DLN: 93493047020166

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public ► Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A F	or the	2014 cal		ing 07-01-2014 $$, and ending 06-30-201	L5			
B Ch	eck if a	pplicable	C Name of organization GLOBAL IMPACT			D Emple	oyer ider	ntification number
☐ Ad	dress cl	nange				52-1	273585	5
П	me cha	inge	% MARK MILLIGAN MNG DIR-FIN. Doing business as	AN				
┌ Ini	tıal retu	ım						
Fir			Number and street (or P O box if	mail is not delivered to street address) Room/s	uite	E Teleph	one num	ber
┌ ret	urn/ten	mınated	1199 North Fairfax St Suite 300			(703	717-5	200
┌ An	nended	return	City or town, state or province, co	puntry, and ZIP or foreign postal code				
┌ Ap	plication	n pending	ALEXANDRIA, VA 22314			G Gross	receipts \$	46,152,261
	•		F Name and address of p	ringing laffings	1 >			
			Scott Jackson	rincipal officer		Is this a group subordinates?		for
			1199 North Fairfax Street			suboramates.		1 1631 110
			Alexandria, VA 22314		H(b)	Are all subord	ınates	┌ Yes ┌ No
						ıncluded?		,
I 18	ax-exen	npt status	✓ 501(c)(3) 501(c)() •	(insert no) 4947(a)(1) or 527	4	If "No," attacl	n a list	(see instructions)
J W	ebsite	e:► WV	VW CHARITY ORG		H(c)	Group exemp	tion nur	mber ⊳
K For	m of or	ganızatıon	Corporation Trust Associa	tion Other ►	L Yea	r of formation 1	981 M	State of legal domicile DC
	rt I		nmary	· ·			ı	<u>, </u>
			<u>-</u>	sion or most significant activities				
				resources for the world's most vulnerab	le people			
e e	'		· · · · · · · · · · · · · · · · · · ·					
Ž								
≅								
<u>ş</u>	2	Check tl	his box 🔰 if the organization	discontinued its operations or disposed	of more t	han 25% of its	s net as	sets
Activities & Governance								
2 5	3	Number	of voting members of the gove	rning body (Part VI, line 1a)			3	19
<u>&</u>	4	Number	of independent voting member	s of the governing body (Part VI, line 1 ${ t t}$)		4	18
툳	5	Total nu	mber of ındıvıduals employed ı	n calendar year 2014 (Part V, line 2a)			5	84
fct f	6	Total nu	mber of volunteers (estimate i	fnecessary)			6	18
-	7a	Total un	related business revenue from	Part VIII, column (C), line 12			7a	25,165
	Ь	Net unre	elated business taxable income	e from Form 990-T, line 34			7b	-7,956
						Prior Year	<u> </u>	Current Year
	8	Contri	ibutions and grants (Part VIII,	line 1h)		38,186	,920	43,300,109
횰	9		am service revenue (Part VIII,		1,949		2,145,376	
Rayenue	10			nn (A), lines 3, 4, and 7d)			,733	70,769
걆	11), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	. 0
	12			.1 (must equal Part VIII, column (A), lir	ne 💳			
						40,176	,470	45,516,254
	13	Grants	s and sımılar amounts paıd (Pa	rt IX, column (A), lines 1-3)		30,750	,330	35,406,476
	14	Benefi	its paid to or for members (Par	t IX, column (A), line 4)			0	0
	15	Saları	es, other compensation, emplo	yee benefits (Part IX, column (A), lines		5,165	688	6,212,916
8		5-10	,			3,103,	,000	0,212,310
æ	16a	Profes	ssional fundraising fees (Part I	·		0	0	
Expenses	Ь	Total fu	undraising expenses (Part IX, column	(D), line 25) • 778,856				
ш	17	Other	expenses (Part IX column (A), lines 11a-11d, 11f-24e)		4,126	181	3,809,962
	18			nust equal Part IX, column (A), line 25)	·	40,042		45,429,354
	19			e 18 from line 12		134		86,900
_ 97	+	Keven	ide less expenses Subtract III	e 10 Hom mie 12	_			00,700
Not Assets or Fund Balances					Beg	inning of Curre Year	-114	End of Year
94	20	Total	assets (Part X, line 16)			19,396	,108	25,760,932
2.E	21					13,539		19,904,237
25	22			ct line 21 from line 20		5,856		5,856,695
Pa	rt II		nature Block					-,,
Unde my k	er pena nowle	alties of dge and	perjury, I declare that I have e	examined this return, including accompa complete Declaration of preparer (other t				
		T _k				2016 02 12		
c: ~-	•	Signa	ature of officer			2016-02-12 Date		
Sig:],	TT JACKSON President and CEO					
	-		e or print name and title					
		F	Print/Type preparer's name	Preparer's signature	Date	Check I if	PTIN	
Pai	d	<u> </u>	Joyce Underwood	Joyce Underwood		self-employed	P00022	2361
	pare		Firm's name 🕨 BDO USA LLP			Firm's EIN 🕨		
	-		Firm's address ► 8401 GREENSBORO	DRIVE SUITE 800		Phone no (70	3) 893-06	500
US	On	יע	MCLEAN VA 22102					

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	_	Yes	

b E c D g 2a E T b b I N	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 40 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	<u> </u>	Yes	No
b E c D g 2a E T b b I N	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable	4	I	
c D g 2a E T b N				
g 2a E T b b I [.]		-		
Т b b I	Old the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
N	Enter the number of employees reported on Form W-3, Transmittal of Wage and Fax Statements, filed for the calendar year ending with or within the year covered by this return	1		
Ra D	f at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
-u	Old the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b I	f "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
0	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
S	f "Yes," enter the name of the foreign country Gee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts FBAR)			
ōa ∨	Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
b D	Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
c I	f "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
-		5c		
0	Does the organization have annual gross receipts that are normally greater than $\$100,\!000$, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
W	if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			 ,,
s	Old the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	f "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
fı	Old the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7c		N
d 1.	f "Yes," indicate the number of Forms 8282 filed during the year			
	Old the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		N
FC	Old the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	f the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
	f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
D	Sponsoring organizations maintaining donor advised funds. Old a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		N
a C	Old the sponsoring organization make any taxable distributions under section 4966?	9a		N
	Old the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		N
	Section 501(c)(7) organizations. Enter			
	initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club acilities			
S	Section 501(c)(12) organizations. Enter			
a G	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
a S	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b I	f "Yes," enter the amount of tax-exempt interest received or accrued during the rear			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a I	s the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b E	Enter the amount of reserves the organization is required to maintain by the states			
	n which the organization is licensed to issue qualified health plans	-		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	ĺм

Form 990 (2014) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	18			
2	Did any officer, director, trustee, or key employee have a family relationship or a bust other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	e the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets? .	5		Νo
6	Did the organization have members or stockholders?			6		Νo
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	Reveni	ue Cod	e.)
					Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?			10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the ac	on's e	xempt purposes?	10b	Yes	
b L1a	If "Yes," did the organization have written policies and procedures governing the ac affiliates, and branches to ensure their operations are consistent with the organization as the organization provided a complete copy of this Form 990 to all members of its	on's e ts gov	xempt purposes? erning body before filing	10b		
b L1a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization that the organization provided a complete copy of this Form 990 to all members of it the form?	on's e ts gov • • • Form 9	xempt purposes? erning body before filing	10b		
b L1a b L2a	If "Yes," did the organization have written policies and procedures governing the acaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its form?	on's e ts gov · · · Form 9	xempt purposes? erning body before filing	10b	Yes	
b L1a b L2a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e ts gov · · · Form 9 · · ly inte	erning body before filing 990 erests that could give	10b 11a 12a	Yes	
b L1a b L2a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e ts gov · · · Form 9 · · ly inte	erning body before filing 990 erests that could give	10b 11a 12a 12b	Yes Yes Yes	
b L1a b L2a b	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FOID the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	on's e ts gov Form 9 Iy inte 	erning body before filing erning body before filing erests that could give olicy? If "Yes," describe	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy?	on's ets gov Form 9 ly inte the p trew an	erning body before filing erning body before filing 90 erests that could give olicy? If "Yes," describe dapproval by	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a b c 13 14	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FO Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a rev	on's ets gov Form 9 ly inte the p the p riew an	erning body before filing erning body before filing 90 erests that could give olicy? If "Yes," describe dapproval by	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FOID the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	on's ets gov Form 9 ly inte the p the p riew an	erning body before filing erning body before filing 90 erests that could give olicy? If "Yes," describe dapproval by	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FO Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official	on's ets gov Form 9 ly inte the p the p riew an	erning body before filing erning body before filing 90 erests that could give olicy? If "Yes," describe dapproval by	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FO Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	on's e ts gov Form 9 ly inte the p tiew an ne deli or sim	erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e ts gov Torm 9 Iy inte Ithe p The deli Or sim Ization	erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FDI of the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization follow as written policy or procedure requiring the organization follows.	on's e ts gov Torm 9 Iy inte the p Tiew an the deli or sim sization e step	erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

- List the States with which a copy of this Form 990 is required to be filed▶AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, IN, KS , KY , ME , MD , MI , MN , MS , MO , NH , NJ , NM , NY , NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VT, VA, WA, WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ▼ Own website ▼ Another's website ▼ Upon request ▼ Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records ►MARK MILLIGAN MNG DIR-FINAN 1199 N FAIRFAX ST 300

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
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Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					1	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

b	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	Þ			
d	Total (add lines 1b and 1c)	F	1,472,695	0	191,389

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►11

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Schaner Lubitz PLLC, 6931 Arlington Road Bethesda, MD 20814	Legal	180,000
Rackspace Managed Hosting, PO Box 730759 Dallas, TX 75373	Internet Hosting	106,009
Renee Acosta, 12 Gleneagle Cırcle Napa, CA 94558	Consulting	108,333
BDO US LLP, 7101 Wisconsin Ave Suite 800 BETHESDA, MD 20814	Audit	100,575

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶4

Yes No

Part V	777	Statement o Check if Schedi	it Revenue ule O contains a respor	ise or note to any lir	ne in this Part VIII			୮
,	_				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ស្ត	1a	Federated cam		35,286,700				
Grants	b	Membership du	es 1b					
, Gi	С	Fundraising eve	ents 1c					
iffs ar,	d	Related organiz	zations 1d					
s, G imil	е	Government grants	s (contributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	8,013,409				
gip	g	Noncash contribute 1a-1f \$	ons included in lines		į	į		
Cont and	h	Total. Add lines	s 1a-1f		43,300,109			
a)				Business Code				
Program Service Revenue	2a	Adv Svcs/Pr Gr/Re	l rev	900099	1,666,366	1,641,201	25,165	
Реv	b	MEMBER STATE RE	GISTRATION	900099	291,850	291,850		
JC 6	С	COOPERATIVE ADV	ERTISING	900099	187,160	187,160		
λer ν	d							
E .	е							
×gra	f	All other progra	am service revenue					
š	g	Total. Add lines	s 2a-2f		2,145,376			
	3	Investment inc	ome (ıncludıng dıvıdend	ds, interest,	36,953			36,953
			ar amounts) stment of tax-exempt bond ;	F	36,933			36,933
	4 5				0			
	3	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(i) iteal	(II) I CISOIIGI				
	ь	Less rental						
	С	expenses Rental income	0	0				
		or (loss)	ma ar (laga)		0			
	d	Net rental inco	me or (loss) (i) Securities	(II) Other	Ÿ			
	7a	Gross amount from sales of	669,823	(II) O thei				
		assets other than inventory						
	Ь	Less cost or other basıs and	636,007					
	С	sales expenses Gain or (loss)	33,816					
	d		[33,816			33,816
÷	8a	Gross income f	rom fundraising					
Other Revenue		\$ of contributions	reported on line 1c)					
å.		See Part IV, lin	ne 18 a					
Jer	ь	less directex	penses b					
₹	С		(loss) from fundraising	events	0			
	9a	Gross income f	rom gaming activities	·				
		·	a					
			penses b					
			loss) from gamıng actı) ا	vities	0			
	10a	Gross sales of returns and allo	owances .					
	h	less costofa	a oods sold b					
			(loss) from sales of inve	entory 🛌	0			
		Miscellaneous		Business Code				
	11a							
	b							
	c							
	d	All other reven	ue					
	e		s 11a-11d	🕨				
				. -	0			
	12	iotai revenue.	See Instructions	· · · · •	45,516,254	2,120,211	25,165	70,769

	IX Statement of Functional Expenses				Page 10
ectio	in $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	34,271,362	34,271,362		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	1,135,114	1,135,114		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	612,093	331,189	259,951	20,953
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	4,435,378	2,492,358	1,609,692	333,328
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	318,427	187,946	113,622	16,859
9	Other employee benefits	527,620	262,380	199,620	65,620
LO	Payroll taxes	319,398	211,576	92,756	15,066
.1	Fees for services (non-employees)				
а	Management	644,122	297,854	282,344	63,924
b	Legal	190,654	0	190,654	0
С	Accounting	96,681	22,038	74,643	0
d	Lobbying	0	0	0	0
e	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees	10,052	0	10,052	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	54,992	54,992		0
.2	Advertising and promotion	878,829	708,310	38,750	131,769
.3	Office expenses	541,959	280,419	205,967	55,573
4	Information technology	209,625	42,973	166,652	0
.5	Royalties	0	0	0	0
6	Occupancy	337,490	202,255	111,976	23,259
.7	Travel	298,597	187,313	66,050	45,234
.8	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
.9	Conferences, conventions, and meetings	76,905	6,959	62,675	7,271
:0	Interest	6,886	6,886	0	0
1	Payments to affiliates	0			
2	Depreciation, depletion, and amortization	413,620	0	413,620	0
:3	Insurance	49,550	0	49,550	0
4	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а					
b					
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	45,429,354	40,701,924	3,948,574	778,856
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			· · · ·
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	200	1	200
	2	Savings and temporary cash investments	3,974,312	2	3,531,543
	3	Pledges and grants receivable, net	12,168,092	3	19,306,907
	4	Accounts receivable, net	401,596	4	469,778
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
s	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	0
et			0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
-	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	111,985	9	106,031
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 2,488,117			
	ь	Less accumulated depreciation 10b 1,381,502	1,456,984	10 c	1,106,615
	11	Investments—publicly traded securities	1,113,443	11	1,086,905
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	169,496	15	152,953
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,396,108	16	25,760,932
	17	Accounts payable and accrued expenses	667,490	17	1,310,559
	18	Grants payable	0	18	0
	19	Deferred revenue	818,884	19	895,330
	20	Tax-exempt bond liabilities	0	20	0
S.	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ap		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	94,463	23	83,642
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	44.050.570		47.044.700
		D	11,958,576		17,614,706
	26	Total liabilities. Add lines 17 through 25	13,539,413	26	19,904,237
φ O		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	5,856,695	27	5,856,695
<u>ප</u>	28	Temporarily restricted net assets	0		0
<u> </u>	29	Permanently restricted net assets	0	29	0
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and			<u> </u>
ō	30	complete lines 30 through 34.		30	
ets:		Capital stock or trust principal, or current funds		30	
Assets	31	Patagon or capital surplus, or land, building or equipment fund		31	
Α. 4	32 33	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	5,856,695	32	5,856,695
Net					, ,
	34	Total liabilities and net assets/fund balances	19,396,108	34	25,760,932

Pai	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		45,5	516,254
2	Total expenses (must equal Part IX, column (A), line 25)				129,354
3	Revenue less expenses Subtract line 2 from line 1	3			86,900
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5.8	356,695
5	Net unrealized gains (losses) on investments	5			-86,900
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		5,8	356,695
Par	t XII Financial Statements and Reporting			•	
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	1e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	า			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: **Software Version:**

EIN: 52-1273585 Name: GLOBAL IMPACT

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (dinan o nan o n is b i dire	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former			related organizations
(1) Steve Polo Board Chairman	2 0	х		х				0	0	0
(1) Nancy Kelly	2 0	x		х				0	0	0
Board Vice Chairman	0 0			<u> </u>				Ů		
(2) James Kanuch CPA	2 0	х		х				0	0	0
Board Secretary/Treasurer (3) Timothy Bloechl	0 0									
Board Member	0 0	Х						0	0	0
(4) Joseph Crupi	1 0	<u> </u>								
Board Member	0 0	Х						0	0	0
(5) Kenneth Fleishman	1 0	x						0	0	0
Board Member	0 0							Ů		
(6) Mouhamed Djalo	1 0	х						0	0	0
Board Member (7) Peter Grant	0 0									
Board Member	0 0	Х						0	0	0
(8) Stan Harrell	1 0									
Board Member	0 0	X						0	0	0
(9) Karen Johnson	1 0	x						0	0	0
Board Member	0 0	_ ^						0	0	
(10) Maryon Davies Lewis	1 0	X						0	0	0
Board Member (11) David Wu	0 0									
Board Member	0 0	Х						0	0	0
(12) Rabih Torbay	1 0	Х						0	0	0
Board Member (13) Mauricio Vivero	0 0									
Board Member (14) Edward Zellem	0 0	Х						0	0	0
		Х						0	0	0
Board Member (15) Scott Jackson	0 0 40 0									
President and CEO	0 0	X		Х				387,543	0	45,842
(16) Carol Reig	1 0	x						0	0	0
Board Member	0 0	_ ^						Ů		<u> </u>
(17) Kathryn Compton	1 0	X						0	0	0
Board Member (18) Pierre Ferrari	0 0									
		х						0	0	0
Board Member (19) Stanley Berman	0 0 40 0									
Former Chief Financial Officer	0 0				Х			228,684	0	37,188
(20) Ann Canela VP, Partner Solutions	40 0					х		167,776	0	22,852
(21) Joseph Mettimano	40 0								-	25
VP for Marketing&Campaign Mgmt	0 0					X		164,748	0	35,236
(22) Victoria Adams	40 0					х		135,018	0	19,659
Exec DIR, CFC-Overseas (23) Mark Milligan	0 0 40 0									
Managing DIR, finance	0 0					Х		127,093	0	18,901
(24) Christine Sow	40 0					x		153,500	0	11,711
Exec DIR, Global Health Counci	0 0	<u> </u>		<u> </u>	<u> </u>	<u> </u>				<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	honal Trust		nless ficer tee) Highea	Forme	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations		
		e.	แต่ลล		ensated				
(26) Renee Acosta	40 0					V	100 222	_	0
Former President (See Sch O)	0 0					Х	108,333	0	

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DLN: 93493047020166

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Employer identification number Name of the organization GLOBAL IMPACT 52-1273585 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i)Name of supported (ii) EIN (iv) Is the organization (vi) A mount of (iii) Type of (v) A mount of listed in your governing other support (see organization organization monetary support (described on lines document? (see instructions) instructions) 1-9 above or IRC section (see instructions)) Yes No

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 102,042,793 100,508,279 98,081,574 38,186,920 43,300,109 382,119,675 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 102,042,793 100,508,279 98,081,574 38,186,920 43,300,109 382,119,675 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 0 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 382,119,675 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total beginning in) 🟲 102,042,793 100,508,279 98,081,574 Amounts from line 4 38,186,920 43,300,109 382,119,675 Gross income from interest, dividends, payments received on securities loans, rents, royalties 36,094 24,045 22,078 32,109 36,953 151,279 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support Add lines 7 382,270,954 through 10 12 Gross receipts from related activities, etc (see instructions) 6,692,669 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 99 960 % Public support percentage for 2013 Schedule A, Part II, line 14 15 99 970 % 16a 33 1/3% support test-2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test -2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2013 Schedule A, Part III, line 17

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

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

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year					
1 Amounts paid to supported organizations to accom	plish exempt purposes					
2 A mounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in					
3 Administrative expenses paid to accomplish exemp	anızatıons					
4 Amounts paid to acquire exempt-use assets						
5 Qualified set-aside amounts (prior IRS approval rec	nured)					
6 Other distributions (describe in Part VI) See instru	JCTIONS					
7 Total annual distributions. Add lines 1 through 6						
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide				
9 Distributable amount for 2014 from Section C, line	6					
10 Line 8 amount divided by Line 9 amount						
		(::)	(:::)			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014			
1 Distributable amount for 2014 from Section C, line 6						
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)						
3 Excess distributions carryover, if any, to 2014						
a From 2009	a From 2009					
b From 2010						
c From 2011						
d From 2012						
e From 2013						
f Total of lines 3a through e						
g Applied to underdistributions of prior years						
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)						
j Remainder Subtract lines 3g, 3h, and 3i from 3f						
4 Distributions for 2014 from Section D, line 7 \$						
A pplied to underdistributions of prior years						
b Applied to 2014 distributable amount						
c Remainder Subtract lines 4a and 4b from 4						
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)						
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)						
7 Excess distributions carryover to 2015. Add lines 3j and 4c						
8 Breakdown of line 7						
a From 2010						
b From 2011						
c From 2012						
d From 2013						

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493047020166

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

Political Campaign and Lobbying Activities

www.irs.gov/form990.

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization GLOBAL IMPACT			Employe	Employer identification number					
	THE IT ACT			52-127	52-1273585				
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a section	า 527	7 organization.			
1	Provide a description of the org	ganızatıon's dırect and ındırect polıtı	cal campaign act	tivities in Part IV					
2	Political expenditures				>	\$			
3	Volunteer hours								
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).					
1		e tax incurred by the organization un			>	 \$			
2	Enter the amount of any excise	e tax incurred by organization manag	jers under sectio	n 4955	Þ	\$			
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	20 for this year?			┌ Yes ┌ No			
4a	Was a correction made?					┌ Yes ┌ No			
b	If "Yes," describe in Part IV								
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section	on 50)1(c)(3).			
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exem	pt function activities	-	\$			
2	Enter the amount of the filing o exempt function activities	rganızatıon's funds contributed to ot	ther organization	s for section 527	Þ	\$			
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b	-	\$			
4	Did the filing organization file F	Form 1120-POL for this year?				☐ Yes ☐ No			
5	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	funds Also enter the anization, such as a ation in Part IV							
	(a) Name	(b) Address	(c) EIN	(d) A mount paid filing organization funds If none, ent	n's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-			
<u></u>	Demonstrate De diserting A 1 N 11	en the instructions for Form 990 or 990							

section 4911 tax for this year?

┌ Yes ┌ No

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

- Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar	(a) Filing organization's totals	(b) Affiliated group totals		
a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)			
c	Total lobbying expenditures (add lines 1a and 1i	b)			
d	Other exempt purpose expenditures	45,429,354			
e	Total exempt purpose expenditures (add lines 1	c and 1d)		45,429,354	
f	Lobbying nontaxable amount Enter the amount f	from the following table in both		1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
		·			
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)		250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -			
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -			
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 4	1720 rei	porting	

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

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 4,000,000 Lobbying nontaxable amount Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

(b) Amount	No
Amount	No
-	
-	
or section)(5), o
Yes	
1	
2	
3	
or section	
Part III-	R (b)
[-A, lines 1 a	Part II
I	Part I

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493047020166

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	me of the organization BBAL IMPACT	Employer identification number				
GLC	DOAL INTACT	 52-1273585				
Pa	rt I Organizations Maintaining Donor Ad					
	organization answered "Yes" to Form 990), Part IV, line 6. (a) Donor advised funds	(h) Funda and ather accounts			
1	Total number at and of year	(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year	•				
2	Aggregate value of contributions to (during year)	5,962,705 5,962,705				
3	Aggregate value of grants from (during year)	, ,				
4 -	Aggregate value at end of year	574,017	<u> </u>			
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o	rganızatıon's exclusive legal control?	✓ Yes			
6	Did the organization inform all grantees, donors, and c used only for charitable purposes and not for the bene conferring impermissible private benefit?					
Pa	rt II Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, line 7.			
1 2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	or education)	ertified historic structure			
	easement on the last day of the tax year	Г	Held at the End of the Year			
а	Total number of conservation easements	<u> </u>	2a			
b	Total acreage restricted by conservation easements	<u> </u>	2b			
c	Number of conservation easements on a certified hist	oric structure included in (a)	2c			
d	Number of conservation easements included in (c) acc	``'	20			
u	historic structure listed in the National Register	quired after 0/17/00, and not on a	2d			
3	Number of conservation easements modified, transfer	red, released, extinguished, or terminated	by the organization during			
	the tax year 🗠					
4	Number of states where property subject to conservat	ion easement is located 🕨				
5	Does the organization have a written policy regarding		— ung of violations, and			
	enforcement of the conservation easements it holds?		☐ Yes ☐ No			
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easeme	ents during the year			
7	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	during the year			
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of secti	on 170(h)(4)(B)(ı)			
9	and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports co		expense statement, and			
	balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easements.		statements that describes			
Par	Organizations Maintaining Collection Complete if the organization answered "	ns of Art, Historical Treasures, o	r Other Similar Assets.			
1a	If the organization elected, as permitted under SFAS: works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	116 (ASC 958), not to report in its revenuets held for public exhibition, education, oi	r research in furtherance of public			
b	If the organization elected, as permitted under SFAS : works of art, historical treasures, or other similar assesservice, provide the following amounts relating to the	ets held for public exhibition, education, or				
	(i) Revenue included in Form 990, Part VIII, line 1		► \$			
	(ii) Assets included in Form 990, Part X		* \$			
2	If the organization received or held works of art, historical following amounts required to be reported under SFAS					
а	Revenue included in Form 990, Part VIII, line 1		▶ \$			
			r +			

b Assets included in Form 990, Part X

Part	••• Organizations Maintaining Co	llections of Art,	. Hist	<u>tori</u>	<u>cal Tı</u>	reasu	ires, or O	the	<u>r Similaı</u>	ASS	ets (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, che	ecka	any of	the foll	owing that a	are a	significan	t use o	fits	
а	Public exhibition		d	Γ	Loan	orexc	hange progr	ams				
b	Scholarly research		e	Γ	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and explai	n how	they	/ furthe	er the o	organızatıon	ı's ex	empt purp	ose in		
5	During the year, did the organization solicit								ıılar	_	Yes	□ No
Par	assets to be sold to raise funds rather than to take to be sold to raise funds rather than to take to be sold to raise funds rather than to take the sold to raise funds rather than to take the sold to raise funds rather than to take the sold to raise funds rather than to take the sold to raise funds rather than to take the sold to raise funds rather than to take the sold to raise funds rather than to take the sold to raise funds rather than the sold to take the sold to raise funds rather than the sold to take th								es" to Foi			1 140
	Part IV, line 9, or reported an an											
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermed	diary	for c	ontribi	ıtıons (or other ass	ets	not	Г	Yes	✓ No
b	If "Yes," explain the arrangement in Part XII	II and complete the f	follow	ıng t	able		_					
_	5						H	4-		Amo	unt	
c d	Beginning balance							1c 1d				
e	Additions during the year						F	1e				
f	Distributions during the year Ending balance						F	1f				
2a	Did the organization include an amount on Fo	orm 990 Part Y line	21 f	oras	crow c	orcust	L odial accou		hility2		Yes	
b	-								•	·		, No
	If "Yes," explain the arrangement in Part XII TO Endowment Funds. Complete										• •	<u> </u>
гa	Endowment Funds. Complete	(a)Current year		Prior y			wo years back				e)Four ye	ears back
1a	Beginning of year balance											
b	Contributions							<u> </u>				
C	Net investment earnings, gains, and losses											
d	Grants or scholarships							T				
e	Other expenditures for facilities											
_	and programs							╀				
r	Administrative expenses End of year balance	-						+				
g	Provide the estimated percentage of the cur	rent week and belong	a /line	. 1	a a l u m	n (n))	hald as	<u> </u>				
2	·	rent year end baranc	e (IIIIe	erg,	Coluii	III (a))	ileiu as					
a	Board designated or quasi-endowment											
b	Permanent endowment ►											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
3a	Are there endowment funds not in the posse		ition t	hat a	re hel	d and a	administere	d for	the			
	organization by	201011 01 0110 01 gaa									Yes	No
	(i) unrelated organizations			•				•		3a(i)		
ь	(ii) related organizations							•		3a(ii) 3b	1	<u> </u>
4	Describe in Part XIII the intended uses of the	· ·						•		30		<u> </u>
	t VI Land, Buildings, and Equipme					n ansv	wered 'Yes	' to	Form 990), Part	: IV, lıı	 ne
	11a. See Form 990, Part X, line											
	Description of property				Cost or s (inves		(b) Cost or o basis (othe		(c) Accumi deprecia		(d) Bo	ok value
1 a	_and											
	Buildings			-								
	_easehold improvements							,073		.08,911		789,162
	Equipment		•	-				,974		67,221		309,753
	Other	augl Form 000 Port V	• (col:::	m n /	2) /	10/5)	1,013	•		05,370		7,700
iota	i. Aud illies ta tilrough te (Column (a) must e	quai roim 990, Part X	, colur	un (L	o), iine	10(C).,	<i>'</i> • • •	•		+		1,106,615 90) 2014

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related. Co	omplete if the organizatio	n answered 'Yes' to Fo	orm 990, Part IV, line 11d
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	aluation
(a) Description of investment	(2) Book value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 990	Part IV line 11d See I	Form 990 Part X line 15
(a) Descr		o, raiciv, ille ille occi	(b) Book value
Tabal (Column (b) much and 5 mm 200 5 mm 1/200	E.V.		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization.		o Form 990. Part IV. I	ine 11e or 11f See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
CAMPAIGN FUNDS PAYABLE-MEMBER CHARITIES	16,615,673		
DONOR ADVISED FUNDS PAYABLE OTHER DISTRIBUTIONS PAYABLE	574,017 425,016		
	. 23,310		
	i		

Par		Revenue per Audited Financial Sta wered 'Yes' to Form 990, Part IV, line :		nts W	ith Re	venue ¡	oer R	eturn Complete if
1		er support per audited financial statements					1	16,543,190
2	A mounts included on line 1 bi	ut not on Form 990, Part VIII, line 12						
а	Net unrealized gains (losses)	on investments	2a			-86,900		
ь	Donated services and use of f	acılıtıes	2b			<u>`</u>		
c	Recoveries of prior year grant	······································	2c					
d)	2d					
e	Add lines 2a through 2d .		<u> </u>	<u> </u>			2e	-86,900
3	Subtract line 2e from line 1 .						3	16,630,090
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1						, ,
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b	4a	ĺ				
ь	•	· · · · · · · · · · · · · · · · · · ·	4b		28	,886,164		
c	Add lines 4a and 4b		<u> </u>				4c	28,886,164
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line	12)				5	45,516,254
Part	XII Reconciliation of E	xpenses per Audited Financial St	ateme	ents \	With E	xpenses	per	Return. Complete
		nswered 'Yes' to Form 990, Part IV, line						T
1	·	r audited financial statements					1	16,543,190
2		it not on Form 990, Part IX, line 25						
а		acılıtıes	2a	 			1	
b			2b	 			4	
C			2c	<u> </u>			1	
d	Other (Describe in Part XIII)		2d				4	
e	_						2e	
3							3	16,543,190
4		0, Part IX, line 25, but not on line 1:						
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a	 			1	
b	,		4b		2.8	3,886,164	1	
C	Add lines 4a and 4b						4c	28,886,164
5	· · · · · · · · · · · · · · · · · · ·	nd 4c. (This must equal Form 990, Part I, lir	ne 18)	<u> </u>			5	45,429,354
	Supplemental In							
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and						de any additional
	Return Reference	Explanation						
Part X	K, line 2	Under Accounting Standards Codification Taxes, Global Impact must recognize the return purposes when it is more-likely tha	tax ber	nefit as	sociate	d with tax	posit	ions taken for tax
		not believe there are any unrecognized ta: years ended June 30, 2015 and 2014, the statements of activities Global Impact is year 2012 forward	x benef ere wer	its or li e no in	iabilitie terest o	s that sho or penaltie	uld be s reco	recorded For the rded or included in the
Part X	(I, line 4b	Oth Amts included on return not in financi MEMBER CHARITIES 22,101,199 CFC-0						
Part X	(II, line 4b	Oth Amts included on return not in financi MEMBER CHARITIES 22,101,199 CFC-0 1,397,377 Total 28,886,164						

Jenedale 2 (1 01111 330) 2013		i age 5
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
-		

Schedule D (Form 990) 2014

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SCHEDULE F

Department of the Treasury

Internal Revenue Service

(Form 990)

As Filed Data -

DLN: 93493047020166

Statement of Act

Statement of Activities Outside the United States

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

► Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization GLOBAL IMPACT		Employer identification number					
	ation on Activitie , Part IV, line 14b.		ne United States. Co	52-1273585 Emplete if the organize	ation answered		
1 For grantmakers. Does to and other assistance, the used to award the grants	e grantees' elıgıbılı	ty for the grar	its or assistance, and t	the selection criteria	「✓ Yes 「 No		
2 For grantmakers. Descri	nited States.	·			s and other		
3 Activites per Region (The f	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in region		
(1) East Asia and the Pacific		•	<u> </u>	Grants	19,84		
(2) Europe (Including Iceland a Greenland)	and		Grantmakıng	Grants	926,764		
(3) North America			Grantmakıng	Grants	188,50		
(4)							
(5)							
3a Sub-total b Total from continuation she to Part I					1,135,114		
c Totals (add lines 3a and 3b) [1,135,114		

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

1 (a) Name of organization	(b) IRS code	(c) Region	(I) D					
	section and EIN (if applicable)	(d) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

8

3 Enter total number of other organizations or entities

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

Part III can be duplicated if additional space is needed.							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) individual	East Asia and the Pacific	1	14,501	check			
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	•	<u> </u>			•		

Part IV Foreign Forms

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Parts I, II and III	The organization uses the accrual basis of accounting to account for expenditures and grants reported under Parts I, II and III

Additional Data

Software ID:

Software Version:

EIN: 52-1273585

Name: GLOBAL IMPACT

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	general support	5,431	check			
		Europe (Including Iceland and Greenland)	General Suuport	7,594	Check			
		Europe (Including Iceland and Greenland)	General Support	7,594	Check			
		Europe (Including Iceland and Greenland)	General Support	726,509	Check			

, Form 990 Schedv	ile F Part II	- Grants or Entition	es Outside The Un	ited States	_	_	_	<u>.</u>
(a) Name of organization	(b) IRS code section and EIN(if applicable) (c) Region (d) Purpose of grant		(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)	
		Europe (Including Iceland and Greenland)	General Support	10,000	Check			
		North America	General Support	188,508	Check			
		Europe (Including Iceland and Greenland)	General Support	145,523	Check			
		Europe (Including Iceland and Greenland)	General Support	29,545	Check			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

DLN: 93493047020166 OMB No 1545-0047

Inspection

Grants and Other Assistance to Organizations, (Form 990) **Governments and Individuals in the United States**

Open to Public

Department of the Treasury
Internal Revenue Service
Name of the organization

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization GLOBAL IMPACT

Employer identification number

52-1273585

Part I General Information	n on Grants and	l Assistance					
 Does the organization maintain r the selection criteria used to awa Describe in Part IV the organiza 	ard the grants or as:	sistance?					∀Yes
Part II Grants and Other As Form 990, Part IV, line							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	287
3	Enter total number of other organizations listed in the line 1 table	0

Schedule I (Form 990) 2014										
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.									
	Part III can be duplicated if additional space is needed.									

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental In	iformation. Provide the information required in Part 1, line 2, Part 111, column (b), and any other additional information.
Return Reference	Explanation
Part I Description of Procedure for Monitoring Use of Funds	The organization uses a combination of an annual recertification process and third party vendors to ensure compliance

Schedule I (Form 990) 2014

Additional Data

Software ID:

Software Version:

EIN: 52-1273585

Name: GLOBAL IMPACT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACCION International56 Roland Street Suite 300 Boston, MA 02129	13-2535763	501(c)(3)	5,981				General Support
African Medical and Research Foundation (AMREF)4 West 43rd Street 2nd Floor New York, NY 10036	13-1867411	501(c)(3)	8,181				General Support
Africare440 R Street NW Washington, DC 20001	23-7116952	501(c)(3)	55,289				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
A merican Jewish World Service45 West 36th Street New York, NY 10018	22-2584370	501(c)(3)	20,905				General Support				
American Near East Refugee Aid (ANERA)1522 K Street NW Suite 600 Washington, DC 20005	52-0882226	501(c)(3)	10,534				General Support				
A meriCares88 Hamilton A venue Stamford, CT 06902	06-1008595	501(c)(3)	72,830				General Support				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Ashoka1700 N Moore St Suite 2000 Arlington,VA 22209	51-0255908	501(c)(3)	8,132				General Support				
Boy Scouts of America - Aloha Council #10442 Puiwa Road Honolulu, HI 96817	99-0073482	501(c)(3)	14,485				General Support				
Boy Scouts of America - Transatlantic CouncilUnit 29242 APO,AP 09102	98-0000121	501(c)(3)	15,970				General Support				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
CARE (Cooperative for Assistance and Relief Everyw 151 Ellis Street NE Atlanta, GA 30303	13-1685039	501(c)(3)	135,363				General Support				
ChildFund International2821 Emerywood Pkwy Richmond, VA 23294	54-0536100	501(c)(3)	5,477				General Support				
Church World ServiceCROP 28606 Phillips Street PO Box 968 Elkhart,IN 46515	13-4080201	501(c)(3)	8,512				General Support				

Form 990,Schedule I, Par	rt II, Grants ar	id Other Assistance	e to Domestic Org:	anizations and Do	mestic Governmer	its.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Doctors Without Borders USA 333 Seventh Avenue 2nd Floor New York, NY 100015004	13-3433452	501(c)(3)	2,955,225				General Support
Episcopal Relief & Development815 Second Avenue New York, NY 10017	73-1635264	501(c)(3)	43,087				General Support
FINCA International1101 14th Street NW 11th Floor Washington, DC 20005	13-3240109	501(c)(3)	19,562				General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Gırl Scouts Overseas420 Fıfth Avenue New York, NY 100182798	13-1624016	501(c)(3)	7,749				General Support			
Heifer International 1 World Avenue Little Rock, AR 72202	35-1019477	501(c)(3)	227,562				General Support			
Helen Keller International 352 Park Avenue South Suite 1200 New York, NY 10010	13-5562162	501(c)(3)	6 ,6 5 3				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
International Medical Corps 1919 Santa Monica Blvd Suite 400 Santa Monica, CA 90404	95-3949646	501(c)(3)	11,825				General Support			
International Orthodox Christian Charities110 West Road Suite 360 Baltimore, MD 21204	25-1679348	501(c)(3)	39,034				General Support			
International Relief Teams 4560 Alvarado Canyon Road Suite 2G San Diego, CA 92120	33-0412751	501(c)(3)	10,200				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
International Rescue Committee122 East 42nd St 12th Floor New York, NY 101681289	13-5660870	501(c)(3)	67,760				General Support		
Lutheran World Relief700 Light Street Baltimore, MD 21230	13-2574963	501(c)(3)	176,173				General Support		
Mercy Corps3015 SW First Avenue Portland, OR 97201	91-1148123	501(c)(3)	64,986				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Operation Smile Inc6435 Tidewater Drive Norfolk, VA 23509	54-1460147	501(c)(3)	42,609				General Support			
Oxfam America226 Causeway Street 5th Floor Boston, MA 02114	23-7069110	501(c)(3)	151,927	_			General Support			
Partners in Health888 Commonwealth Ave 3rd Floor Boston, MA 02215	04-3567502	501(c)(3)	72,026				General Support			

Form 990,Schedule I, Par	rt II, Grants ar	id Other Assistance	e to Domestic Org	anizations and Do	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance								
Plan USA 155 Plan Way Warwick, RI 028661099	13-5661832	501(c)(3)	8,146				General Support								
Project HOPE - the People- to-people Health Foundat255 Carter Hall Lane Millwood, VA 22646	53-0242962	501(c)(3)	36,268				General Support								
Rotary Foundation of Rotary International1560 Sherman Avenue Evanston,IL 602013698	36-3245072	501(c)(3)	20,966				General Support								

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Salvation Army World Service Office (SAWSO)615 Slaters Lane Alexandria,VA 22314	13-2923701	501(c)(3)	162,083				General Support		
Save the Children Federation Inc54 Wilton Road Westport, CT 06880	06-0726487	501(c)(3)	325,594				General Support		
US Fund for UNICEF125 Maiden Ln 10th FL New York, NY 10038	13-1760110	501(c)(3)	102,012				General Support		

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Unitarian Universalist Service Committee689 Massassachusetts Avenue Cambridge,MA 02139	04-6186012	501(c)(3)	23,745				General Support		
United Methodist Committee on Relief475 Riverside Drive Room 330 New York, NY 10115	13-5562279	501(c)(3)	164,803				General Support		
Water For People666 West Quincy Ave Denver, CO 80235	84-1166148	501(c)(3)	44,673				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
William J Clinton Foundation 610 President Clinton Avenue Little Rock, AR 72201	31-1580204	501(c)(3)	24,107				General Support			
Women for Women International4455 Connecticut Ave NW Suite 200 Washington, DC 20008	52-1838756	501(c)(3)	28,762				General Support			
World Childhood Foundation 183 Madison Ave Suite 715 New York, NY 10016	16-1559586	501(c)(3)	7,111				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
World Renew (CRWRC)2850 Kalamazoo Avenue SE Grand Rapids, MI 495600600	38-1708140	501(c)(3)	9,824				General Support		
Fidesco USA 2204 South Cedar Blvd Allentown, PA 18103	26-2457618	501(c)(3)	25,080				General Support		
The Global Hunger Project5 Union Square West 7th Flr New York, NY 10003	94-2443282	501(c)(3)	18,280				General Support		

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NRA CIVIL RIGHTS DEFENSE FUND11250 Waples Mill Rd Fairfax,VA 220309400	52-1136665	501(c)(3)	11,936				General Support			
NATIONAL PUBLIC RADIO PO Box 79540 Baltimore, MD 21279	52-0907625	501(c)(3)	20,829				General Support			
ARCHDIOCESE FOR MILITARY SVC USA1025 Michigan Ave NE Washington, DC 20017	13-1624090	501(c)(3)	28,990				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Human Service Charities AmericPO Box 79770 Baltimore,MD 212799770	94-3240353	501(c)(3)	25,337				General Support		
Christian Service Charities PO Box 79704 Baltimore, MD 212799704	94-3193374	501(c)(3)	283,352				General Support		
America's Charities14150 Newbrook Dr Ste 110 Chantilly,VA 20151	54-1517707	501(c)(3)	123,850				General Support		

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DUCKS UNLIMITED INCOne Waterfowl Way Memphis,TN 38120	13-5643799	501(c)(3)	10,027				General Support			
EarthShareYour CFC Region Dept 4011 Washington, DC 20042	52-1601960	501(c)(3)	91,446				General Support			
Animal Charities AmericaPO Box 45754 San Francisco, CA 94145	94-3193389	501(c)(3)	237,978				General Support			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
A merican Red Cross2025 E St NW Washington, DC 20006	53-0196605	501(c)(3)	121,853				General Support			
Charities Without Borders (DoPO Box 45754 San Francisco, CA 94145	94-3148590	501(c)(3)	66,925				General Support			
Military Family & Veterans SerPO Box 45754 San Francisco, CA 94145	94-3193418	501(c)(3)	386,822				General Support			

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Sports Charities USAPO Box 45754 San Francisco, CA 94145	47-0863988	501(c)(3)	33,308				General Support		
Educate AmericaPO Box 45754 San Francisco, CA 94145	94-3193387	501(c)(3)	44,865				General Support		
Children First - America's Cha14150 Newbrook Dr Ste 110 Chantilly,VA 20151	30-0186795	501(c)(3)	129,547				General Support		

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Christian Charities USAPO Box 45754 San Francisco, CA 94145	94-3255961	501(c)(3)	113,584				General Support		
NATIONAL FALLEN FIREFIGHTERS FNDPO Drawer 498 Emmitsburg, MD 21727	52-1832634	501(c)(3)	6,059				General Support		
FOOD FOR THE POOR INC 6401 Lyons Rd Coconut Creek, FL 33073	59-2174510	501(c)(3)	8,178				General Support		

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UNITED NEGRO COLLEGE FUND1805 7th St NW Washington, DC 20001	13-1624241	501(c)(3)	15,046				General Support			
Build A Better World125 Washington St Ste 201 Salem, MA 01970	20-1348415	501(c)(3)	15,168				General Support			
CancerCure Amer Care UnderstPO Box 45754 San Francisco, CA 94145	81-0648432	501(c)(3)	177,579				General Support			

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Jewish Charities AmericaPO Box 45754 San Francisco, CA 94145	68-0473577	501(c)(3)	8,161				General Support		
Medical Research Charities 125 Washington St Ste 201 Salem, MA 01970	94-3148591	501(c)(3)	75,518				General Support		
Hispanic & Latino Charities thPO Box 45754 San Francisco, CA 94145	68-0455509	501(c)(3)	26,506				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Health First - America's Chari14150 Newbrook Dr Ste 110 Chantilly, VA 20151	30-0186796	501(c)(3)	59,754				General Support		
Aid for AfricaPO Box 8734 Topeka, KS 66608	06-1703295	501(c)(3)	31,551				General Support		
Human and Civil Rights Org of Amer125 Washington St Ste 201 Salem, MA 01970	94-3193388	501(c)(3)	27,002				General Support		

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USO 2111 Wilson Blvd Ste 1200 Arlington, VA 22201	13-1610451	501(c)(3)	125,099				General Support		
WOUNDED WARRIOR PROJECT4899 Belfort Rd Ste 300 Jacksonville,FL 32256	20-2370934	501(c)(3)	296,234				General Support		
Mental Health & Addiction Netw125 Washington St Ste 201 Salem, MA 01970	20-1358397	501(c)(3)	17,169				General Support		

Form 990,Schedule I, Pai	rt II, Grants an	<u>id Other Assistance</u>	e to Domestic Org	anizations and Do	<u>mestic Governmer</u>	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Conservation & Preservation ChPO Box 45754 San Francisco, CA 94145	94-3217738	501(c)(3)	66,464				General Support
Children's Charities America PO Box 45754 San Francisco, CA 94145	94-3148588	501(c)(3)	173,613				General Support
Health & Medical Research CharPO Box 45754 San Francisco, CA 94145	94-3217739	501(c)(3)	248,118				General Support

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NRA FOUNDATION INC THE11250 Waples Mill Rd Fairfax, VA 22030	52-1710886	501(c)(3)	8,801				General Support			
Women Children & Family ServiPO Box 45754 San Francisco, CA 94145	94-3193386	501(c)(3)	75,764				General Support			
Children's Medical & ResearchPO Box 45754 San Francisco,CA 94145	27-0093393	501(c)(3)	106,524				General Support			

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Community Health Charities PO Box 75153 Baltimore, MD 21275	13-6167225	501(c)(3)	463,534				General Support		
Arts Federation125 Washington St Ste 201 Salem, MA 01970	03-0524939	501(c)(3)	10,085				General Support		
Military & Civilians United fo 125 Washington St Ste 201 Salem, MA 01970	20-5300252	501(c)(3)	6,626				General Support		

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Family and Health Charities 125 Washington St Ste 201 Salem, MA 019703131	20-5300189	501(c)(3)	8,114				General Support			
Military Support Groups AmericPO Box 45754 San Francisco, CA 94145	27-2242752	501(c)(3)	112,023				General Support			
FREEDOM FROM RELIGION FOUND INC304 West Washington Ave Madison, WI 53703	39-1302520	501(c)(3)	7,739				General Support			

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Catholic Service OrganizationsPO Box 45754 San Francisco, CA 94145	45-1679647	501(c)(3)	127,689				General Support	
Christian Children's Charities PO Box 45754 San Francisco, CA 94145	45-2919697	501(c)(3)	33,493				General Support	
Charities Under 1 Overhead PO Box 45754 San Francisco, CA 94145	27-3132554	501(c)(3)	89,220				General Support	

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
TEAM RED WHITE AND BLUE1110 W Platt St Tampa,FL 33606	27-2196347	501(c)(3)	7,477				General Support	
LUPUS RESEARCH INSTITUTE330 Seventh Ave Ste 1701 New York, NY 10001	06-1565950	501(c)(3)	9,706				General Support	
Child Aid USA125 Washington St Ste 201 Salem, MA 01970	26-3061082	501(c)(3)	13,317				General Support	

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Charities Under 5 Overhead PO Box 45754 San Francisco, CA 94145	27-3132492	501(c)(3)	27,539				General Support
ARMED FORCES AID CAMPAIGN7410 Heritage Village Plaza Gainesville, VA 20155	84-1149039	501(c)(3)	5,069				General Support
PAT TILLMAN FOUNDATION217 N Jefferson St Suite 602 Chicago,IL 60661	20-1072336	501(c)(3)	5,758				General Support

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HONOR FLIGHT INC300 East Auburn Ave Springfield, OH 45505	20-2751460	501(c)(3)	5,137				General Support	
Christian Aid USA125 Washington St Ste 201 Salem, MA 01970	26-3070569	501(c)(3)	14,647				General Support	
Diabetes Charities America 125 Washington Street Suite 201 Salem, MA 01970	20-1468898	501(c)(3)	16,851				General Support	

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National Black Federation Char17 Academy Street Newark,NJ 07102	22-3596098	501(c)(3)	16,524				General Support		
WOUNDED WARRIORS FAMILY SUPPORT920 S 107th Ave Ste 250 Omaha,NE 681144719	20-1407520	501(c)(3)	19,577				General Support		
Wild Animals WorldwidePO Box 45754 San Francisco, CA 94145	20-8774272	501(c)(3)	45,720				General Support		

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
K9S FOR WARRIORS260 South Roscoe Blvd Ponte Vedra Beach, FL 32082	27-5219467	501(c)(3)	20,141				General Support			
AMERICA BREAST CANCER FOUNDATION10400 Little Patuxent Pky Ste 480 Columbia, MD 21044	52-2031814	501(c)(3)	9,108				General Support			
Unique & Noteworthy CharitiesPO Box 45754 San Fancisco, CA 94145	46-3016556	501(c)(3)	53,049				General Support			

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ChildAid International125 Washington St Ste 201 Salem, MA 01970	20-1358458	501(c)(3)	19,557				General Support		
United Way of Central Alabama Inc3600 8th Ave South Birmingham, AL 35232	63-0288846	501(c)(3)	10,840				General Support		
Local Independent Charities of AmericaPO Box 45754 San Francisco, CA 94145	94-3042430	501(c)(3)	12,140				General Support		

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Local Independent Charities of TexasPO Box 45755 San Francisco, CA 94145	94-3219813	501(c)(3)	7,194				General Support			
Community Health Charities of Florida Inc6850 Belfort Oaks Place Jacksonville,FL 32216	59-3218006	501(c)(3)	7,944				General Support			
United Way of the National Capital Area1577 Spring Hill Rd Ste 420 Vienna, VA 22182	53-0234290	501(c)(3)	13,062				General Support			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Anımal Welfare Fund Inc125 Washıngton St Ste 201 Salem, MA 01970	26-0610986	501(c)(3)	6,441				General Support			
Community Health Charities of the National Capital211 N Union St Ste 100 Alexandria, VA 22314	52-1089036	501(c)(3)	6,369				General Support			
AMERICAN NATIONAL RED CROSSPO Box 60310 Midland,TX 79711	53-0196605	501(c)(3)	14,445				General Support			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Community Health Charities PO Box 758858 Baltimore,MD 21275	75-0954584	501(c)(3)	6,866				General Support			
Community Health Charities 902 Rarig Ave Columbus, OH 43219	31-1055345	501(c)(3)	6,205				General Support			
Community Health Charities of CaliforniaPO Box 758858 Baltimore, MD 21275	94-1732873	501(c)(3)	14,495				General Support			

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Alcoa Foundation201 Isabella St Pittsburgh,PA 15212	25-1128857	501(c)(3)	292,689				General Support		
ALS Association - National Office1275 K St NW 250 Washington, DC 20005	13-3271855	501(c)(3)	6,675				General Support		
Alzheimers Association- Central Ohio1379 Dublin Rd Columbus, OH 43215	31-0996236	501(c)(3)	5,851				General Support		

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ALZHEIMERS DISEASE AND RELATED DISORDERS Assoc2 Jefferson Plaza Poughkeepsie,NY 12601	14-1695487	501(c)(3)	6,057				General Support			
American Cancer Society - Ohio Div5555 Frantz Rd Dublin,OH 43017	13-1788491	501(c)(3)	7,804				General Support			
American Diabetes Association1701 N Beauregard St Alexandria,VA 22311	13-1623888	501(c)(3)	9,696				General Support			

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AMERICAN DIABETES ASSOCIATION INC1701 N Beauregard Street Alexandria,VA 22311	13-1623888	501(c)(3)	5,383				General Support		
American Heart Association- Columbus5455 North High Street Columbus,OH 432141127	13-5613797	501(c)(3)	5,753				General Support		
A merican Red Cross - NationalPO Box 37295 Washington, DC 20013	53-0196605	501(c)(3)	15,456				General Support		

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ARTHUR G JAMES CANCER HOSPITAL300 West 10th Avenue Columbus,OH 43210	31-1301428	501(c)(3)	8,176				General Support		
ASPCA424 East 92nd Street New York, NY 10128	13-1623829	501(c)(3)	13,888				General Support		
Ballet Metropolitan Inc322 Mt Vernon Ave Columbus, OH 432152131	31-0858562	501(c)(3)	6,865				General Support		

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Baps Charities81 Suttons Ln Ste 201 Piscataway, NJ 08854	26-1530694	501(c)(3)	8,031				General Support		
Barat Academy17815 Wild Horse Creek Road Chesterfield, MO 63005	20-2666579	501(c)(3)	7,150				General Support		
Belmont-Redwood Shores School FdnPO Box 5196 Belmont, CA 94002	91-2159650	501(c)(3)	5,591				General Support		

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BOY SCOUTS OF AMERICA 60 Wellington Road Milford,CT 06460	06-0646793	501(c)(3)	12,764				General Support			
Boy Scouts of America Jayhawk1020 SE Monroe Topeka, KS 66612	48-0543748	501(c)(3)	11,577				General Support			
Boys and Girls Club of Topeka550 SE 27th Topeka,KS 66605	48-0636732	501(c)(3)	44,734				General Support			

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BRIDGEPORT RESCUE MISSION INC481 Pequonnock Street Bridgeport, CT 06604	06-1362705	501(c)(3)	12,487				General Support			
Campus Crusade for Christ 100 Lake Hart Drive 2400 Orlando,FL 32832	95-6006173	501(c)(3)	9,897				General Support			
Catholic Charities of Fairfield 238 Jewett Avenue Bridgeport, CT 06606	06-0653053	501(c)(3)	12,430				General Support			

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Catholic Foundation5310 Harvest Hill Rd Dallas,TX 75230	75-1106620	501(c)(3)	10,000				General Support			
Catholic Relief Services 228 W Lexington St Baltimore, MD 21201	13-5563422	501(c)(3)	36,285				General Support			
Center of Hope Project Deserve400 N Emporia Wichita, KS 67202	48-0578624	501(c)(3)	16,497				General Support			

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Central Ohio Parkinson Society2800 Corporate Exchange Dr 265 Columbus,OH 43231	31-0986384	501(c)(3)	5,028				General Support			
Chautauqua InstitutionPO Box 28 Chautauqua,NY 14722	16-0758844	501(c)(3)	8,000				General Support			
Childrens Hunger Alliance 1105 Schrock Rd Ste 505 Columbus, OH 43229	23-7303509	501(c)(3)	9,753				General Support			

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Christ Church Inc43547 Kiplington Sq South Riding, VA 20152	65-1262156	501(c)(3)	30,855				General Support			
Christian Life School10700 75th Street Kenosha, WI 53142	39-2003070	501(c)(3)	23,728				General Support			
CHRISTIAN LIFE SCHOOL Fdn INC10700 75TH ST KENOSHA,WI 531428331	39-2003070	501(c)(3)	6,667				General Support			

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Columbus Council on World Affairs51 Jefferson Avenue Columbus,OH 43215	51-0180760	501(c)(3)	10,456				General Support			
Columbus Museum of Art480 East Broad Street Columbus,OH 43215	31-4379447	501(c)(3)	12,820				General Support			
COLUMBUS SYMPHONY ORCHESTRA INC55 East State Street Columbus,OH 43215	31-6402408	501(c)(3)	6,923				General Support			

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COMMUNITY CENTERS INC 61 East Putnam Avenue Greenwich, CT 06830	06-0703570	501(c)(3)	7,500				General Support			
Community Shelter Board111 Liberty St Ste 150 Columbus,OH 43215	31-1181284	501(c)(3)	10,219				General Support			
Connecticut Humane Society 701 Russell Road Newington, CT 06111	06-0667605	501(c)(3)	5,812				General Support			

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Covenant Day School800 Fullwood Lane Matthews,NC 28105	56-1656570	501(c)(3)	7,500				General Support		
CRISTO REY JESUIT HIGH SCHOOL420 S CHESTER ST BALTIMORE, MD 212312729	05-0632734	501(c)(3)	16,460				General Support		
Dana-Farber Cancer Institute 450 Brookline Ave Boston, MA 022155450	04-2263040	501(c)(3)	5,928				General Support		

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Davis Phinney Foundation 4730 Table Mesa Dr Boulder,CO 80305	20-0813566	501(c)(3)	5,750				General Support			
Design Outreach IncPO Box 763 Winona Lake,IN 46590	46-0779062	501(c)(3)	15,546				General Support			
Doctors Without Borders USAPO Box 5030 Hagerstown, MD 21741	13-3433452	501(c)(3)	24,658				General Support			

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Drake University2507 University Avenue Des Moines,IA 50311	42-0680460	501(c)(3)	6,150				General Support			
EMMA WILLARD SCHOOL 285 Pawling Avenue Troy, NY 12180	14-1338390	501(c)(3)	5,500				General Support			
Faith Mission Inc500 W Wilson Bridge Rd Columbus,OH 43085	31-0809759	501(c)(3)	25,358				General Support			

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Feed My Starving Children 401 93rd Ave NW Coon Rapids, MN 55433	41-1601449	501(c)(3)	20,196				General Support			
FIRST COMMUNITY FOUNDATION INC1320 CAMBRIDGE BLVD COLUMBUS,OH 432123207	31-6027662	501(c)(3)	15,000				General Support			
Fisher House Foundation111 Rockville Pike Ste 420 Rockville,MD 20850	11-3158401	501(c)(3)	5,868				General Support			

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Fistula Foundation1922 The Alameda 302 San Jose, CA 951261430	77-0547201	501(c)(3)	8,686				General Support			
Flatirons Community Church 355 W South Boulder Rd Lafayette, CO 80026	47-0857845	501(c)(3)	5,660				General Support			
Flint Hills Breadbasket905 Yuma St Manhattan, KS 66502	48-0952757	501(c)(3)	8,300				General Support			

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Food for Lane County770 Bailey Hill Rd Eugene, OR 97402	93-0888347	501(c)(3)	5,404				General Support			
Food For The Poor Inc6401 Lyons Rd Coconut Creek, FL 33073	59-2174510	501(c)(3)	11,614				General Support			
FORT HILL CHRISTIAN YOUTH CAMP13500 Fort Hill Road Hillsboro,OH 45133	31-0804748	501(c)(3)	11,260				General Support			

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Friends of Bell School3730 N Oakley Ave Chicago,IL 60618	91-1889991	501(c)(3)	5,450				General Support		
FULBRIGHT ASSOCIATION INC666 11th Street NW Suite 525 Washington, DC 20001	52-1821935	501(c)(3)	5,880				General Support		
Godman Guild Association 303 E 6th Ave Columbus, OH 43201	31-4379478	501(c)(3)	5,690				General Support		

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Goodcity5049 W Harrison Chicago, IL 60644	36-3467921	501(c)(3)	41,841				General Support			
Habitat for Humanity-Gtr Columbus3140 Westerville Rd Columbus,OH 43224	31-1217994	501(c)(3)	7,233				General Support			
Habitat for Humanity - Twin Cities1954 University Ave W St Paul, MN 55104	36-3363171	501(c)(3)	5,809				General Support			

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HABITAT FOR HUMANITY Intl INCPO BOX 1584 GASTONIA,NC 280531584	56-1634454	501(c)(3)	9,192				General Support		
Habitat For Humanity - Louisville1620 Bank Street Louisville,KY 40203	61-1242075	501(c)(3)	13,000				General Support		
Hackley School293 Benedict Ave Tarrytown,NY 10591	13-1740452	501(c)(3)	7,500				General Support		

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Hardın Valley Academy AthleticPO Box 53406 Knoxville,TN 37950	51-0670175	501(c)(3)	9,115				General Support		
Harvesters215 SE Quincy Topeka,KS 66603	43-1208665	501(c)(3)	39,519				General Support		
Heifer InternationalPO Box 8058 Little Rock, AR 72203	35-1019477	501(c)(3)	8,273				General Support		

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HEIFER PROJECT INTERNATIONAL1 World Avenue Litlle Rock, AR 72202	35-1019477	501(c)(3)	7,253				General Support		
Helping Hands Humane Society5720 SW 21st St Topeka,KS 66604	48-0597124	501(c)(3)	23,280				General Support		
HELPING HANDS HUMANE SOCIETY INC5720 SW 21st St Topeka, KS 66604	48-0597124	501(c)(3)	13,668				General Support		

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Hill House Inc10 Riverside Ave Riverside, CT 06878	06-0989007	501(c)(3)	10,000				General Support		
HILLIARD BASEBALL ASSOCIATION INCPO Box 202 Hilliard,OH 43026	31-1022221	501(c)(3)	11,000				General Support		
Homeless Families Fdn of Columbus33 N Grubb St Columbus,OH 43215	31-1179492	501(c)(3)	6,601				General Support		

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Hope on the Slopes1313 Broadway Tacoma,WA 98402	45-3908130	501(c)(3)	7,128				General Support		
HORIZON COMMUNITY ENGAGEMENT CORP34 GLENCOE RD COLUMBUS,OH 432143710	26-3052918	501(c)(3)	30,000				General Support		
Humane Society - Capital Area3015 Scioto-Darby Executive Ct Hilliard,OH 43026	31-4379492	501(c)(3)	8,021				General Support		

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Injured Marine Semper Fi FundBox 555193 Camp Pendleton, CA 92055	26-0086305	501(c)(3)	9,673				General Support			
Inspirica141 Franklin St Stamford, CT 06901	06-1172535	501(c)(3)	8,125				General Support			
Institute of Intl Education (West Coast Office)530 Bush Street Suite 1000 San Francisco, CA 94108	13-1624046	501(c)(3)	10,095				General Support			

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James Cancer Hospital Foundation300 West 10th Avenue Columbus,OH 43210	31-1301428	501(c)(3)	8,695				General Support		
Junior A chievement of Kansas 3735 SW Wanamaker Road Topeka, KS 66610	48-0731855	501(c)(3)	22,732				General Support		
Junior Achievement-No California3003 Oak Road Suite 109 Walnut Creek, CA 94597	94-1322179	501(c)(3)	7,280				General Support		

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Kansas Children's Service League215 W 6th Emporia,KS 66801	48-0543749	501(c)(3)	5,852				General Support		
Kansas Food Bank1919 East Douglas Ave Wichita, KS 67211	48-0959213	501(c)(3)	17,125				General Support		
KANSAS FOOD BANK WAREHOUSE INC1919 East Douglas Avenue Wichita, KS 67211	48-0959213	501(c)(3)	9,360				General Support		

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Kansas Humane Society- Wichita Inc3313 N Hillside St Wichita, KS 67220	48-0554339	501(c)(3)	25,007				General Support		
Kansas State University Foundation2323 Anderson Ave Ste 500 Manhattan, KS 665022911	48-0667209	501(c)(3)	13,680				General Support		
Lafayette College307 Markle Hall Easton,PA 18042	24-0795686	501(c)(3)	6,000				General Support		

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Leadership Education Asian Pacific327 E 2nd St Ste 226 Los Angeles, CA 90012	95-3879677	501(c)(3)	7,500				General Support			
Leesburg Football Club 22788 Portico Place Ashburn, VA 20148	46-2120842	501(c)(3)	5,020				General Support			
Leukemia & Lymphoma Society - Greater San Francisc221 Main Street San Francisco, CA 94105	13-5644916	501(c)(3)	23,651				General Support			

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Lifecare Alliance1699 West Mound Street Columbus,OH 43223	31-4379494	501(c)(3)	5,968				General Support		
Lifetime Assistance Foundation Inc425 Paul Rd Rochester, NY 14624	13-3754497	501(c)(3)	5,120				General Support		
Lincoln Ctr for the Performing Arts 70 Lincoln Center Plaza New York, NY 10023	13-1847137	501(c)(3)	10,000				General Support		

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Los Altos Educational FoundationPO Box 98 Los Altos,CA 940230098	94-2862793	501(c)(3)	8,410				General Support			
Lumen Christi Catholic School580 E Stevens St Indianapolis,IN 46203	56-2289793	501(c)(3)	6,000				General Support			
Lutheran Social Services- Central OH500 W Wilson Bridge Rd Ste 245 Worthington, OH 43085	31-4412586	501(c)(3)	23,628				General Support			

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Meals on Wheels Shawnee- Jefferson2701 SW East Circle Dr S Topeka,KS 66606	48-0792685	501(c)(3)	22,293				General Support			
Memorial Sloan-Kettering Cancer Ctr1275 York Ave New York, NY 10065	13-1924236	501(c)(3)	6,723				General Support			
Metropolitan Golf Assoc Fdn 49 Knollwood Rd Elmsford, NY 105232813	13-3637689	501(c)(3)	5,040				General Support			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Midland Care Connection200 SW Frazier Circle Topeka, KS 66606	48-0883888	501(c)(3)	20,292				General Support			
MIDLAND CARE CONNECTION INC200 SW FRAZIER CIR TOPEKA,KS 666062800	48-0883888	501(c)(3)	9,443				General Support			
Mid-Ohio Food Bank3960 Brookhaven Drive Grove City,OH 43123	31-0865343	501(c)(3)	39,653				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MID-OHIO FOODBANK 3960 Brookhaven Drive Grove City,OH 43123	31-0865343	501(c)(3)	31,798				General Support			
MID-WESTERN CHILDRENS HOME4585 Long Spurling Road Pleasant Plain, OH 45162	31-0722339	501(c)(3)	10,000				General Support			
Military Officers Assoc of America201 North Washington Street Alexandria,VA 22314	54-1659039	501(c)(3)	19,200				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
National MS Society Lone Star8111 N Stadium Dr Ste 100 Houston,TX 77054	74-1266225	501(c)(3)	6,808				General Support		
NATIONAL MULTIPLE SCLEROSIS SOCIETYPO Box 845945 Boston, MA 022845945	04-2178884	501(c)(3)	6,178				General Support		
Nationwide Childrens Hospital Fdn700 Childrens Dr Columbus,OH 43205	31-1036370	501(c)(3)	10,067				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Nature Conservancy4245 N Fairfax Dr Ste 100 Arlington,VA 22203	53-0242652	501(c)(3)	10,570				General Support			
NORTH COBB CHRISTIAN SCHOOL INC4500 Lakeview Drive Kennesaw,GA 30144	58-1519089	501(c)(3)	10,000				General Support			
NORTHPOINT COMMUNITY CHURCH4350 Northpoint Parkway Alpharetta, GA 30022	58-2203569	501(c)(3)	5,465				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Ohio State University Foundation1480 W Lane Ave Columbus,OH 43221	31-1145986	501(c)(3)	98,063				General Support		
OLD CAPITOL FOUNDATION311 BANKER BLVD VANDALIA,IL 624711941	37-1400797	501(c)(3)	20,000				General Support		
Open Door Mission-Omaha PO Box 8340 Omaha,NE 681080340	47-0411375	501(c)(3)	7,335				General Support		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Palmer Drug Abuse Program PO Box 782155 San Antonio,TX 78278	74-2216041	501(c)(3)	6,750				General Support			
Paul Taylor Dance Company Fdn551 Grand St New York, NY 10002	13-2665475	501(c)(3)	6,050				General Support			
Pitney Bowes Relief Fund1 Elmcroft Rd MSC 62-08 Stamford, CT 06926	27-3398652	501(c)(3)	75,492				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PROJECT TOPEKA1315 SW ARROWHEAD ROAD TOPEKA,KS 666044056	30-0596254	501(c)(3)	6,920				General Support			
Project Topeka Food Drive 1315 SW Arrowhead Dr Topeka, KS 66604	30-0596254	501(c)(3)	17,017				General Support			
REGENTS OF THE UNIVERSITY OF MI3003 South State St Ste 800 Ann Arbor, MI 48109	38-6006309	501(c)(3)	9,392				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RONALD MCDONALD HOUSE-wichita1110 North Emporia Street Wichita,KS 67214	48-0918101	501(c)(3)	8,082				General Support			
Ronald McDonald House of Wichita1110 N Emporia Wichita, KS 67214	48-0918101	501(c)(3)	16,970				General Support			
Roundabout Theatre Company Inc231 W 39th St Ste 1200 New York, NY 10018	13-6192346	501(c)(3)	10,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Saint John the Baptist School 500 S 18th St Plattsmouth, NE 680482001	05-2830531	501(c)(3)	5,600				General Support			
Salvation Army - Columbus 966 East Main Street Columbus, OH 43205	13-5562351	501(c)(3)	12,005				General Support			
Sankara Eye Foundation USA 1900 McCarthy Blvd 302 Milpitas,CA 95035	77-6141976	501(c)(3)	24,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Second Harvest Food Bank 4001 North 1st Street San Jose, CA 95134	94-2614101	501(c)(3)	46,028				General Support			
Shadoart Productions Inc 503 S Front St Columbus, OH 43215	31-1340461	501(c)(3)	10,575				General Support			
Sierra Club Foundation85 2nd St Ste 750 San Francisco, CA 94105	94-6069890	501(c)(3)	5,202				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Smile Train41 Madison Ave New York, NY 10010	13-3661416	501(c)(3)	6,375				General Support			
Smoky Row Brethren Church 7260 Smoky Row Road Columbus,OH 43235	31-0992807	501(c)(3)	28,500				General Support			
St Gabriel Radio Inc4673 Winterset Dr Columbus, OH 43220	30-0220140	501(c)(3)	6,438				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
St Jude Children's Research 501 St Jude Place Memphis,TN 38105	62-0646012	501(c)(3)	46,493				General Support			
St Patricks Catholic ElementaryPO Box 10 Elkhorn,NE 68022	47-0379377	501(c)(3)	7,833				General Support			
Stamford Symphony Orchestra Inc263 Tresser Blvd Stamford, CT 06901	06-6100039	501(c)(3)	9,375				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Susan G Komen - Columbus 929 Eastwind Dr Ste 211 Westerville, OH 43081	75-2844651	501(c)(3)	9,657				General Support			
Syracuse University820 Comstock Ave Ste 214 Syracuse, NY 132445040	15-0532081	501(c)(3)	15,600				General Support			
TARC INC2701 SW Randolph Avenue Topeka,KS 66611	48-6086732	501(c)(3)	38,256				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TELANGANA DEVELOPEMENT FORUM USA9 LEVAN CT BRIDGEWATER,NJ 088075772	22-3674333	501(c)(3)	9,975				General Support			
Telugu Assoc of North America Inc513 BOULDER DR SOUTHLAKE,TX 76092	36-3060732	501(c)(3)	8,000				General Support			
TULANE EDUCATIONAL FUNDP O Box 61075 New Orleans, LA 70161	72-0423889	501(c)(3)	7,000				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Topeka Rescue Mission600 N Kansas Topeka,KS 66608	48-0688068	501(c)(3)	96,090				General Support			
Trinity Catholic High School 926 Newfield Ave Stamford, CT 06905	06-1560972	501(c)(3)	10,050				General Support			
Trustees of Tufts College80 George St Ste 200 Medford, MA 02155	04-2103634	501(c)(3)	15,100				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
US Fund for UNICEF125 Maiden Ln 10th FL New York, NY 10038	13-1760110	501(c)(3)	8,629				General Support			
Union Rescue Mission Inc 2800 N Hillside Street Wichita, KS 67219	48-0625837	501(c)(3)	6,272				General Support			
UNITED JEWISH APPEAL FED130 East 59th Street New York, NY 10022	51-0172429	501(c)(3)	7,200				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
United Way of Central Ohio 360 S 3rd St Columbus, OH 43215	31-4393712	501(c)(3)	42,454				General Support			
UNITED WAY OF CENTRAL OHIO INCP O BOX 951571 Cleveland, OH 44193	31-4393712	501(c)(3)	21,441				General Support			
UW of Coastal Fairfield County855 Main Street 10th Floor Bridgeport,CT 06604	06-0864341	501(c)(3)	7,453				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
United Way of Douglas County2518 Ridge Court Suite 200 Lawrence, KS 660464029	48-0796320	501(c)(3)	15,302				General Support			
UNITED WAY OF DOUGLAS COUNTY INC2518 Ridge Court Lawrence, KS 66046	48-0796320	501(c)(3)	8,692				General Support			
United Way of Greater TopekaPO Box 4188 Topeka,KS 666040188	48-0561978	501(c)(3)	64,580				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNITED WAY OF GREATER TOPEKA INC1315 SW Arrowhead Road Topeka,KS 66604	48-0561978	501(c)(3)	34,739				General Support			
UW of Idaho Falls & Bonneville151 N Ridge Ave 180 Idaho Falls,ID 83402	82-0233588	501(c)(3)	10,020				General Support			
United Way of Johnson CountyPO Box 153 Franklin,IN 461310153	35-1082600	501(c)(3)	11,166				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
United Way of Leavenworth CountyPO Box 21 Leavenworth, KS 660480021	48-0622408	501(c)(3)	5,414				General Support			
United Way of Reno County IncPO Box 2230 Hutchinson, KS 675042230	48-0833061	501(c)(3)	5,448				General Support			
United Way of South Hampton RoadsPO Box 41069 Norfolk,VA 235411069	54-0506322	501(c)(3)	12,500				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
United Way of the Bluegrass 100 Midland Ave Ste 300 Lexington, KY 40508	61-0444679	501(c)(3)	7,743			_	General Support			
United Way of the Plains245 North Water Street Wichita, KS 672022090	48-0547688	501(c)(3)	74,933				General Support			
UW of Western Connecticut (Stamford)85 West Street Danbury,CT 06810	06-0879004	501(c)(3)	15,214				General Support			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Vienna Presbyterian Church 124 Park Street NE Vienna, VA 22180	54-6025443	501(c)(3)	10,561				General Support	
Westport Country Playhouse 25 Powers Ct Westport, CT 06880	23-7357943	501(c)(3)	8,500				General Support	
Wolf Trap Foundation1645 Trap Rd Vienna, VA 22182	23-7011544	501(c)(3)	16,100				General Support	

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
WORLD VISION34834 Weyerhaeuser Way S Federal Way, WA 980639716	95-1922279	501(c)(3)	5,667				General Support	
World Vision InternationalPO Box 9716 Federal Way, WA 980639716	95-1922279	501(c)(3)	29,459				General Support	
Worthington Christian Schools Inc6675 Worthington Galena Roadd Worthington,OH 43085	27-1698164	501(c)(3)	5,220				General Support	

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Wounded Warrior Project 4899 Belfort Rd Ste 300 Jacksonville,FL 32256	20-2370934	501(c)(3)	20,661				General Support		
WOUNDED WARRIOR PROJECT INC4899 Belfort Road Jacksonville,FL 32256	20-2370934	501(c)(3)	9,226				General Support		
Wycliffe Bible TranslatorsPO Box 628200 Orlando,FL 32862	95-1831097	501(c)(3)	7,731				General Support		

<u>Form 990,Schedule I, Pa</u>	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Xenos Christian Fellowship Inc1340 Community Park Dr Columbus, OH 43229	31-0996318	501(c)(3)	6,300				General Support			

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DLN: 93493047020166

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization GLOBAL IMPACT

Employer identification number

52-1273585

Pa	TEL Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the oreimbursement or provision of all of the expenses d			1b		
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen	hat apply	·			
	▼ Compensation committee	V	Written employment contract			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l paymen	t?	4a		No
b	Participate in, or receive payment from, a supplement	ental non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-	pased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ations mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described i					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	ne rebutta	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
	(i) (ii)	108,333	0	0	0	0	108,333	0
	(i) (ii)	321,943 0	50,000	15,600	26,000	19,842 0	433,385	0
	(i) (ii)	207,024	2,500	19,160 0	21,068	16,120 0	265,872 0	0
4 Ann Canela, VP, Partner Solutions	(i) (ii)	136,089 0	16,122 0	15,565 0	16,768	6,084	190,628	0
5 Joseph Mettimano, VP for Marketing&Campaign Mgmt	(i) (ii)	141,010 0	16,056	7,682	16,766	18,470	199,984	0
	(i) (ii)	112,985 0	10,000	12,033	13,493	6,166	154,677	0
Giobai nealth Counci	(i) (ii)	153,500 0	0 0	0 0	11,711	0	165,211	0 0

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Return Reference **Explanation**

Schedule J (Form 990) 2014

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493047020166

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
GLOBAL IMPACT

Employer identification number
52-1273585

Return Reference	Explanation
FORM 990, PART III, LINE 1 - MISSION	(Continued) Global Impact is a leader in growing global philanthropy. The organization builds partnerships and raises resources that help the world's most vulnerable people by providing integrated, partner-specific advisory and secretariat services, campaign design, marketing and implementation for workplace and signature fundraising campaigns, and fiscal agency, technology services and integrated giving platforms. Global Impact works with approximately 450 public and private sector workplace giving campaigns to generate funding for an alliance of 128 international charities, including CARE, Doctors without Borders, Heifer International, Save the Children, the U.S. Fund for UNICEF and World Vision. Through these partnerships, Global Impact meets real needs with real results by supporting programs focused on clean water, disaster relief and resiliency, economic development, education, environmental sustainability, global health and child survival, human trafficking, hunger, and women and girls. Global Impact equips private sector and nonprofit sector organizations to achieve their philanthropic goals by providing revenue diversification strategies, employee engagement programs, CSR strategies, and custom philanthropic funds. Global Impact serves as the secretariat of Global Health Council, the Hilton Prize Coalition, Universe of Blessings and the Restore the Earth Foundation. The organization also serves as administrator for one of the world's largest workplace giving campaigns, the Combined Federal Campaign-Overseas. Since 1956, Global Impact has generated more than \$1.7 billion to help the world's most vulnerable people. Learn more at charity org

Return Reference	Explanation
FORM 990, PART III, LINE 4A - CAMPAIGN SOLUTIONS	GLOBAL IMPACT CREATES AND IMPLEMENTS A FULL SUITE OF WORKPLACE FUNDRAISING CAMPAIGN SOLUTIONS THAT INCLUDES CAMPAIGN DESIGN, THE OVERALL AND ONGOING MANAGEMENT OF A CAMPAIGN, AND ONGOING REPRESENTATION WITH EMPLOYEES, DONORS AND INSTITUTIONS DURING THIS YEAR, GLOBAL IMPACT ADMINISTERED THE COMBINED FEDERAL CAMPAIGN-OVERSEAS, WHICH RAISED OVER \$8 MILLION IN GROSS PLEDGES AS A FUNDRAISING INTERMEDIARY FOR MORE THAN 60 YEARS, ON BEHALF OF ITS ALLIANCE OF 128 INTERNATIONALLY-FOCUSED CHARTIES, GLOBAL IMPACT ENGAGED NEARLY 450 PUBLIC AND PRIVATE-SECTOR WORKPLACE GIVING CAMPAIGNS, WHICH COLLECTIVELY RAISED NEARLY \$25 MILLION IN GROSS PLEDGES GLOBAL IMPACT ALSO PROVIDES IMPACT FUNDS, WHICH CURRENTLY ARE BUILT AROUND NINE THEMATIC AREAS DISASTER RELIEF, ECONOMIC DEVELOPMENT, EDUCATION, CLEAN WATER, GLOBAL HEALTH AND CHILD SURVIVAL, HUMAN TRAFFICKING, HUNGER, MALARIA, WOMEN AND GIRLS AND THE SYRIAN REFUGEE FUND THESE FUNDS ARE DESIGNED FOR THE DONOR WHO IS CONCERNED ABOUT A PARTICULAR ISSUE, AND CAN BE PROVIDED AS A GIVING OPTION WITHIN AN EXISTING WORKPLACE GIVING CAMPAIGN OR CAN BE TAILORED TO THE SPECIFIC PHILANTH-ROPIC NEEDS OF A CORPORATION OR PRIVATE OR COMMUNITY FOUNDATION BY LEVERAGING A BROAD AND LONG-STANDING NETWORK OF MEDIA ALLIANCES, GLOBAL IMPACT PROVIDE CHARITIES MEANS OF PARTICIPATING IN RRINT AND ELECTRONIC COOP ADVERTISING CAMPAIGNS FOR NEARLY 10 YEARS GLOBAL IMPACT HAS SERVED AS FIDUCIARY FOR DONOR ADVISED FUNDS ON BEHALF OF CORPORATE FOUNDATIONS AND FOR TEMPORARILY RESTRICTED CHARITABLE FUNDS CREATED FOR CORPORATIONS THROUGH THESE EFFORTS, NEARLY 56 MILLION WAS RAISED AND DISTRIBUTED TO CHARITIES DURING THE YEAR THROUGH ITS WORK TO ANNUALLY RECERTIFY THE 128 MEMBERS OF ITS CHARITY ALLIANCE, GLOBAL IMPACT USES ITS EXTENSIVE EXPERIENCE TO VET AND CERTIFY BOTH DOMESTIC AND INTERNATIONAL CHARITABLE ORGANIZATIONS USING ITS PROPRIETARY MODEL, GLOBAL IMPACT HAS BUILT A SUCCESSFUL CHARITY VETTING, CERTIFICATION AND STATE REGISTRATION PRACTICE AREA THAT INCORPORATES IRS REQUIREMENTS, FINANCIAL ANALYSIS AND MON

Return Reference	Explanation
FORM 990, PART III, LINE 4b - PARTNER SOLUTIONS	BUILDING ON ITS 60 YEARS OF EXPERIENCE IN WORKPLACE FUNDRAISING, GLOBAL IMPACT PROVIDES COUNSEL TO CORPORATIONS ON THE FULL SCOPE OF STRATEGY DEVELOPMENT AROUND GLOBAL PHILANTHROPY AND CORPORATE SOCIAL RESPONSIBILITY (CSR), TO INCLUDE THE DEVELOPMENT OF ISSUES-ORIENTED GIVING FUNDS AND MATCHING GIFT PROGRAMS, DEVELOPING CSR MARKETING, VISIBILITY AND REPORTING STRATEGIES AND CSR BENCHMARKING IT HELPS CORPORATIONS PARTNER WITH LIKE-MINDED ORGANIZATIONS AND TO IMPROVE THEIR EMPLOYEE ENGAGEMENTS STRATEGIES ADDITIONALLY, WORKING WITH CHARITIES AND OTHER NGOS, GLOBAL IMPACT ASSISTS IN STRATEGIC PLANNING AND ORGANIZATIONAL DEVELOPMENT WITH A FOCUS IDENTIFYING REVENUE SOURCES AND STRATEGIES, DEVELOPING BOARD AND DONOR ENGAGEMENT AND TRAINING AND BENCHMARKING FUNDRAISING PROGRAMS AS NEEDED, GLOBAL IMPACT PROVIDES SECRETARIAT LEVEL SUPPORT TO CHARITIES AND PROGRAMS, TO INCLUDE AIDING EXISTING BOARDS OR PROGRAM MANAGERS WITH STRATEGIC PLANNING AND ORGANIZATIONAL DEVELOPMENT SERVICES, DEVELOPING AND IMPLEMENTING MEMBERSHIP AND FUNDRAISING PROGRAMS AND PROVIDING ADMINISTRATIVE SUPPORT GLOBAL IMPACT AUGMENTS, LEVERAGES OR CREATES STAND-ALONE PRIVATE LABEL PLATFORM THAT CAN BE EASILY LAUNCHED WITH MINIMAL SETUP AND A SEAMLESS USER EXPERIENCE TO MEET PHILANTHROPIC NEEDS

Return Reference	Explanation
LINE 11	The organization's Form 990 undergoes a number of internal and external reviews before it is filed with the IRS. The return is prepared by the organization's public accounting firm, BDO USA, and is reviewed by the organization's Managing Director, Finance Form 990 is then reviewed by the Audit Committee prior to a board meeting. The form is presented to the Board by the Audit Committee chair or the Managing Director, Finance. Each board member then receives by email an electronic version of the form, so that each can review it and raise questions before the form is filed.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	A yearly signing of conflict of interest is done by all members of the board and staff

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	The Board's Executive Committee serves as the Compensation Committee and makes the decision on executive compensation. The committee conducts a compensation review and presents comparable salaries for each position.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request. Additionally, the financial statements are posted on its website

Return Reference	Explanation						
	Renee Acosta received compensation as a consultant for the period January 1, 2014 to April 30, 2014. This amount is reported under Part VII, Section A as compensation to a former officer and in Part VII, Section B as one of the top five independent contractors. The amount is therefor reported twice on the 2014 Form 990.						

Return Reference	Explanation
FORM 990, PART XII, LINE 2C - OVERSIGHT OF AUDIT	THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS

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DLN: 93493047020166

2014

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization GLOBAL IMPACT

Employer identification number 52-1273585

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.								
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section (e) Public charity status (if section 501(c)(3))			Section (13) co ent	512(b) ntrolled
						Yes	No
(1) Campaign Accelerator Inc 1199 N FAIRFAX ST SUITE 300 Alexandria, VA 22314	See Part VII	DC	501(c)(3)	7	See Part VII	Yes	
26-3265577							

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	(j))	(k)
Name, address, and EIN of	Primary activity		Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocati	ions?	amount in box	mana	ging	ownership
		(state or	entity	unrelated,		assets			20 of	partn	ier?	
		foreign		excluded from					Schedule K-1			
		country)		tax under					(Form 1065)			
				sections 512-								
				514)								
				,			Yes	No		Yes	No	
			l									

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization	1	domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	ļ
	1	(state or foreign		corp,		assets	1	controlled	ļ
	1	country)		or trust)			1	entity?	
								Yes No	
							<i>'</i>		_

Part V	Transactions With Related Organizations Complete if the organization	answered "Yes" on For	m 990, Part IV, line	e 34, 35b, or 36.		
Not	complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During	the tax year, did the organization engage in any of the following transactions with one or m	nore related organizations	listed in Parts II-IV?			
a Rec	eipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b Gift	grant, or capital contribution to related organization(s)			1b		No
c Gıft	grant, or capital contribution from related organization(s)			1c		No
d Loa	ns or loan guarantees to or for related organization(s)			1d		No
e Loa	ns or loan guarantees by related organization(s)			1e		No
f Div	dends from related organization(s)			1f		No
g Sal	e of assets to related organization(s)			1g		No
h Pur	chase of assets from related organization(s)			1h		No
i Exc	nange of assets with related organization(s)			1i		No
j Lea	se of facilities, equipment, or other assets to related organization(s)			1j		No
k Lea	se of facilities, equipment, or other assets from related organization(s)			1k		No
I Perf	ormance of services or membership or fundraising solicitations for related organization(s)			11		No
m Perf	ormance of services or membership or fundraising solicitations by related organization(s)			1m	1	No
n Sha	ing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n		No
o Sha	ring of paid employees with related organization(s)			10		No
p Rei	nbursement paid to related organization(s) for expenses			1p		No
q Rei	nbursement paid by related organization(s) for expenses			1q		No
r Oth	er transfer of cash or property to related organization(s)			1r		No
s Oth	er transfer of cash or property from related organization(s)			1s		No
2 If th	e answer to any of the above is "Yes," see the instructions for information on who must con	mplete this line, including	covered relationships	and transaction thresholds		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	ınvolved	l

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

I														
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501(organi		(g) Share of end-of-year assets	ear allocations?		Disproprtionate		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
1	1 '	1	sections 512-	1	ı	1 '	1	(J	1 '	1	J	1	
	<u> </u>	<u> </u>	514)	Yes N	No	<u> </u>		Yes	No	<u> </u>	Yes	No		
			,			'	<u> </u>		\Box					

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
, , ,	column (b) Primary Activity Facilitate working relationships between the military, private sector and non-governmental organization community column (f) Direct Controlling entity Global IMpact

Schedule R (Form 990) 2014