACCOUNT FOR THE PERIOD 1st APRIL 2019 to 31st MARCH 2020.

<table>
<thead>
<tr>
<th>EXPENDITURE</th>
<th>SCHEDULE</th>
<th>AMOUNT (£)</th>
<th>INCOME</th>
<th>SCHEDULE</th>
<th>AMOUNT (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education for Transformation Programme</td>
<td>SCH - XA</td>
<td>48,768,579.70</td>
<td>Grants Received:</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Ecology and Sustainable Livelihood Programme</td>
<td>SCH - X-B</td>
<td>32,052,014.27</td>
<td>Foreign Grants:</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Community Health Programme</td>
<td>SCH - X-C</td>
<td>18,230,461.36</td>
<td>Foreign Grants - Specific</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td></td>
<td>SCH - X-D</td>
<td>37,952,178.51</td>
<td>[Specific Grants to the extent utilized]</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Rural Hospitals Programme</td>
<td>SCH - X-E</td>
<td>9,401,725.46</td>
<td>Local Grants - Specific</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Women Empowerment Programme</td>
<td>SCH - X-F</td>
<td>45,795,525.51</td>
<td>[Specific Grants to the extent utilized]</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Habitat Programme</td>
<td>SCH - X-G</td>
<td>16,927,664.13</td>
<td>Other Receipts / Income:</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Disability Inclusive Development Programme</td>
<td>SCH - X-H</td>
<td>14,768,846.58</td>
<td>Interest</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Area Development Programme</td>
<td>SCH - X-I</td>
<td>14,768,846.58</td>
<td>Dividends</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Sports for Development Programme</td>
<td>SCH - X-J</td>
<td>43,109,523.13</td>
<td>Income on Investments</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Central Offices and Campuses Departments</td>
<td>SCH - X-K</td>
<td>14,323,555.41</td>
<td>Other Receipts - Insurance Claims / Other Income</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Monitoring &amp; Evaluation Department</td>
<td>SCH - X-L</td>
<td>1,173,744.15</td>
<td>Hospital Income</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Revenue Expenditure - Charities</td>
<td>SCH - X-M</td>
<td>6,587,650.90</td>
<td>Nursing School Income</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Depreciation</td>
<td>SCH - X-N</td>
<td>11,278,446.02</td>
<td>Sale of Scrap</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td>Income on Sales of Fixed Assets</td>
<td>SCH - XV</td>
<td>25,000,782.34</td>
<td>Other Receipts / Income:</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
</tr>
<tr>
<td></td>
<td>SCH - XVII</td>
<td>75,000,782.34</td>
<td>Interest</td>
<td>SCH - II-A</td>
<td>257,333,652.84</td>
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<tr>
<td>TOTAL £</td>
<td>252,011,120.85</td>
<td></td>
<td>TOTAL £</td>
<td>325,811,200.85</td>
<td></td>
</tr>
</tbody>
</table>
Rural Development Trust (RDT) is registered under the Indian Registration Act, 1908 and 12A of the Income Tax Act. Donations to RDT are exempt under section 80G of Income Tax Act. RDT is registered under FCRA.

Rural Development Trust
Banglore Road
Anantapuramu-515001
Andhra Pradesh, India

For more information call us

08554 271377, or write to communications@rdt.co.in