DLN: 93493051005147

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Servi

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 <u>www IRS gov/form990</u>

Inspection

Intern	iai iteve	inde Servi	cc					
			lendar year, or tax year beginning C Name of organization	ng 07-01-2015 , and ending 06-30-20)16	D Emml	i	doutification number
_	neck if a address o	pplicable	GLOBAL IMPACT				-	dentification number
_	lame ch	-	% MARK MILLIGAN MNG DIR-FINAN	N. Control of the con		52-1	2735	585
	nıtıal ret	-	Doing business as					
Fotur	inal n/termin	atod	Number and street (or P O box if r	nail is not delivered to street address) Room/:	suite	E Telepl	hone n	umber
_	nended		1199 North Fairfax St Suite 300			(703)717	'-5200
		n pending		ntry, and ZIP or foreign postal code				
			ALEXANDRIA, VA 22314			G Gross	receip	ts \$ 39,522,904
			F Name and address of princi	pal officer	H(a) I	s this a grou	p retu	
			1199 North Fairfax St Suite 3	00		ubordinates' No	7	☐ Yes 🗸
			ALEXANDRIA, VA 22314		⊢ н(ь) А	re all subord	linate	Yes No
I 18	ax-exem	npt status	✓ 501(c)(3)	(insert no) 4947(a)(1) or 527		ncluded? f "No " attac	h a lie	st (see instructions)
J W	/ebsite	e:► WW	VW CHARITY ORG			Group exemp		•
K For	m of or	ganization	Corporation Trust Associ	ation Other •		of formation 1		M State of legal domicile De
1 1 01	III OI OI	gariizatiori	i ♥ Corporation Trust Associ	auon Other P	-			
Pa	rt I	Sum	ımary					
			scribe the organization's mission spact builds partnerships and res	n or most significant activities sources for the world's most vulnerabl	e neonle			
e)		100011111	ipace bands parenerships and rec	sources for the world's most valuerast	<u>e people</u>			
anc	-							
Activities & Governance	2 0	heck th	us hoy • 🗀 if the organization d	iscontinued its operations or disposed	d of more th	nan 25% of it	ts net	accete
70°	- `	SHEEK CI	iis box P If the organization a	iscontinued its operations of disposet	1 or more tr	1411 23 70 01 11	.5 1166	433663
×ŏ	3 1	Number	of voting members of the govern	ıng body (Part VI, lıne 1a)			3	19
<u> </u>	4 1	Number	of independent voting members	of the governing body (Part VI, line 1t)		4	18
E ME	5 1	Γotal nui	mber of individuals employed in	calendar year 2015 (Part V, line 2a)			5	79
AC			·	ecessary)			6	18
				art VIII, column (C), line 12			7a	58,883
	D IN	et unrei	ated business taxable income in	om Form 990-T, line 34		Prior Year	7b	Current Year
	8	Contr	ibutions and grants (Part VIII	ine 1h)		43,300	1 / 9	36,831,703
ġ	8 Contributions and grants (Part VIII, line 1h)					2,145		2,630,245
Rəvenue	10	_	· · · · · · · · · · · · · · · · · · ·	n (A), lines 3, 4, and 7d)			,769	24,663
æ	11			, lines 5, 6d, 8c, 9c, 10c, and 11e)			0	(
	12		revenue—add lines 8 through 11	l (must equal Part VIII, column (A), lı	ne	45,516	,254	39,486,611
	42	12)	d d (D d (D d)	- IV Ive (A) Ive (1 - 2)				
	13 14		•	t IX, column (A), lines 1-3) IX, column (A), line 4)		35,406	0,476	30,751,857
	15		·	ee benefits (Part IX, column (A), lines			_	
8	-	5-10				6,212	,916	6,190,790
Expenses	16a	Profe	ssional fundraising fees (Part IX	, column (A), line 11e)	·		0	(
Ä	b		undraising expenses (Part IX, column (E					
	17			lines 11a-11d, 11f-24e)		3,809		4,061,508
	18		·	ust equal Part IX, column (A), line 25)		45,429	•	41,004,155
× 2	19	Kever	iue iess expelises, subtract line	18 from line 12			,900	-1,517,544
Net Assets or Fund Balances					Beginni	ing of Current	Year	End of Year
SS 8	20		assets (Part X, line 16)			25,760	,932	23,891,112
P P	21				·	19,904		19,555,776
	22		ssets or fund balances Subtract	I line 21 from line 20		5,856	,695	4,335,336
	rt II er pena		nature Block perjury. I declare that I have ex	amined this return, including accompa	nvina sche	edules and st	atem	ents, and to the best of
my k	nowled	dge and	belief, it is true, correct, and cor	nplete Declaration of preparer (other				
prep	arer ha	as any k	nowledge					
		****				2017-02-17		
Sig		Sign	ature of officer			Date		
Her	e		TT JACKSON PRESIDENT AND CEO					
		17	e or print name and title Print/Type preparer's name	Preparer's signature	Date		PTI	NI
Pai	Ч		Print/Type preparer's name Joyce Underwood	Joyce Underwood	2017-02-16	Check If self-employed	P00	N 022361
	a :pare		Firm's name BDO USA LLP			Firm's EIN ►	.	
	:pare e On	1 1	Firm's address ▶ 8401 GREENSBORO DF	RIVE SUITE 800		Phone no (70	3) 893	3-0600
USI	- UII	ıy				l		

MCLEAN, VA 22102

. ✓Yes No

Form 990 (2015)

Form	990 (2015)			Page 3
Par	t 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	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
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	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
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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? If "Yes," complete Schedule D, Part V 🐿	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VII , $VIII$, III , IIX , or III , IIX , or III , III , III , III , IIX , or III , III , IIX , or III , III , IIX , or IIX ,			
	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
	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 2	11d	Yes	
е	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
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14 b	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 $11e^7$ 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? <i>If "Yes," complete Schedule G, Part II</i>	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
	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?	20 b		

Par	rt IV	Checklist	of Require	d Schedu	les (cont	inued)
21	Did +b	0.010001301100	ranart mara t	-ban & E 000) of grants	orotho

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Par	t IV Checklist of Required Schedules (continued)			
	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	
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part	22		NI.

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b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

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?

member of any of these persons? If "Yes," complete Schedule L, Part III

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . .

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

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 🛸 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 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

Nο

Νo

Νo

Νo

Νo

Νo

Νo

Nο

Nο

Nο

Nο

Νo

Nο

Νo

Νo

Nο

Νo

Yes

23

24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

35b

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Yes

Yes

Yes

Form 990 (2015)

Part V	Statements	Regarding	Other	IRS Filinas	and '	Tax Com	plianc

Pai	rt V	Statements Regarding Other IRS Filings and Tax Compliance					_
		Check if Schedule O contains a response or note to any line in this	rart	v	• •	Yes	. No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	33		1 62	140
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b	0			
		L le organization comply with backup withholding rules for reportable payments to	o vend	dors and reportable			
	gamın	g (gambling) winnings to prize winners?	٠.		1 c	Yes	
2a	Tax S	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered					
h		s return	2a	79	2b	Yes	
	Note.	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	(see	instructions)			
		e organization have unrelated business gross income of \$1,000 or more during	_		3a	Yes	
		s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanati</i> c y time during the calendar year, did the organization have an interest in, or a si			3b	Yes	
40	over,	a financial account in a foreign country (such as a bank account, securities acc int)?			4a		No
b	If "Ye See in (FBA F	s," enter the name of the foreign country instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank R)	k and	Financial Accounts			
5a	Was t	he organization a party to a prohibited tax shelter transaction at any time durin	ng the	tax year?	5a		No
b	Did ar	ny taxable party notify the organization that it was or is a party to a prohibited t	tax sh	elter transaction?	5b		No
c	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?			_		
6a		the organization have annual gross receipts that are normally greater than \$10			5c 6a		No
ь	If"Ye	ization solicit any contributions that were not tax deductible as charitable cont s," did the organization include with every solicitation an express statement th not tax deductible?			6b		
7		not tax deductible?			OD.		
	Did th	ie organization receive a payment in excess of \$75 made partly as a contributi		d partly for goods and	7a		No
b		s," did the organization notify the donor of the value of the goods or services p		d?	7 b		
С	Did th	e organization sell, exchange, or otherwise dispose of tangible personal proper irm 8282?	ty for	which it was required to	7 c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year \ldots .	7d				
e	Did th	e organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		No
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	onal b	enefit contract?	7f		Νo
g	If the requir	organization received a contribution of qualified intellectual property, did the o	rganız	zation file Form 8899 as	7 g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	s, did	the organization file a	7h		
8	Did a	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess but the year?	sines:	s holdings at any time	8		No
9a		, in a sponsoring organization make any taxable distributions under section 4966.	· .		9a		No
		le sponsoring organization make a distribution to a donor, donor advisor, or rela		erson?	9b		No
10	Section	on 501(c)(7) organizations. Enter					
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	10a				
b	Gross facılıt	receipts, included on Form 990, Part VIII, line 12, for public use of club les	10 b				
11	Section	on 501(c)(12) organizations. Enter					
		Income from members or shareholders	11a				
b		Income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11 b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	u of Form 1041?	12a		
b	If "Ye year	s," enter the amount of tax-exempt interest received or accrued during the	12 b				
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
а		organization licensed to issue qualified health plans in more than one state? N onal information the organization must report on Schedule O	ote. S	ee the instructions for	13a		
b		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans	13b				
c		the amount of reserves on hand	13c				
14a	Did th	L le organization receive any payments for indoor tanning services during the tax		?	14a	į	No
b	If"Ye	s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	tion ir	Schedule O	14b		

Part VI	Governance.	, Management,	and	Disclosure
	GO V CI II GII C C	, management,	ana	Disciosui

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below,

describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Se	ction 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 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 business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	8 b	Yes		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even	ıe Cod	e.)
			Yes	No
.0a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
.1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
.2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12 c	Yes	
.3	Did the organization have a written whistleblower policy?	13	Yes	
.4	Did the organization have a written document retention and destruction policy?	14	Yes	
.5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15 b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
.6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Se	ction C. Disclosure			
.7	List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, KS, KY, ME, MD, MI, MN, MS, MO, NC, ND, OH, OK, OR, PA, RI, SC,	NH,N	J,NM	NY,

18 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

 $\overline{\checkmark}$ O wn website $\overline{\checkmark}$ Another's website $\overline{\checkmark}$ Upon request $\overline{\ }$ O ther (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 ALEXANDRIA, VA 22314 (703) 717-5200

Part VII

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

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

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 no	r any related or	ganıza	tion	com	pen	sated	lany	current officer, o	lirector, or truste	e
(A) Name and Title	(B) A verage hours per week (list any hours for related	unle	ore t ss pe	han erso cer	not one n is and rus	tee)	an	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) Scott Jackson	40 0	l x		×				375,251	0	38,357
President & CEO	0.0							0,0,201		
(2) Steve Polo	2 0							0	0	0
Board Chairman	0 0	X		×				0	0	0
(3) Nancy Kelly	2 0	×		×				0	0	0
Board Vice Chairman	0 0	^		Ĺ.				0	0	
(4) James Kanuch CPA	2 0							0	0	0
Board Secretary/Treasurer	0 0	X		X				0	U	J
(5) Timothy Bloechl Board Member	10	х						0	0	0
(6) Joseph Crupi	1 0	l						_		
Board Member	0 0	X						0	0	0
(7) Kenneth Schaner	1 0	l							_	_
Board Member	0 0	X						0	0	0
(8) Mouhamed Djalo	1 0	×						0	0	0
Board Member	0.0									
(9) Peter Grant	1 0	×						0	0	0
Board Member	0 0									
(10) Stan Harrell Board Member	1 0	×						0	0	0
(11) Karen Johnson	1 0									
Board Member	0 0	X						0	0	0
(12) Maryon Davies Lewis	1 0							_	_	_
Board Member	0 0	×						0	0	0
(13) Rabih Torbay Board Member	1 0	х						0	0	0
(14) Mauncio Vivero	1 0									
Board Member	0 0	X						0	0	0
-		1								Form 990 (2015)

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

(A) Name and Title	(B) Average hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-		amou oth compe	F) nated unt of ner nsation the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC	1136)		zation elated zations
(15) David Wu	1 0	×						0		0		(
Board Member	0 0	^										
(16) Edward Zellem	1 0	×						0		0		(
Board Member	0.0											
(17) Carol Reig	10	X						0		0		(
Board Member	0 0 1 0											
(18) Kathryn Compton		Х						0		0		(
Board Member (19) Pierre Ferran	0 0											
		Х						0		0		(
Board Member (20) Christine Sow	0 0 40 0				-							
						×		179,436		0		(
Executive Director, GHC (21) Ann Canela	0 0 40 0				-							
						×		173,964		0		13,656
VP, Partner Solutions (22) Joseph Mettimano	0 0 40 0				-	-						
						×		172,928		0		22,983
VP, Mktg & Campaign Engagement (23) Stephanie Scholz	0 0 40 0				-	-						
						×		145,531		0		23,609
Managing Director, HR & Admin (24) Mark Milligan	0 0 40 0											
						×		149,157		0		15,603
Managing Director, Finance	0 0											
				_						1		
1b Sub-Total			•									
c Total from continuation sheets to Part VII d Total (add lines 1b and 1c)			•				1.19	96,267	0			114,208
				<u> </u>	- \	l		<u>'</u>		<u> </u>		,
Total number of individuals (including but n \$100,000 of reportable compensation from				DOVE	e) w	no red	ceiv	ed more than				
											Yes	No
3 Did the organization list any former officer, on line 1a? <i>If "Yes," complete Schedule J for</i>			y em		yee,	or hi	ghe:	st compensated	employee • •	3		No
For any individual listed on line 1a, is the s organization and related organizations grea	um of reportable	comp							n the	3		INU

		Yes	No
Old 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>			
on the Tariffres, complete schedule From such individual	3		Νo
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			
INIVIOUAL	4	Yes	
Old any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Nο

Section B. Independent Contractors

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	183,305
Rackspace Managed Hosting, PO Box 730759 DALLAS, TX 75373	Internet Hosting	117,297

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

Form 99								Page 9
Part V		Statement o	f Revenue					
		Check If Schedu	ule O contains a respon	se or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(6)	1a	Federated camp	paigns 1a	29,154,585				312 31
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership du	es 1b					
Gra not	c	Fundraising eve						
ß.								
Gif ilar	d	_	ations 1d					
ıs,	e	Government grants	s (contributions) 1e					
tio sr S	f	All other contribution	ons, gifts, grants, and 1f	7,677,118				
혈	g		ons included in lines					
a d	_	1a-1f \$			25 224 722			
<u> </u>	h	Total. Add lines	s 1a-1f	· · · ·	36,831,703			
<u>1</u>				Business Code				
Program Service Revenue	2a	ADV SVCS/PR GR/I	REL REV	900099	2,211,376	2,152,493	58,883	
á	b	MEMBER STATE RE	GISTRATION	900099	283,069	283,069		
ac e	C	COOPERATIVE ADV	ERTISING	900099	135,800	135,800		
<u> </u>	d							
Ē	e							
ogra	f	All other progra	ım service revenue					
Δ	g	Total. Add lines	s 2a – 2f		2,630,245			
	3		ome (including dividenc		29,510			29,510
	4		ar amounts) tment of tax-exempt bond p	F	0			
	5			▶	0			
		,	(ı) Real	(II) Personal				
	6 a	Gross rents						
	Ь	Less rental						
	"	expenses	0	0				
	C	Rental income or (loss)	U					
	d	Net rental inco	· ,		0			
	7a	Gross amount	(i) Securities	(II) O ther				
	74	from sales of assets other than inventory	31,446					
	ь	Less cost or other basis and	36,293					
		sales expenses	-4,847					
	c d	Gain or (loss)	s)		-4,847			-4,847
nne		Gross income f events (not inc	rom fundraising		,			<u> </u>
Other Revenue		\$ of contributions See Part IV, lin	reported on line 1c)					
ŧ	ь	Less direct ex	penses b					
O	С	Net income or (loss) from fundraising e	events ▶	0			
	9a	Gross income f See Part IV, lin	rom gaming activities e 19 a					
	ь	Less directex	penses b					
	С	Net income or (loss) from gaming activ	rities	0			
	10a	Gross sales of	inventory. Jess	•				
		returns and allo						
			a					
	b		oods sold b	nton	n			
	С	Miscellaneous	(loss) from sales of inve		0			
	11a	miscellalleous	s Nevellue	Business Code				
	ь							
	c							
	d	All other revenu						
	e		s 11a–11d	•				
	12	Total revenue	See Instructions		0			
		. otal icvellue.	SSS INSCRECTIONS	•	39,486,611	2,571,362	58,883	24,663

Part IX Statement of Functional Expenses

action 5	501(c)(3) and 5	0.1(c)(4)	organizations	must complete	all columns	All other	organizations	must comple	ata column	(4)
ection :	\mathbf{o}	31 and 5	U I I C II 4 I	organizations	must complete	an columns	All other	organizations	must comble	ate column	. (A)

	t include amounts reported on lines 6b, o, 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	28,591,658	28,591,658		
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	2,160,199	2,160,199		
4	and 16	2,100,199	2,100,199		
5	Compensation of current officers, directors, trustees, and key employees	727,475	518,653	1 66,790	42,032
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	010,000	250,750	
7	Other salaries and wages	4,063,807	2,647,392	1,156,452	259,963
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	394,732	271,232	103,259	20,241
9	Other employee benefits	643,239	391,204	201,012	51,023
10	Payroll taxes	·	,	,	,
	· · · · · · · · · · · · ·	361,537	261,561	84,972	15,004
11	Fees for services (non-employees)				
а	Management	665,942	408,362	183,160	74,420
b	Legal	169,369		169,369	
С	Accounting	91,447	24,750	66,697	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	70,523	70,523		
12	Advertising and promotion	674,707	590,379	32,658	51,670
13	Office expenses	502,268	297,182	175,048	30,038
14	Information technology	199,775	60,171	139,604	
15	Royalties	0			
16	Occupancy	324,867	197,789	105,787	21,291
17	Travel	310,130	157,967	92,175	59,988
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	28,316	5,707	19,595	3,014
20	Interest	9,410	9,410		
21	Payments to affiliates	0		202 505	
22	Depreciation, depletion, and amortization	203,685		203,685	
23 24	Insurance	56,535		56,535	
а	BAD DEBT EXPENSE	754,534		754,534	
b					
c d					
e	A II other expenses				
25	Total functional expenses. Add lines 1 through 24e	41,004,155	36,664,139	3,711,332	628,684
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)				

Par	t X	Balance Sheet						r age 💵
		Check if Schedule O contains a response or note to any li	ne in th	ııs Part	x			
						(A)		(B)
	1	Cash-non-interest-bearing				Beginning of year 200	1	End of year 200
	2	Savings and temporary cash investments				3,531,543	2	3,062,755
	3	Pledges and grants receivable, net				19,306,907	3	16,709,704
	4	Accounts receivable, net				469,778	4	504,053
	5	Loans and other receivables from current and former off				100,110	-	301,000
		key employees, and highest compensated employees C	omplet	e Part 1	II of			
		Schedule L						
						0	5	0
	6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958	•		d under			
		contributing employers and sponsoring organizations of	section	n 501(c				
		voluntary employees' beneficiary organizations (see ins II of Schedule L	truction	ns) Con	nplete Part			
Assets		II of Schedule L				0	6	0
\$8	7	Notes and loans receivable, net				0	7	0
⋖	8	Inventories for sale or use				0	8	0
	9	Prepaid expenses and deferred charges				106,031	9	162,123
	10a	Land, buildings, and equipment cost or other basis	i	 	•			
		Complete Part VI of Schedule D	10a		2,503,775			
	ь	Less accumulated depreciation	10b		1,538,125	1,106,615	10c	965,650
	11	Investments—publicly traded securities				1,086,905	11	1,108,393
	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				152,953	15	1,378,234
	16	Total assets. Add lines 1 through 15 (must equal line 34)			25,760,932	16	23,891,112
	17	Accounts payable and accrued expenses			•	1,310,559	17	1,163,773
	18	Grants payable				0	18	0
	19	Deferred revenue				895,330	19	930,325
	20	Tax-exempt bond liabilities				0	20	0
(Δ	21	Escrow or custodial account liability Complete Part IV	of Sche	dule D		0	21	0
bilities	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and d			stees,			
Ē		persons Complete Part II of Schedule L				0	22	0
<u>.e</u>	23	Secured mortgages and notes payable to unrelated third				83,642	23	1,164,574
_	24	Unsecured notes and loans payable to unrelated third pa				0	24	0
	25	Other liabilities (including federal income tax, payables						
		and other liabilities not included on lines 17-24)			- pu ,			
		Complete Part X of Schedule D				17,614,706	25	16,297,104
	26	Total liabilities.Add lines 17 through 25				19,904,237	26	19,555,776
		Organizations that follow SFAS 117 (ASC 958), check he				,,		
Sè		lines 27 through 29, and lines 33 and 34.		♥ una	complete			
Š								
ala	27	Unrestricted net assets				5,856,695	27	4,335,336
Б Ш	28	Temporarily restricted net assets			•	0	28	0
Ē	29	Permanently restricted net assets			•	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), o	heck he	ere 🟲	and			
S 0	30	complete lines 30 through 34. Capital stock or trust principal, or current funds					30	
set	31	Paid-in or capital surplus, or land, building or equipment	fund				31	
As	32	Retained earnings, endowment, accumulated income, or					32	
Vet	33	Total net assets or fund balances				5,856,695	33	4,335,336
_	34	Total liabilities and net assets/fund balances				25,760,932	34	23,891,112
	1	,	-				1	

39,486,611

41,004,155

Reconcilliation of Net Assets

Net unrealized gains (losses) on investments . .

1	Total revenue (must equal Part VIII, column (A), line 12)	1	
2	Total expenses (must equal Part IX, column (A), line 25)		t
3	Revenue less expenses Subtract line 2 from line 1	3	Ī
	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		-

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

4

-1,517,544 5,856,695

5

6

8

		•			
0)					

			5,01
		4,3	35,33
			. 🔽
	I	Yes	No
	T		

Yes

Yes

Nο

Form 990 (2015)

2c

3a

3b

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990 Cash ✓ Accrual Cother If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Νo If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both

Part XIII Financial Statements and Reporting Consolidated basis Separate basis Both consolidated and separate basis 2b

Investment expenses . Prior period adjustments . Other changes in net assets or fund balances (explain in Schedule

Donated services and use of facilities .

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

Schedule O

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

✓ Separate basis

Consolidated basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Both consolidated and separate basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

efile	GRAPHIC	print -	DO NOT	PROCESS	As Filed	Data

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

described in section 170(b)(1)(A)(vi). (Complete Part II)

DLN: 93493051005147 OMB No 1545-0047

Employer identification number

52-1273585

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

Open to Public Inspection

Internal Revenue Service	
Name of the organizat	ion
GLOBAL IMPACT	

SCHEDULE A

(Form 990 or

990EZ)

Part I

1

2 3

Treasury

Department of the

www.irs.gov/form990.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization that normally receives a substantial part of its support from a governmental unit or from the general public

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

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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 (Form 990 or 990-EZ))

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)

from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) 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) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see document? (described on lines (see instructions) instructions) 1-9 above (see instructions)) Yes No Total Cat No 11285F For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ. Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Page 2 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.)

S	ection A. Public Support		•		•		
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
-	fiscal year beginning in)	(=)====	(2)2012	(5)2313	(=)===	(5)2525	(.)
1	Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	100,508,279	98,081,574	38,186,920	43,300,109	36,831,703	316,908,585
2	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						0
4	Total. Add lines 1 through 3	100,508,279	98,081,574	38,186,920	43,300,109	36,831,703	316,908,585
5	The portion of total contributions			, ,	, ,	, ,	
	b y each person (other than a						
	governmental unit or publicly						
	supported organization) included						1,697,796
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						315,210,789
S	ection B. Total Support			•	•	•	
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f)Total
-	fiscal year beginning in) ▶						
7	A mounts from line 4	100,508,279	98,081,574	38,186,920	43,300,109	36,831,703	316,908,585
8	Gross income from interest, dividends, payments received						
	on securities loans, rents,	24,045	22,078	32,109	36,953	29,510	144,695
	royalties and income from	Ilties and income from		·			
	sımılar sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly						0
	carried on						
10	Other income Do not include						
	gain or loss from the sale of						0
	capital assets (Explain in Part						ŭ
	VI) Total support. Add lines 7						
11	through 10						317,053,280
12	Gross receipts from related activi	ties, etc (see ins	tructions)			12	8,772,882
13	First five years.If the Form 990 is	for the organizati	on's first, second	, thırd, fourth, or f	ifth tax year as a	section 501(c)(3	3) organization,
_	check this box and stop here						
	ection C. Computation of Pu			11 1 (5)		1 1	
14	Public support percentage for 201	•	• •	11, column (T))		14	99 419 %
15	Public support percentage for 201					15	99 960 %
16a	33 1/3% support test—2015. If the	5		•	ine 14 is 33 1/3%	or more, check	
b	and stop here. The organization quality 33 1/3% support test—2014. If the				and line 15 is 33	1/3% or more, c	▶ ▽ heck this
	box and stop here. The organizati			5			▶
17a	10%-facts-and-circumstances tes	-				•	
	is 10% or more, and if the organize in Part VI how the organization me						orted
	organization	ccts the lacts-all	a circumstances	cose The organi.	zacion quannes as	, a pablicly suppl	▶ [
b	10%-facts-and-circumstances tes	t— 2014. If the ora	anızatıon dıd not o	check a box on lin	e 13, 16a. 16b. o	r 17a, and line	P
	15 is 10% or more, and if the orga						

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 instructions

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

• •			_															
(Complete only	if you	ı che	cked	the box	on	lıne	9	of	Part	I or	ıf the	e organizatio	n ·	faıled	to q	lualify	under	Part
TT TC 11																		

Se	ction A. Public Support	Trans to quant	y under the tee	to noted below,	picase compi	20 1 410 1117	
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f)Total
•	iscal year beginning in)	(-)	(-)	(-)	(=)===	(-)	(1)
1	Gifts, grants, contributions, and membership fees received (Do						
	not include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to						
	the organization's tax-exempt						
	purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
D	A mounts 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 Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f)Total
-	iscal year beginning in) ►		·	· · ·	. ,	· ,	
9 .0a	A mounts from line 6 Gross income from interest,						
.ua	dividends, payments received on	İ					
	securities loans, rents, royalties	İ					
	and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes)	İ					
	from businesses acquired after	İ					
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated	İ					
	business activities not included in line 10b, whether or not the	İ					
	business is regularly carried on						
12	Other income Do not include	İ					
	gain or loss from the sale of capital assets (Explain in Part	ı					
	VI)						
13	Total support. (Add lines 9, 10c,	ı					
14	11, and 12) First five years.If the Form 990 is f	or the organizati	nn's first second	third fourth or f	 	section 501(c)	(3) organization
-	check this box and stop here	or the organization	on 5 m 5 c, 5 c c o m a	, china, rouren, or r	men eax year as a	300000000000000000000000000000000000000	► □
Se	ction C. Computation of Pub	lic Support P	ercentage				
15	Public support percentage for 2015	(line 8, column	(f) divided by line	13, column (f))		15	
16	Public support percentage from 201	14 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
17	Investment income percentage for				nn (f))	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	17		18	
	33 1/3% support tests—2015. If the		,		line 15 is more t		nd line 17 is not
	more than 33 1/3%, check this box	=					▶ □
b	33 1/3% support tests—2014. If the						
	18 is not more than 33 1/3%, check	this box and st	op here. The orga	nızatıon qualıfıes	as a publicly sup	ported organiza	tion 🕨
20	Private foundation. If the organizati	on did not check	a box on line 14	, 19a, or 19b, che	eck this box and s	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, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction 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		<u> </u>
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
D	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?	3 c		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			ı
	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	4b		
	by or in connection with its supported organizations			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4 c		
	organization was used exclusively for section 170(c)(2)(B) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
h	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?	5 c		
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? If "Yes," provide detail in Part VI .	9 b		
С	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 .	9 c		
0a	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)	10 b		
1	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		
	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		

Part IV Supporting Organizations (continued)

Sectio	n B.	Type	I Su	pporting	ı Organiz	ations

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			
	,, <u> </u>		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			
	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			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 b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of	2a		
	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

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each

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

engaged in these activities but for the organization's involvement

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

each of the supported organizations? Provide details in Part VI

2b

3a

3b

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Suppor	ting C	rganizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying ti	rust on	Nov 20, 1970 See inst i	ructions. All other
	Type III non-functionally integrated supporting organizations must complete S	Sections	A through E	Г
	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	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
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			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	integrat	ed Type III supporting c	organization (see

	Type 111 Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Se	ection D - Distributions			Current Year			
1	A mounts paid to supported organizations to accom	plish exempt purposes					
2	A mounts paid to perform activity that directly furthe excess of income from activity						
3	Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons				
4	A mounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval rec	quired)					
6	Other distributions (describe in Part VI) See instru	uctions					
7	Total annual distributions. Add lines 1 through 6						
	Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is re	esponsive (provide				
9	Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015			
1	Distributable amount for 2015 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)						
3	Excess distributions carryover, if any, to 2015						
a							
b							
C	From 2013						
	From 2014						
	Total of lines 3a through e						
	Applied to underdistributions of prior years						
	Applied to 2015 distributable amount						
i	Carryover from 2010 not applied (see instructions)						
_	Remainder Subtract lines 3g, 3h, and 3i from 3f						
4	Distributions for 2015 from Section D, line 7 \$						
a	Applied to underdistributions of prior years						
b	Applied to 2015 distributable amount						
С	Remainder Subtract lines 4a and 4b from 4						
5	Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)						
6	Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)						
7	Excess distributions carryover to 2016. Add lines 3j and 4c						
8	Breakdown of line 7						
<u>a</u>							
b							
c	Excess from 2013						
d	From 2014						
е	From 2015						

Employer identification number

52-1273585

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Political expenditures

GLOBAL IMPACT

Part I-A

2

Political Campaign and Lobbying Activities

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 www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, 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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes" on 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" on 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

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excis	e tax incurred b y the organization un	der section 495!	5 ▶	\$
2	Enter the amount of any excis	e tax incurred by organization manag	jers under sectio	n 4955 >	\$
3	If the organization incurred a	section 4955 tax, did it file Form 472	20 for this year?		☐ Yes ☐ No
4 a	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 50	1(c)(3).
1	Enter the amount directly exp	ended by the filing organization for se	ection 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to of	ther organization	s for section 527 ▶	\$
3	Total exempt function expend	itures 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 a organization made payments amount of political contributio separate segregated fund or a	unds Also enter the nization, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					
For F	Paperwork Reduction Act Notice, s	ee the instructions for Form 990 or 990	O-EZ.	Cat No 50084S Schedule C (I	Form 990 or 990-EZ) 2015

Subtract line 1f from line 1c If zero or less, enter -0-

Grassroots lobbying expenditures

	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

4	Check	•	Γ	- 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)

		oying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public lobbying)	opinion (grass roots	0	
b	Total lobbying expenditures to influence a legi	slative body (direct lobbying)	0	
c	Total lobbying expenditures (add lines 1a and	1b)	0	
d	Other exempt purpose expenditures		41,004,155	
e	Total exempt purpose expenditures (add lines	41,004,155		
f	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns	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		
q	Grassroots nontaxable amount (enter 25% of	line 1f)	250,000	

reporting section 4911 tax for this year?

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

	☐ Yes ☐ No								
	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)								
	Lobbying Expe	nditures During 4	l-Year Avera	ging Period					
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000			
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000			
_ c	Total lobbying expenditures				0	0			
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000			
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000			

Return Reference

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT				
		(a)		(b)	
ctiv	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity	Yes	No	l	A mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	165				
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
c d						
u e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?			+		
f	la de la companya de la companya de la companya de la companya de la companya de la companya de la companya de			+		
q	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?					
y h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		+			
i	Other activities?					
j	Total Add lines 1c through 1i					
ر 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			-		
b	If "Yes," enter the amount of any tax incurred under section 4912			+		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			-		
	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	501/0	1(5).	Or S	ectio	n
	501(c)(6).		.,(=,,	<u> </u>		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	<u> </u>	
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section ! 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
	Total	2c				
С -	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
3						
с 3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	4				
3	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	4 5				

Explanation

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

SCHEDULE D

(Form 990)

Department of the

Treasury

Supplemental Financial Statements

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

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

OMB No 1545-0047

DLN: 93493051005147

Open to Public Inspection

Nan	ne of the organization BAL IMPACT		Empl	oyer identification number
Pa	rt I Organizations Maintaining Donor Complete if the organization answere	Advised Funds or Other Similar F		273585 Or Accounts.
	Complete if the organization unover	(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	5	(-,	
2	Aggregate value of contributions to (during year)	3,534,438		
3	Aggregate value of grants from (during year)	3,534,438		
4	Aggregate value at end of year	197,330		
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t	5	nor advis	sed
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or donor advisor, or for a	any othei	✓ Yes No
Par	Conservation Easements. Comple	te if the organization answered "Yes"	on Forn	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th	- · · · · ·		
	Preservation of land for public use (e.g., recreeducation)		an hietor	ıcally ımportant land area
	Protection of natural habitat	•		d historic structure
	Preservation of open space	Teservation or c	a cereme	a motoric structure
2	Complete lines 2a through 2d if the organization l	neld a qualified conservation contribution in	the form	of a conservation
	easement on the last day of the tax year			Hald and the Park of the Warn
а	Total number of conservation easements		2a	Held at the End of the Year
b	Total acreage restricted by conservation easeme	nts	2b	
c	Number of conservation easements on a certified		2c	
d	Number of conservation easements included in (o historic structure listed in the National Register	• ,	2d	
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or terminat	ed by th	e organization during the
	tax year ▶			
4	Number of states where property subject to cons	ervation easement is located >		
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		ndling of	┌ Yes
6	Staff and volunteer hours devoted to monitoring, year	nspecting, handling of violations, and enforc	ing cons	servation easements during the
	-			
7	A mount of expenses incurred in monitoring, inspective.	ecting, handling of violations, and enforcing o	conserva	ition easements during the year
8	Does each conservation easement reported on III (B)(I) and section $170(h)(4)(B)(II)$?	ne 2(d) above satisfy the requirements of se	ction 17	0(h)(4)
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia		•
Par	Organizations Maintaining Collect Complete if the organization answers	tions of Art, Historical Treasures,	or Oth	er Similar Assets.
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	AS 116 (ASC 958), not to report in its reve assets held for public exhibition, education	, or resea	arch in furtherance of public
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education		
(1	i) Revenue included on Form 990, Part VIII, line 1		> \$	
) Assets included in Form 990, Part X			
2	If the organization received or held works of art, he following amounts required to be reported under S		for financ	

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Maintaining (continued)	Collections of A	rt, His	storical	Trea	asures, or (Other	Similar As	sets
3		the organization's acquisition, accition items (check all that apply)	ession, and other rec	ords, cl	neck any	of the	following that	are a sı	gnıfıcant use	e of its
а		Public exhibition		d		oan or	exchange pro-	grams		
b	F :	Scholarly research		e	Го	ther				
c		Preservation for future generations								
4	Provid Part X	de a description of the organization'	s collections and exp	laın ho	w they fur	ther t	he organizatio	n's exer	npt purpose	in
5		g the year, did the organization soli s to be sold to raise funds rather th							r Yes	☐ No
Pai	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990, Pai	rt IV,	line 9, or re	ported	an amoun	t on Form 990,
1a		organization an agent, trustee, cus led on Form 990, Part X?	todian or other interr	mediary	for contr	ributio	ns or other as	sets not	t ┌─Yes	√ No
b	If"	Yes," explain the arrangement in Pa	art XIII and complete	e the fo	llowing ta	ble			Amo	ount
С		jinning balance			3		10	,		
d	-	ditions during the year					10	ı		
e		tributions during the year					16	,		
f		ding balance					1f	:		
2a		ne organization include an amount o	n Form 990, Part X, I	ıne 21,	for escro	worc	ustodial accoi	ınt lıabı	lity? Yes	□ No
b	If"Ve	s," explain the arrangement in Part	YIII Check here if t	he evnl	anation h	as he	en provided in	Dart VI	11	
	rt V	Endowment Funds. Comple								<u> </u>
			(a)Current year		nor year)Two years back	. 	e years back	(e)Four years back
1a	Begir	nning of year balance								
b	Conti	ributions · · · · · · ·								
c	Net ii losse	nvestment earnings, gains, and is								
d	Grant	ts or scholarships								
e		r expenditures for facilities rograms								
f	• Admi	nistrative expenses				+				
g		of year balance								
2	Provid	· · · · · · · de the estimated percentage of the	current vear end hala	nce (lir	ne 1 a col	umn (a)) held as			
			carrent year end bara	nee (iii	10 19, 001	ann (a)) Hela as			
a		designated or quasi-endowment ►								
ь		anent endowment ▶								
С		orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c	should equal 100%							
3a		nere endowment funds not in the pos ization by	ssession of the organ	ızatıon	that are h	neld ai	nd administere	d for th	e	Yes No
	_	related organizations							3a	
		lated organizations							3a(· · · · · · · · · · · · · · · · · · ·
b	If"Ye	s" on 3a(II), are the related organiz	atıons lısted as requi	red on :	Schedule	R? .			3	b
4		ribe in Part XIII the intended uses of		endowm	ent funds	<u> </u>				
Pa	rt VI	Land, Buildings, and Equip Complete if the organization a		orm 9	90. Part	IV. I	ine 11a.See	Form 9	990. Part X	. line 10.
		Description of property			(a) ost or other	r basıs	(b) Cost or other b		Accumulated c)depreciation	(d)Book value
_	1 = 1				(ınvestme	ent)	(other)	$\overline{}$		_
				· -				+		
		gs		· · —			900	660	100.00	700 050
		nold improvements		. -			898, 588,	_	190,60 339,44	· ·
				.˙├			1,017,	_	1,008,06	·

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

965,650

(a) Description of security or category	,	(b)Book value	(c)Method of valuation
(including name of security)	,	(b)book value	Cost or end-of-year market valu
(1)Financial derivatives (2)Closely-held equity interests			
(3)Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related.	d Wast on Form 000. D	art IV line 11c	
Complete if the organization answere (a) Description of investment		art IV, line IIC.Se (b) Book value	Form 990, Part X, line 13. (c) Method of valuation
			Cost or end-of-year market valu
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	▶		
Part IX Other Assets. Complete if the organizati	on answered 'Yes' on Forr	n 990, Part IV, line 1	1d See Form 990, Part X, line 15
(a) Desc		n 990, Part IV, line 1	(b) Book value
(a) Desc (1) DUE TO/FROM OVERSEAS		n 990, Part IV, line 1	
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC		n 990, Part IV, line 1	(b) Book value 206,03 1,079,89 59,05
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC		n 990, Part IV, line 1	(b) Book value 206,03 1,079,89
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC		n 990, Part IV, line 1	(b) Book value 206,03 1,079,89 59,05
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC		n 990, Part IV, line 1	(b) Book value 206,03 1,079,89 59,05
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC		n 990, Part IV, line 1	(b) Book value 206,03 1,079,89 59,05
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC		n 990, Part IV, line 1	(b) Book value 206,03 1,079,89 59,05
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA	cription	n 990, Part IV, line 1	(b) Book value 206,03 1,079,89 59,05 33,24
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA	fription		(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Description (a) Description (a) Description (a) Description (a) Due To/FROM OFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Fotal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organic See Form 990, Part X, line 25.	15)		(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Desc (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organic See Form 990, Part X, line 25.	fription		(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Description of liability (a) Description of liability (a) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the orgonomy see Form 990, Part X, line 25. (a) Description of liability	15)		(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Description of liability (a) Description of liability (a) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the orgonomy see Form 990, Part X, line 25. 1. (a) Description of liability	15)	es' on Form 990, F	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Description of liability (a) Description of liability (A) DUE TO/FROM OFCNCA (B) DUE TO/FROM CFC NYC (C) DUE TO/FROM CFC CENTRAL VA (C) DUE TO/FROM CFC CENTRAL VA (A) DUE TO/FROM CFC CENTRAL VA (B) line Part X Other Liabilities. Complete if the organized see Form 990, Part X, line 25. (a) Description of liability Federal income taxes	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Desc. (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE-MEMBER DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Desc. (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE-MEMBER DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Desc. (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE-MEMBER DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Desc. (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE-MEMBER DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Description of liability Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the orgone See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Description of liability Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the orgone See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Desc. (1) DUE TO/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE-MEMBER DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Description of liability Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the orgone See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes CAMPAIGN FUNDS PAYABLE DONOR ADVISED FUNDS PAYABLE	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23
(a) Descention (a) Descention (b) must equal Form 990, Part X, col (B) line Part X (a) Due To/FROM OVERSEAS (2) DUE TO/FROM CFCNCA (3) DUE TO/FROM CFC NYC (4) DUE TO/FROM CFC CENTRAL VA Total. (Column (b) must equal Form 990, Part X, col (B) line Part X See Form 990, Part X, line 25.	(b) Book value	es' on Form 990, P	(b) Book value 206,03 1,079,89 59,05 33,24 ▶ 1,378,23

Par		enue per Audited Financial Sta ation answered 'Yes' on Form 990,			per Re	turn
1		upport per audited financial statements			1	14,889,052
2	A mounts included on line 1 but n	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on	investments	2a	-3,815		
ь	Donated services and use of faci	lities	2b	,		
с	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII)					
			2d			
e	Add lines 2a through 2d				2e	-3,815
3	Subtract line 2e from line 1				3	14,892,867
4	Amounts included on Form 990,	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	ed on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b	24,593,744		
c	Add lines 4a and 4b				4c	24,593,744
5		C.(This must equal Form 990, Part I, line			5	39,486,611
Par		enses per Audited Financial St ation answered 'Yes' on Form 990,			s per	Return.
1		udited financial statements			1	16,410,411
2	A mounts included on line 1 but r	ot on Form 990, Part IX, line 25				
а	Donated services and use of faci	lities	2a			
b	Prior year adjustments		2b		1	
c	Otherlosses		2c		1	
d	Other (Describe in Part XIII) .		2d		1	
e	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1				3	16,410,411
4	A mounts included on Form 990,	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	ed on Form 990, Part VIII, line 7b				
	• •		4a			
b	Other (Describe in Part XIII) .		4b	24,593,744		
c	Add lines 4a and 4b				4c	24,593,744
5	Total expenses Add lines 3 and	4c. (This must equal Form 990, Part I, I	ine 18)	5	41,004,155
P rov P art		mation irt II, lines 3, 5, and 9, Part III, lines 1a nes 2d and 4b, and Part XII, lines 2d an				e any additional
	Return Reference	Explanation				
Part >	(, line 2	NDER ACCOUNTING STANDARDS CO	DIFIC	CATION (ASC) 740-10.	ACCOL	 JNTING FOR
. 4.07	Д Д В	NCERTAINTY IN INCOME TAXES, GLOSSOCIATED WITH TAX POSITIONS TIKELY-THAN-NOT THAT THE POSITIONS TO THE THAN THE POSITIONS TO THE THAN THE POSITION TO THE TAX POSITION	OBAL AKEN ON WI IZED 1	IMPACT MUST RECOGI FOR TAX RETURN PUR LL BE SUSTAINED GLO AX BENEFITS OR LIAB	NIZE TH POSES BAL IN ILITIES	HE TAX BENEFIT WHEN IT IS MORE- MPACT DOES NOT S THAT SHOULD BE

FORWARD

PENALTIES RECORDED OR INCLUDED IN THE STATEMENTS OF ACTIVITIES GLOBAL IMPACT IS STILL OPEN TO EXAMINATION BY TAXING AUTHORITIES FROM FISCAL YEAR 2013

Schedule D (Form 990) 2015	Page 5						
Part XIII Supplemental Information (continued)							
Return Reference	Explanation						
Part XII, line 4b	Other amounts included on return not in financials EXPENSES GLOBAL IMPACT DISTRIBUTION TO MEMBER CHARITIES 18,910,100 CFC-O DISTRIBUTION TO CHARITIES 4,218,552 CFC-O EXPENSES 1,465,092 Total 24,593,744						

efile GRAPHIC print - I	DO NOT PROCESS	As Filed Dat	ta -		DLN: 93493051005147
SCHEDULE F (Form 990)			Outside the Unit		OMB No 1545-0047
,	► Complete	-	n answered "Yes" to Form	990,	2015
		•	14b, 15, or 16. o Form 990.		12010
Department of the Treasury Internal Revenue Service	Information about Sched		and its instructions is at wi	vw.irs.gov/form990	Open to Public Inspection
Name of the organization				Employe	r identification number
GLOBAL IMPACT				52-127	3585
	rmation on Activit e organization answe		he United States. orm 990, Part IV, line	14b.	
1 For grantmakers. Do	es the organization r	maintain record	s to substantiate the a	amount of its gra	ants
and other assistance	, the grantees' eligibi	lity for the gran	nts or assistance, and	the selection crit	teria
used to award the gra	ants or assistance?				✓ Yes No
2 For grantmakers. De assistance outside th		rganızatıon's p	rocedures for monitori	ng the use of its	grants and other
3 Activites per Region (T	he following Part I, line	3 table can be du	uplicated if additional spa	ice is needed)	
(a) Region	(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 program service, de specific type o service(s) in reg	escribe for and investments if in region
(1) East Asia and the Pacif	fic		Grantmakıng	Grants	44,418
(2) Europe (Including Icela Greenland)	and and		Grantmakıng	Grants	2,063,146
(3) North America			Grantmakıng	Grants	15,000
(4) South America			Grantmakıng	Grants	14,635
(5) South Asia			Grantmakıng	Grants	23,000
3a Sub-total					2,160,199
b Total from continuation to Part I	sheets				
c Totals (add lines 3a and	d 3 b)				2,160,199
For Paperwork Reduction Act No	otice, see the Instructions	s for Form 990.	Cat	No 50082W	Schedule F (Form 990) 2015

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.

(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	(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)								
			ted above that are r					

					gir courid y, recognized as
tax-exemp	t by the IRS, or for which	the grantee or counsel	has provided a sectio	n 501(c)(3) equivalei	ncy letter >

6

4

Schedule F (Form 990) 2015							Page 3
Part III Grants and Part III can b	Other Assistance be duplicated if addit	to Individuals	Outside the Unit	ed States. Complete	if the organization ar	nswered "Yes" to Form (990, Part IV, line 16.
(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	500	check/wire	1	,	, , ,
(2)			1	'	1	'	
(3)					†		
(4)		+ +	·		+		
(5)					†		
(6)			· · · · · · · · · · · · · · · · · · ·		1	,	
(7)			· · · · · · · · · · · · · · · · · · ·		'	<u>'</u>	
(8)			· · · · · · · · · · · · · · · · · · ·		1	<u>'</u>	
(9)			-	'	1	,	
(10)			· · · · · · · · · · · · · · · · · · ·		1	,	
(11)			-	'	1	,	
(12)			-	'	1	,	
(13)			· ·	'	1	,	
(14)			·		'	,	

(15) (16) (17) (18)

5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)

Yes ▼ No

Old 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)

Nο

Yes

Page 5

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

Schedule F (Form 990) 2015

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

990 Schedule F, Supplemental 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

Additional Data

Software ID: Software Version:

General Support

General Support

General Support

General Support

EIN: 52-1273585

Name: GLOBAL IMPACT

Form 990 Schedule F Part II - Grants or Entities Outside The United States							
	(b) IRS code						
(a) Name of	section	(c) Region	(d) Purpose of grant	(e) A mount o			
organization	and EIN(If	(c) Region	(d) Fulpose of grant	cash grant			

East Asia and the

East Asia and the

East Asia and the

Europe (Including

Pacific

Pacific

Pacific

Iceland and Greenland)

applicable)

ount of grant	(f) Manner of cash disbursement	cash assistance	non-cash assistance	valuation (book, FMV, appraisal, other)
15,000	CHECK & WIRE			
20,000	CHECK & WIRE			
8,918	CHECK & WIRE			
6,650	CHECK & WIRE			
		1		

(ı) Method of

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant l cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) 249,552 CHECK & WIRE Europe (Including General Support Iceland and Greenland)

15,000 CHECK & WIRE

(I) Method of

	Europe (Including Iceland and Greenland)	General Support	253,243	CHECK & WIRE		
	Europe (Including	General Support	1,553,701	CHECK & WIRE		

GENERAL SUPPORT

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

Iceland and Greenland) North America

(b) IRS code

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (i) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (d) Purpose of grant (c) Region cash non-cash and EIN(if cash disbursement (book, FMV, organization cash grant al, other)

 applicable)			J		assistance	assistance	appraisal,
	South America	GENERAL SUPPORT	14 635	CHECK & WIRE			

efile GRAPHIC print - DO NOT PROCESS As Filed Data Schedule I
(Form 990)

Grants and C
Governments

Complete if the organize

Department of the
Treasury
Internal Revenue Service

Name of the organization

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

GLOBAL IMPACT

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

OMB No 1545-0047

2015

DLN: 93493051005147

Open to Public Inspection

Schedule I (Form 990) 2015

Employer identification number

GEO BRE IIII RET						52-1273585	
Part I General Informatio	n on Grants an	d Assistance				·	
Does the organization maintain the selection criteria used to aw Describe in Part IV the organiza Part II Grants and Other Assistathat received more than second	vard the grants or a ation's procedures ance to Domestic O	ssistance? for monitoring the use	of grant funds in the Unestic Governments. Com	ited States		· 	√ Yes No.
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
See Additional Data Table							
	+						
2 Enter total number of section 503 Enter total number of other orga							262
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Cat No 50055P

Additional Data

NEW YORK, NY 10036

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 (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of (hook EMV appraisal non-cash assistance)

or government		п аррпсавте	grant	assistance	other)	non cash assistance	or assistance
360 YOUTH SVCS 1305 W Oswego RD Naperville, IL 60540	36-2936229	501(c)(3)	7,990				General Support
ACCION INTL 10 Fawcett St Cambridge, MA 02138	13-2535763	501(c)(3)	7,489				General Support
AFRICAN MEDICAL 4 W 43RD ST 2ND FLR	13-1867411	501(c)(3)	17,890				General Support

(h) Purpose of grant

orassistance

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or aovernment assistance other) AFRICARE 23-7116952 501(c)(3) 56,292 General Support 440 R ST N W

General Support

WASHINGTON,DC 20001					
Ald for Africa PO Box 8734 Topeka, KS 66608	06-1703295	501(c)(3)	31,900		General Support

291.251

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

501(c)(3)

25-1128857

Alcoa

201 Isabella St Pittsburgh, PA 15212

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance ALSACSt J Children's Res 35-1044585 501(c)(3) 5,728 General Support Hosp 501 St Judes PI I Support

Memphis,TN 38105					
Alzheimer's Assoc CTR Ohio CHPT 1379 Dublin RD Columbus,OH 43215	31-0996236	501(c)(3)	8,004		General S

1701 N Beauregard St Alexandria, VA 22311

8,028 AMERICAN DIABETES 13-1623888 501(c)(3)

General Support ASSOC INC

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or aovernment assistance other) American Heart Association 13-5613797 501(c)(3) 12,544 General Support 7272 Greenville Ave Dallas,TX 75231 04 2051400 A SAEDTO A SULLITAR A L A VA SU 501(c)(3) 12,096 General Support

44,182

General Support

	FOUNDATION	94-2951460	
	909 MONTGOMERY ST		
	SAN FRANCISCO, CA		
	94133		
•	AMERICAN JEWISH WORLD	22-2584370	

SERVICE 45 W 36TH ST NEW YORK, NY 10018 501(0)(3

501(c)(3)

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

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance AMERICAN NATIONAL RED 53-0196605 501(c)(3) 161,046 General Support CROSS PO Box 37295 Support

Washington, DC 20013					
AMERICAN NEAR EAST REFUGEE AID 1111 14th St NW Washington, DC 20005	52-0882226	501(c)(3)	14,544		General Support
AMERICAN REFUGEE	36-3241033	501(c)(3)	34,578		General Support

COMMITTEE

615 1st Ave NE Ste 500 Minneapolis, MN 55413

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) AMER SOCTY FOR THE 13-1623829 501(c)(3) 9,142 General Support PREV OF CRLTY TO ANIMALS

424 E 92nd St New York, NY 10128					
AMERICARES FOUNDATION	06-1008595	501(c)(3)	144,253		General 9

Baltimore, MD 21275

AMERICARES FOUNDATION	06-1008595	501(c)(3)	144,253		General Support
88 HAMILTON AVE					
STAMFORD CT, CT 06902					

America's Charities General Support 54-1517707 501(c)(3) 135,941 PO Box 75083

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Animal Charities of America 94-3193389 501(c)(3) 269,809 General Support PO Box 45754

San Francisco, CA 94145					
ARCHDIOCESE FOR	13-1624090	501(c)(3)	29,310		General
MILITARY SVC USA					1
1025 Michigan Ave NE					1

al Support Washington, DC 20017

51-0255908 501(c)(3) 8,224 General Support

Ashoka

1700 N Moore St 2000 Arlington, VA 22209

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 48-6107689 501(c)(3) 16,222 General Support ATCHISON UNITED WAY BOARD 625 Commercial St 7 Support

Atchison, KS 66002					
ATLANTA COMMUNITY FOOD BANK INC 732 Joseph E Lowery Blvd Atlanta, GA 30318	58-1376648	501(c)(3)	6,720		General S
BADAT ACADEMY	20 2666570	E01(c)(2)	7,000		Caparal

RD

CHESTERFIELD, MO 63005

General Support BARALACADEMY 20-26665/9 501(c)(3) 7,000 17815 WILD HORSE CREEK

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 06-6079591 501(c)(3) 7,155 General Support BARTLETT ARBORETUM ASSOC INC 151 BROOKDALE RD

STAMFORD, CT 06903					
Bicycles Against Poverty 244 Fifth Ave New York, NY 10001	27-1175814	501(c)(3)	18,187		General Support
					1

BOURBON COUNTY UNITED 23-7299984 501(c)(3) 9,045 General Support WAY

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

PO Box 286

Fort Scott, KS 66701

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) BOY SCOUTS OF AMERICA 48-0543748 501(c)(3) 18,565 General Support 1020 SE Monroe Topeka, KS 66612 al Support

Boy Scouts of America - Aloha 1325 Walnut Hill Ln _Irving,TX 75015	99-0073482	501(c)(3)	15,588		General :
BOY SCOUTS OF AMERICA -	98-0000121	501(c)(3)	17,547		General S

APO,AE 09613

I Support TRANSATLANTIC UNIT 31301 BOX 25

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance **BOYS & GIRLS CLUB OF** 23-7296824 501(c)(3) 5,670 General Support LAWRENCE 1520 Haskell Ave

General Support

Lawrence, KS 66044					
BOYS & GIRLS CLUB OF HARFORD COUNTY MD INC 100 East Bel Air Ave Aberdeen, MD 21001	52-1701612	501(c)(3)	7,920		General Support

501(c)(3) 36,053 BOYS AND GIRLS CLUB OF 48-0636732

TOPEKA 550 SE 27th St Topeka, KS 66605

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

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 501(c)(3) 13,245 BRIDGEPORT RESCUE 06-1362705 General Support MISSION INC 481 Peauonnock St Support

Bridgeport, CT 06604					
Build A Better World 125 Washington St 201 Salem,MA 01970	20-1348415	501(c)(3)	6,033		General Support
CancerCure of America- Care	81-0648432	501(c)(3)	198,264		General Support

Understand Research & PO Box 45754

San Francisco, CA 94145

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) CAPITAL AREA HUMANE 31-4379492 501(c)(3) 7,812 General Support SOCIETY

3015 Scioto-Darby Exec Ct Hilliard, OH 43026					
CAPITAL UNIVERSITY 1 College Main COLUMBUS,OH 43209	31-4379435	501(c)(3)	10,338		General Support

15,432

General Support

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

501(c)(3)

CAPPER FOUNDATION

3500 SW 10th Ave Topeka, KS 66604

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) CARE 13-1685039 501(c)(3) 360,330 General Support GIFT CENTER MERRIFIELD.VA 22116 Support

CATHOLIC CHARITIES OF FAIRFIELD 238 Jewett Ave	06-0653053	501(c)(3)	10,970		General Support
Bridgeport, CT 06606					
Catholic Community	34-1908579	501(c)(3)	10,000		General Support

Foundation

1404 E 9th St 8th Fl Cleveland, OH 04414

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) Catholic Medical Mission 13-5602319 501(c)(3) 9,778 General Support Board 10 West 17th St Now York NV 10011 I Support

New York, NY 10011					
CATHOLIC RELIEF SERVICES 228 West Lexington St Baltimore, MD 21201	13-5563422	501(c)(3)	26,498		General Support
Catholic Service	45-1679647	501(c)(3)	143,194		General Support

Catholic Service 45-1679647 Organizations of America

PO Box 45754

San Francisco, CA 94145

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) CENTER OF HOPE INC 48-0578624 501(c)(3) 15,259 General Support 400 N Emporia St Wichita KS 67202 eral Support

27,843

General Support

Wichida, NO 07202					
Americas Most Cost- Effective Charities PO Box 45754	27-3132554	501(c)(3)	100,356		Gener
San Francisco, CA 94145					

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

501(c)(3)

Charities Under 5 Overhead

San Francisco, CA 94145

PO Box 45754

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 94-3148590 501(c)(3) 67,665 General Support Do Unto Others Americas Emergency Relief et al Support

San Francisco, CA 94145					
Child Aid USA 125 Washington St Ste 201 Salem, MA 01970	26-3061082	501(c)(3)	5,296		General S

19,773

General Support

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

501(c)(3)

ChildAid International

125 Washington St Ste 201 Salem, MA 01970

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government other) assistance 54-0536100 501(c)(3) 7,943 General Support ChildFund International 2821 Emerywood Pkwy Support

Richmond, VA 23294					
Children First-America's	30-0186795	501(c)(3)	141,330		General S
Charities					
PO Box 75083					
Baltimoro MD 21275					

501(c)(3)

CHILDREN INTERNATIONAL

2000 E RED BRIDGE Rd KANSAS CITY, MO 64131 44-6005794

Baitimore, MD 21275

25,065

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Children's Charities America 94-3148588 501(c)(3) 175,532 General Support PO Box 45754 al Support

5,825

General Support

San Francisco, CA 94145					
Children's Medical Charities of America PO Box 45754	27-0093393	501(c)(3)	118,633		General
					1

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

501(c)(3)

San Francisco, CA 94145

125 Washington St Ste 201 Salem, MA 01970

26-3070569

Christian Aid USA

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Christian Charities USA 94-3255961 501(c)(3) 134,183 General Support PO Box 45754 Can Francisco CA 0414E eneral Support

Sali Francisco, CA 94145					
Christian Children's Charities PO Box 45754 San Francisco, CA 94145	45-2919697	501(c)(3)	33,863		General Support
CHRISTIAN LIFE SCHOOL	39-2003070	501(c)(3)	21,667		General Support

FDN INC 10700 75TH ST KENOSHA, WI 53142

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) Christian Service Charities 94-3193374 501(c)(3) 314,622 General Support PO Box 79704 Baltimore, MD 21279 al Support

Datamore, 11D 21273					
CHURCH WORLD SERVICECROP PO BOX 968 ELKHART,IN 46515	13-4080201	501(c)(3)	13,922		General Support
CLEVELAND MUSEUM OF	34-0714336	501(c)(3)	9,752		General Support

ART

11150 EAST BLVD CLEVELAND, OH 44106

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) COLUMBUS COUNCIL ON 501(c)(3) 5,228 51-0180760 General Support WORLD AFFAIRS 51 JEFFERSON AVE

General Support

COLUMBUS,OH 43215					
COLUMBUS MUSEUM OF ART 480 E BROAD ST	31-4379447	501(c)(3)	5,932		General Support

518,746

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

501(c)(3)

COLUMBUS, OH 43215

Community Health Charities

PO Box 758858 Baltimore, MD 21275

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 94-1732873 501(c)(3) 5,765 Community Health Charities General Support of CA PO Box 758858 Baltimore, MD 21275

General Support

General Support

14,870

18,606

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

501(c)(3)

501(c)(3)

_	, ,	
_	COMMUNITY	HEALTH
	MINISTRY	
	407 ASH ST	
	WAMEGO,KS	66547

Compassion International

12290 Voyager Pkwy Colorado Springs, CO 80921 75-2974854

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) CONNECTICUT HUMANE 06-0667605 501(c)(3) 6,908 General Support SOCIETY 701 Russell rd Newmaton CT 06111 al Support

Newington, CT 00111					
CONNECTICUT SCIENCE CENTER INC 250 COLUMBUS BLVD HARTFORD,CT 06103	06-1538101	501(c)(3)	14,600		General Support
Conservation&Preservation	94-3217738	501(c)(3)	74,707		General Support

Conservation&Preservation Charities of America

San Francisco, CA 94145

PO Box 45754

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 13-6183605 501(c)(3) 35,439 CounterPart International General Support 2345 Crystal Dr301 Arlington, VA 22202 al Support

COVENANT DAY SCHOOL INC 800 FULLWOOD RD MATTHEWS,NC 28105	56-1656570	501(c)(3)	7,500		General :
DAVIC DHINNEY	20 0012566	E01(a)(3)	F F 0 0		Canaral

1722 14th St 150 Boulder, CO 80302

General Support DAVIS PHINNEY 20-0813566 501(c)(3) 5,500 FOUNDATION

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) Desert Research Institute Ctr 43-1526946 501(c)(3) 6,202 General Support for Int'l Water & Su 2215 Raggio Pkwy eral Support

Reno,NV 89512					
Diabetes Charities America 125 Washington St 201 Salem, MA 01970	20-1468898	501(c)(3)	17,037		General Support
DIAMOND BASEBALL	45-4443436	501(c)(3)	10,500		General Support

FOUNDATION

200 Center Park Dr KNOXVILLE, TN 37922

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government other) assistance Direct Relief 95-1831116 501(c)(3) 6,506 General Support 27 S La Patera Ln Santa Barbara, CA 93117 501(c)(3) 3.057.993 General Support DOCTORS WITHOUT 13-3433452

BORDERS USA INC. PO Box 5030 Hagerstown, MD 21741

19,601

General Support

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

501(c)(3)

DRAKE UNIVERSITY

2507 Univ Ave Des Moines, IA 50311

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 52-1601960 501(c)(3) 101,564 General Support EarthShare Dept 4011 Washington, DC 20042 al Support

ECPAT-USA End Child ProstitutionPornography & Tra 30 3rd Ave	13-3755580	501(c)(3)	8,727		General
Brooklyn, NY 11217					
	04 2402207	504()(2)	50 774		

Educate America the

General Support 94-3193387 501(c)(3) 50,771 Education School Support & SF PO Box 45754 San Francisco, CA 94145

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 84-1589324 501(c)(3) 10,132 General Support Engineers Without Borders USA 1021 33rd St Denver, CO 80205

General Support

General Support

7,500

52,855

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

501(c)(3)

501(c)(3)

Episcopal High School 1200 N Quaker Ln							
Alexandria, VA 22302							
Episcopal Relief and							

Development 815 2nd AVE NEW YORK, NY 10017 54-0506326

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 31-0809759 501(c)(3) 5,131 General Support FAITH MISSION INC 500 W Wilson Bridge Rd Worthington OH 43085 I Support

Worthington, On 43003					
FAMILY LIFE CENTER OF	48-1087496	501(c)(3)	6,421		General S
BUTLER COUNTY INC					
115 S Washington St					
El Dorado VC 67042					

501(c)(3)

Feed My Starving Children

401 93rd Ave NW Coon Rapids, MN 55433 41-1601449

El Dorado, KS 6/042

11,090

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 27-3274349 501(c)(3) 6,315 General Support Feeding Children Everywhere 830 S Ronald Reagan Blvd Languaged EL 227E0

Longwood,FL 32/50					
FINCA INTERNATIONAL INC	13-3240109	501(c)(3)	21,835		General Support
1201 15TH ST NW 8TH FL WASHINGTON, DC 20005					

14,104

General Support

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

501(c)(3)

FLINTHILLS BREADBASKET

MANHATTAN, KS 66502

INC

905 YUMA ST

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance FOOD FOR THE POOR INC 59-2174510 501(c)(3) 21,375 General Support 6401 Lyons Rd Support

Coconut Creek, FL 33073					
FREEDOM FROM HUNGER PO BOX 2000 DAVIS,CA 95617	95-1647835	501(c)(3)	17,088		General Support
FRIENDS OF HOSPICE OF	74-2824423	501(c)(3)	5,678		General Support

JEFFERSON COUNTY PO BOX 101

VALLEY FALLS, KS 66088

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) FULBRIGHT ASSOCIATION 52-1821935 501(c)(3) 5,880 General Support INC 1220 10th Ct 250

General Support

Washington, DC 20036					
George Washington University 2033 K St NW 300 Washington, DC 20052	53-0196584	501(c)(3)	5,395		General Support

491,093

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

501(c)(3)

Global Impact

PO Box 409616 Atlanta, GA 30384

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Goodcity 36-3467921 501(c)(3) 75,800 General Support 5049 W Harrison Chicago II COCAA

General Support

Chicago, IL 60644					
GRACE UNITED	36-2340309	501(c)(3)	6,200		General Support
METHODIST CHURCH					
300 E GARTNER RD					
NADEDVILLE IL 60540					

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

501(c)(3)

NAPERVILLE, IL 60540

HACKLEY SCHOOL 293 Benedict Ave Tarrytown, NY 10591 13-1740452

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) Handicap International 501(c)(3) 21,532 55-0914744 General Support 6930 Carroll Ave Takoma Park, MD 20912 al Support

HANDS OFFERING HOPE FOUNDATION INC	45-3798076	501(c)(3)	6,800		General
3 PARKLANDS DR 103 DARIEN,CT 06820					
	·				

11345 HARDIN VALLEY RD KNOXVILLE, TN 37932

HARDIN VALLEY ACADEMY 501(c)(3) 5,500 General Support 51-0670175 ATHLETIC COUNCIL

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 43-1208665 501(c)(3) 40,893 General Support Harvesters 215 SE Quincy Toneka KS 66603

Charities
PO Box 75083
Baltimore, MD 21275

Topeka, KS 00005					
Health & Medical Research Charities of America PO Box 45754 San Francisco, CA 94145	94-3217739	501(c)(3)	276,104		General Support
Health First - America's	30-0186796	501(c)(3)	65,720		General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 501(c)(3) 361,100 HEIFER PROJECT 35-1019477 General Support INTERNATIONAL

General Support

1 WORLD AVE LITTLE ROCK, AR 72202					
HELEN KELLER INTERNATIONAL 352 PARK AVES	13-5562162	501(c)(3)	8,193		General Support

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

501(c)(3)

NEW YORK, NY 10010

Washington, DC 22249

HelpAge USA

601 E St NW

27-1071179

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) HELPING HANDS HUMANE 48-0597124 501(c)(3) 46,553 General Support SOCIETY INC 5720 SW 21st St

General Support

Topeka,KS 66604					
HILLIARD BASEBALL ASSOCIATION INC PO Box 202	31-1022221	501(c)(3)	9,000		General Support

Hilliard, OH 43026

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

501(c)(3)

03-0362926

Himalayan Cataract Project

Waterbury, VT 05676

PO Box 55

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Hispanic & Latino Charities th 68-0455509 501(c)(3) 26,799 General Support PO Box 45754

San Francisco, CA 94145					
Human & Cıvıl Rıghts 125 Washıngton St 201 Salem, MA 01970	94-3193388	501(c)(3)	27,297		General Support
Human Service Charities	94-3240353	501(c)(3)	25,617		General Support

Human Service Charities 94-3240353 501(c)(3) 25,61/ A meric

44330 Premier PI 220 Ashburn, VA 20147

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

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 06-1172535 501(c)(3) 8,725 General Support INSPIRICA INC 141 Franklin St Stamford, CT 06901 6.934 General Support

General Support

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

501(c)(3)

International Center for	52-1081455	501(c)(3)	
Research on Women			
1120 20th St NW 500 N			
Washington, DC 20036			l

54-1722887

International Justice Mission

PO Box 58147 Washington, DC 20037

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 501(c)(3) 16,814 International Medical Corps 95-3949646 General Support 1919 SANTA MONICA BLVD SANTA MONICA, CA 90404 al Support

INTERNATIONAL ORTHODOX 110 WEST Rd BALTIMORE, MD 21204	25-1679348	501(c)(3)	45,933		General
INTERNATIONAL DELICE	22 0412751	E01(c)(3)	11 975		Canarali

San Diego, CA 92120

General Support INTERNATIONAL RELIEF 33-0412/51 501(c)(3)| 11,825 TEAMS 4560 Alvarado Canyon RD

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) INTERNATIONAL RESCUE 13-5660870 501(c)(3) 86,422 General Support COMMITTEE 122 E 42ND ST12TH FL

NEW YORK, NY 10168					
JUNIOR ACHIEVEMENT OF KANSAS	48-0731855	501(c)(3)	14,806		General

ral Support

3735 SW Wanamaker RD					
Topeka,KS 66610					
K9S FOR WARRIORS	27-5219467	501(c)(3)	20,364		General Support

260 SRoscoe Blvd

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

Ponte Vedra BCH, FL 32082

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance Kansas Children's Service 48-0543749 501(c)(3) 9,447 General Support League 215 W 6th

Emporia, KS 66801					
KANSAS FOOD BANK WAREHOUSE INC 1919 E Douglas Ave Wichita,KS 67211	48-0959213	501(c)(3)	29,445		General :

OF WICHITA INC 3313 N Hillside Wichita, KS 67219

I Support KANSAS HUMANE SOCIETY 48-0554339 501(c)(3) 28,284 General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 48-0667209 501(c)(3) 7,890 General Support KANSAS STATE UNIVERSITY FOUNDATION

General Support

2323 Anderson Ave Manhattan, KS 66502					
KIDS IN NEED INC 3457 SW JARDINE TER TOPEKA,KS 66611	48-1248446	501(c)(3)	18,875		General Support

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

501(c)(3)

Kids Saving The Rainforest

3790 El Camino Real 206 Palo Alto, CA 94306 06-1594980

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 501(c)(3) 5,113 General Support Landesa 91-1158970 1424 Fourth Ave Seattle WA 98101 I Support

Scattle, WA JOIOI					
LAWRENCE COMMUNITY SHELTER INC 3655 E 25th St Lawrence, KS 66046	74-2848203	501(c)(3)	10,578		General Support
LAWRENCE HUMANE	48-0641821	501(c)(3)	8,017		General Support

SOCIETY INC 1805 E 19th St Lawrence, KS 66046

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) LETS HELP INC 48-0800447 501(c)(3) 9,805 General Support 200 S Kansas Ave Topeka, KS 66603 I Support

Leukemia & Lymphoma SocietySouth Ohio Chapter 4370 Glendale Milford Rd Cincinnati, OH 45242	13-5644916	501(c)(3)	6,675		General S
LIFEHOUSE CHILD	48-1234465	501(c)(3)	8 711		General 9

303 S Kansas Ave Topeka, KS 66603

General Support 201(C)(2) 0,/11 ADVOCACY CENTER INC

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance LIFETIME ASSISTANCE 13-3754497 501(c)(3) 5,820 General Support FOUNDATION INC.

425 PAUL RD ROCHESTER,NY 14624					
LUTHERAN WORLD RELIEF	13-2574963	501(c)(3)	278,685		General

Chicago, IL 60642

ROCHESTER, NT 14024					
LUTHERAN WORLD RELIEF PO Box 17061 BALTIMORE,MD 21298	13-2574963	501(c)(3)	278,685		General Support

LUTHERAN WORLD RELIEF	13-2574963	501(c)(3)	278,685		General Support
PO Box 17061					
BALTIMORE,MD 21298					

PO Box 17061					
BALTIMORE,MD 21298					
Maestro Cares NFP	45-3706112	501(c)(3)	79,603		General Support

DALITMORE, MD 21230					
Maestro Cares NFP 1459 W Hubbard St	45-3706112	501(c)(3)	79,603		General Sup

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant other) or aovernment assistance MAP International 36-2586390 501(c)(3) 7,270 General Support 4700 Glynco PKWY Brunswick, GA 31525 al Support

2701 SW E Circle Dr Topeka, KS 66606					
COUNTY					
MEALS ON WHEELS SHAWNEE & JEFFERSON	48-0792685	501(c)(3)	24,958		General

9590 SURVEYOR CT MANASSAS, VA 20110

MEDICAL MISSIONARIES 10,000 General Support 54-1990595 501(c)(3) INC

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance Medical Research Charities 94-3148591 501(c)(3) 86,892 General Support 125 Washington St 201 Salem, MA 01970 ort

MEMORIAL SLOAN- KETTERING CANCER CENTER 1275 York Ave New York, NY 10065	13-1924236	501(c)(3)	5,209		General Support
Mental Health & Addiction	20-1358397	501(c)(3)	17,359		General Support

Netw

125 Washington St 201 Salem, MA 01970

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) MERCY CORPS 91-1148123 501(c)(3) 63,578 General Support INTERNATIONAL 45 ANKENY ST PORTLAND, OR 97201 al Support

Metro Early College High School 1929 Kenny Rd Columbus,OH 43210	90-0838465	501(c)(3)	5,563		General Support
METROPOLITAN GOLF	13-3637689	501(c)(3)	5,460		General Support

ASSOCIATION FOUNDATION 49 KNOLLWOOD RD

ELMSFORD, NY 10523

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 48-0883888 501(c)(3) 30,730 MIDLAND CARE General Support CONNECTION INC 200 SW FRAZIER CIR al Support

Mulitary Veterans & Patriotic	04 2102419	501(c)(2)	420.085		Ganaral
MID-OHIO FOODBANK 3960 Brookhaven Dr Grove City, OH 43123	31-0865343	501(c)(3)	29,248		General:
TOPEKA,KS 66606					

PO Box 45754

San Francisco, CA 94145

General Support Military Veterans & Patriotic 94-3193418 501(C)(3) 430,085 Service Org of Amer

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) MILITARY OFFICERS 54-1659039 501(c)(3) 9,600 General Support ASSOC OF AMERICA SCHLSP FD 201 N WASHINGTON ST al Support

General Support

ALEXANDRIA, VA 22314					
Military Support Groups of	27-2242752	501(c)(3)	129,833		General
A merica					
PO Box 45754					
San Francisco, CA 94145					

National Black Federation 22-3596098 501(c)(3) 11,792

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

Char

17 Academy St Newark, NJ 07102

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) NATIONAL PUBLIC RADIO 52-0907625 501(c)(3) 21,060 General Support PO Box 79540 Baltimore MD 21279 eral Support

Dalcinore, Pib 21273					
NEAR EAST FOUNDATION 430-432 Crouse Hinds Hall Syracuse, NY 13244	13-1624114	501(c)(3)	6,938		General Support
NORTH COBB CHRISTIAN	58-1519089	501(c)(3)	10,000		General Support

SCHOOL INC 4500 Lakeview Dr Kennesaw, GA 30144

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 36-2167817 501(c)(3) 6.000 General Support Northwestern University 1201 Davis St Evanston, IL 60208 al Support

2.41.040.1,12.002.00					
OHIO STATE UNIVERSITY	31-1145986	501(c)(3)	45,853		General
FOUNDATION					
1480 W Lane Ave					ĺ
Columbus.OH 43221					1

12311 W RIDGE CIR INDIANAPOLIS, IN 46236

ONE IN CHRIST INC. 45-5212818 501(c)(3) 15,893 General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 501(c)(3) 6,240 General Support OPEN DOOR MISSION 47-0411375 2828 N 23th St E Omaha NE 60110 Support

Support

Omana, NE 68110					
Operation Smile 3641 Faculty BLVD Virginia Beach, VA 23453	54-1460147	501(c)(3)	67,549		General S
OPPORTUNITY	54-0907624	501(c)(3)	8,161		General S

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

INTERNATIONAL 550 W Van Buren Chicago, IL 60607

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) 31-4379532 501(c)(3) 6,132 General Support OTTERBEIN UNIVERSITY 1 S GROVE ST

501(c)(3)

Partners in Food Solutions

9000 Plymouth Ave N Minneapolis, MN 55427 27-5097190

WESTERVILLE, OH 43081					
OXFAM AMERICA 226 Causeway St5th Fl	23-7069110	501(c)(3)	156,011		General Support
Boston, MA 02114					

6.868

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) PARTNERS IN HEALTH 04-3567502 501(c)(3) 90.024 General Support 888 COMMONWEALTH AVE BOSTON, MA 02215 General Support

General Support

PATH PO Box 900922 Seattle, WA 98109	91-1157127	501(c)(3)	8,804		
PAUL TAYLOR DANCE	13-2665475	501(c)(3)	7,800		

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

FOUNDATION INC 551 GRAND ST NEW YORK, NY 10002

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) PITNEY BOWES RELIEF 27-3398652 501(c)(3) 93,014 General Support FLIND INC

3001 Summer St6th Fl Stamford, CT 06926					
PLAN USA 155 PLAN WAY	13-5661832	501(c)(3)	19,773		General Support

255 CARTER HALL Ln MILLWOOD, VA 22646

PLAN USA 155 PLAN WAY WARWICK,RI 02886	13-5661832	501(c)(3)	19,773		General Support
PRO IECT HOPE	53-0242962	501(c)(3)	45.559		General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance arant or aovernment assistance other) 501(c)(3) 21.168 General Support PROJECT TOPEKA 30-0596254 1315 SW ARROWHEAD Rd TOPEKALKS 66604 501(c)(3) 102.500 General Support

General Support

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

501(c)(3)

Realized Worth
185 South 8th St
Noblesville, IN 46060

RISE RECOVERY

PO Box 15322 San Antonio, TX 78212 27-3417347

74-2216041

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) RONALD MCDONALD 48-0918101 501(c)(3) 26.029 General Support HOUSE CHARITIES OF

WICHITA INC 1110 N Emporia St Wichita, KS 67214					
Rotary #4795345 One Rotary Ctr Evanston, IL 60201	36-3245072	501(c)(3)	21,390		General Support

General Support

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

501(c)(3)

ROUNDABOUT THEATRE

COMPANY INC. 231 W 39TH ST 1200 NEW YORK, NY 10018 13-6192346

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 06-0776644 501(c)(3) 5,607 SACRED HEART General Support UNIVERSITY 5151 PARK AVE

FAIRFIELD,CT 06825					
Salvation Army - Columbus PO Box 06324 _Columbus,OH 43206	13-5562351	501(c)(3)	9,863		General Support
SALVATION ARMY WORLD	13-2923701	501(c)(3)	182,852		General Support

SALVATION ARMY WORLD SERVICE OFFICE

ALEXANDRIA, VA 22313

PO BOX 269

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 77-6141976 501(c)(3) 14,180 General Support SANKARA FYF **FOUNDATION USA** 1000 McCarthy Blyd

MIlpitas, CA 95035					
SAVE THE CHILDREN 501 Kings Highway E 400 Fairfield,CT 06825	06-0726487	501(c)(3)	181,176		General Support

SCOVILLE MEMORIAL 06-0653164 501(c)(3) 7,550 LIBRARY ASSOCING

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

General Support

38 MAIN ST SALISBURY, CT 06068

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) SECOND CHANCE SHELTER 26-2717351 501(c)(3) 10,000 General Support 130 COUNTY RD 398 BOAZ.AL 35957 I Support

SightLife 221 Yale Ave N 450 Seattle, WA 98109	23-7051021	501(c)(3)	5,199		General S
SILICON VALLEY COMMUNITY FDN	20-5205488	501(c)(3)	88,502		General S

94040

I Support 2440 WELCAMINO REAL MOUNTAIN VIEW, CA

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Smile Train 13-3661416 501(c)(3) 34,004 General Support 41 Madison Ave 28th FL

New York, NY 10010					
Smoky Row Brethren Church 7260 Smoky Row RD Columbus,OH 43235	31-0992807	501(c)(3)	22,000		General Su

Washington, DC 20006

Support SOS Children's Villages-13-6188433 501(c)(3) 23,123

General Support USA

1620 I St NW 900

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 02-0274509 501(c)(3) 10,000 General Support SOUTHERN NEW HAMPSHIRE UNIVERSITY 2500 N RIVER RD

501(c)(3)

ST GABRIELS CHURCH

CORPORATION
1 TUDOR RD
MILFORD, CT 06460

06-6055388

MANCHESTER,NH 03106					
Sports Charities USA PO Box 45754 San Francisco, CA 94145	47-0863988	501(c)(3)	33,676		General Support

5,200

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) ST JUDE CHILDRENS 62-0646012 501(c)(3) 128,198 General Support RESEARCH HOSPITAL INC. 501 St Jude PL

Memphis,TN 38105					
St Patricks Catholic Elementary School 20500 W Maple Rd	47-0379377	501(c)(3)	5,600		General Support

General Support

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

501(c)(3)

Elkhorn, NE 68022

615 Hillsborough St 200 Raleigh, NC 27603

16-1541024

Stop Hunger Now

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) Susan G Komen for the Cure -75-2844651 501(c)(3) 5,103 General Support Columbus 0.20 Eachword Dr

Westerville, OH 43081					
TARC INC 2701 SW Randolph Ave Topeka,KS 66611	48-6086732	501(c)(3)	54,544		General Support
-					

General Support

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

501(c)(3)

27-2176439

THAT NEWFOUNDIAND

PLACE INC 554 PUCKER ST COVENTRY, CT 06238

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) The Cloudbase Foundation 27-1359927 501(c)(3) 14,835 General Support 677 W Pine RD ral Support

Melbourne,FL 32904					
The Global Hunger Project 5 Union Square W New York, NY 10003	94-2443282	501(c)(3)	18,752		General
THE HOMELECC FAMILIES	21 1170402	501(6)(2)	5 247		Conoral

Columbus, OH 43215

General Support THE HUMELESS FAMILIES 31-11/9492 501(c)(3)| 5,347 FOUNDATION 33 N Grubb St

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or aovernment assistance other) The Mauli Ola Foundation 26-2141264 501(c)(3) 42,166 General Support 1205 Victory Walk Laguna Beach, CA 92651 THE WILLOW DOMESTIC 48-0853356 501(c)(3) 7,162 General Support

General Support

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

501(c)(3)

1920 MOODIE RD LAWRENCE, KS 66046	
THE YOUNG MENS CHRISTIAN ASSOC OF THE TRGLE AREA	56-0591307

801 Corp CTR Dr Raleigh, NC 27607

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or aovernment assistance other) TOPEKA RESCUE MISSION 48-0688068 501(c)(3) 95,316 General Support INC PO Box 8350 Topeka, KS 66608 TRUE VINEYARD 41-2227790 501(c)(3) 5,200 General Support MINISTRIES INC.

General Support

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

501(c)(3)

PO BOX 1962

SAN MARCOS,TX 78667
TRUSTEES OF MOUNT

HOLYOKE COLLEGE 50 College St S Hadley, MA 01075

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) TRUSTEES OF PURDUE 35-6002041 501(c)(3) 6,250 General Support UNIVERSITY

403 W Wood St W Lafayette, IN 47907					
UNITED STATES FUND FOR UNICEF 125 MAIDEN LN NEW YORK,NY 10038	13-1760110	501(c)(3)	201,148		General Support

UNION RESCUE MISSION 48-0625837 501(c)(3) 14,370 General Support OF WICHITA INC

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

2800 N HILLSIDE ST WICHITA, KS 67219

(a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (d) A mount of cash organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or aovernment assistance other) Unique & Noteworthy Charities 46-3016556 59,061 General Support 501(c)(3) PO Box 45754 San Francisco, CA 94145 Unitarian Universalist Service 04-6186012 32,877 General Support 501(c)(3)

General Support

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

501(c)(3)

Committee
SVC Committee
Boston, MA 02284
UTD JEWISH APPEAL FED
OF JEWISH

PHILANTHROPIES 130 E 59th St New York, NY 10022

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) UNITED METHODIST 13-5562279 501(c)(3) 184,478 General Support 475 RIVERSIDE DR 1520 NEW YORK, NY 10115 ral Support

UNITED NEGRO COLLEGE FUND 229 Peachtree St NE 2350 Atlanta, GA 30303	13-1624241	501(c)(3)	5,984		General Support
United Service Organizations	13-1610451	501(c)(3)	140,111		General Support

Inc

2111 Wilson Blvd 1200 Arlington, VA 22201

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) United Way of Central 52-0591543 501(c)(3) 9,989 General Support Maryland 100 S Charles St Baltimore, MD 21203 al Support

UNITED WAY OF CENTRAL OHIO INC 360 S 3rd St Columbus, OH 43215	31-4393712	501(c)(3)	30,493		General Support
UNITED WAY OF COASTAL	06-0864341	501(c)(3)	17,678		General Support

Bridgeport, CT 06604

855 Main St

FAIRFIELD COUNTY INC.

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) UNITED WAY OF DOUGLAS 48-0796320 501(c)(3) 30,642 General Support COUNTY INC

2518 Ridge CT Lawrence, KS 66046					
UNITED WAY OF EL DORADO KANSAS INC 116 W Pine St El Dorado, KS 67042	23-7199368	501(c)(3)	6,064		General Support

General Support

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

501(c)(3)

UNITED WAY OF GREATER

KANSAS CITY INC 801 W 47th ST 500 Kansas City, MO 64112

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) UNITED WAY OF GREATER 48-0561978 501(c)(3) 68.806 General Support TOPEKA INC 1315 SW Arrowhead RD Topeka, KS 66604 I Support

UNITED WAY OF LEAVENWORTH COUNTY INC PO Box 21	48-0622408	501(c)(3)	7,036		General
Leavenworth, KS 66048					
			1	I .	l .

General Support

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

501(c)(3)

UNITED WAY OF NEW YORK

CITY

205 E 42nd St New York, NY 10017

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 48-0833061 501(c)(3) 10,974 General Support UNITED WAY OF RENO COUNTY PO Box 2230

Hutchinson, KS 67504					
United Way of the Plains 245 N Water St Wichita, KS 67202	48-0547688	501(c)(3)	68,912		General Support
United Way of Western	06-0646577	501(c)(3)	27,003		General Support

Connecticut 85 W St

Danbury,CT 06810

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) UNIVERSITY OF NOTRE 35-0868188 501(c)(3) 9,460 General Support DAME DU LAC 1100 Grace Hall Notre Dame IN 46556 Support

NEW YORK, NY 10018	53-0234290	501(c)(3)	5 105		General S
USA GIRL SCOUTS OVERSEAS 420 5th AVE	13-1624016	501(c)(3)	8,375		General S
Hotte Dame, 11 10550					

1577 Spring Hill Rd 420 Vienna, VA 22182

General Support UW of the National Capital 53-0234290 501(C)(3)| 5,195 Area

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) VALLEY OF THE SUN 501(c)(3) 8,703 86-0104419 General Support UNITED WAY 3200 E Camelback Rd 375 al Support

Phoenix,AZ 85018					
VALLEY UNITED WAY INCORPORATED 54 Grove St	06-0847098	501(c)(3)	5,424		General

General Support

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

501(c)(3)

Shelton, CT 06484

Water For People

100 E Tennessee Ave Denver, CO 80209

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 23-7357943 501(c)(3) 17,920 WESTPORT COUNTRY General Support PLAYHOUSE INC

25 POWERS CT WESTPORT, CT 06880					
WICHITA HABITAT FOR HUMANITY	58-1735540	501(c)(3)	9,918		General Support

501(c)(3)

20-8774272

Wild Animals Worldwide PO Box 45754

San Francisco, CA 94145

130 E Murdock 102 Wichita, KS 67214

46,225

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) William J Clinton Presidential 31-1580204 501(c)(3) 34,486 General Support FDN 1271 Ave of the Americas 42nd FL

General Support

NY,NY 10020					
WOLF TRAP FDN FOR THE PERFORMING ARTS 1645 Trap Rd	23-7011544	501(c)(3)	10,000		General Support
Vienna VA 22182					1

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

501(c)(3)

VIEIIIIa, VA ZZIOZ WOMEN FOR WOMEN

INTERNATI 2000 M St NW 200 Washington, DC 20036

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 501(c)(3) 84,095 WomenChildren&Family 94-3193386 General Support Service Charities of America PO Box 45754

7.974

General Support

San Francisco, CA 94145					
World Childhood Foundation Inc 183 Madison Ave 715	16-1559586	501(c)(3)	8,505		General Support

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

501(c)(3)

New York, NY 10016

7 EAST BALTIMORE ST BALTIMORE, MD 21202

WORLD RELIEF

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) 20-5080679 501(c)(3) 24.690 General Support WORLD RENEW RELIEF COMMITTEE

GRAND RAPIDS, MI 49560					
WORLD VISION PO Box 9716 Federal Way, WA 98063	95-1922279	501(c)(3)	46,418		General Support
WOUNDED WARRIOR	20-2370934	501(c)(3)	337,802		General Support

PRO JECT INC 4899 Belfort Rd Jacksonville, FL 32256

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable cash (book, FMV, appraisal, non-cash assistance orassistance arant or aovernment assistance other)

General Support

WOUNDED WARRIORS	20-1407520	501(c)(3)	19,794		General Support
FAMILY SUPPORT					
920 S 107th Ave 250					
Omaha,NE 68114					

20,048

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

501(c)(3)

Wycliffe Bible Translators Inc

PO Box 628200 Orlando, FL 32832

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

DLN: 93493051005147 OMB No 1545-0047

	▶ Attach to
Department of the	▶ Information about Schedule J (Form 990) and
Treasury	

Schedule J (Form 990)

easury temal Revenue Service		F Information about Schedule 3 (10	Jiii 990)	and its instructions is at <u>www.irs</u>		Insp	ectio	n
	me of the organiz BAL IMPACT	zation			Employer identification	on nur	nber	
GLC	BAL ITT ACT				52-1273585			
Pa	rt I Questi	ons Regarding Compensatior	1					
					ı		Yes	No
а		opiate box(es) if the organization pro Section A , line 1a Complete Part III						
	First-clas	s or charter travel		Housing allowance or residence fo	r personal use			
	Travel for	companions		Payments for business use of pers	sonal residence			
	Tax idemr	nification and gross-up payments		Health or social club dues or initia	ition fees			
	Discretion	nary spending account	Γ	Personal services (e g , maid, cha	uffeur, chef)		 	
b	reimbursement	xes in line 1a are checked, did the ord or provision of all of the expenses de	scribed	above? If "No," complete Part III t	o explain	1 b		
	_	ation require substantiation prior to re ees, officers, including the CEO/Exec			•	2		
	organization's	. If any, of the following the filing orgar CEO/Executive Director Check all th ed organization to establish compens	at apply	Do not check any boxes for metho	ods			
	√ Compensa	ation committee	√	Written employment contract				
	✓ Independe	ent compensation consultant	√	Compensation survey or study				
	✓ Form 990	of other organizations	▽	Approval by the board or compens	ation committee			
	During the year or a related org	r, did any person listed on Form 990, anization	Part VII	, Section A , line 1a with respect to	the filing organization			
а	Receive a seve	rance payment or change-of-control	payment	?		4a		Νo
b	Participate in, o	or receive payment from, a supplemer	ntal nonq	qualified retirement plan?		4b		Νo
c	Participate in, o	or receive payment from, an equity-ba	ased com	npensation arrangement?		4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and pro	ovide the	e applicable amounts for each item	ın Part III			
	Only 501(c)(3)	, 501(c)(4), and 501(c)(29) organizat	ions mu	st complete lines 5-9.				
		ted on Form 990, Part VII, Section A contingent on the revenues of	, line 1a,	, did the organization pay or accrue	any			
а	The organization	n?				5a		Νo
b	Any related org					5b		Νo
	If "Yes," on line	e 5a or 5b, describe in Part III						
	,	ted on Form 990, Part VII, Section A contingent on the net earnings of	, line 1a,	, did the organization pay or accrue	any			
а	The organization	on?				6a		Νo
b	Any related org	janization?				6b		Νo
	If "Yes," on line	e 6a or 6b, describe in Part III						
		ted on Form 990, Part VII, Section A lescribed in lines 5 and 6? If "Yes," d			on-fixed	7		No
	Were any amou	ints reported on Form 990, Part VII, p	oaid or a	ccured pursuant to a contract that	was			

subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

ın Part III

section 53 4958-6(c)?

Cat No 50053T

8

Νo

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Breakdown of	fW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (i) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 Scott Jackson President & CEO	(i)	303,633	56,668	14,950	13,250	25,107	413,608	0
	(ii)	0	0	0	0	0	0	0
2 Christine Sow Executive Director, GHC	(i)	179,436	0	0	0	0	179,436	0
,	(ii)	0	0	0	0	0	0	0
3 Ann Canela VP, Partner Solutions	(i)	136,387	21,982	15,595	7,798	5,858	187,620	0
,	(ii)	0	0	0	0	0	0	0
4 Joseph Mettimano VP, Mktg & Campaign	(i)	143,687	21,443	7,798	7,798	15,185	195,911	0
Engagement	(ii)	0	0	0	0	0	0	0
5 Stephanie Scholz Managing Director, HR &	(i)	116,400	21,955	7,176	7,176	16,433	169,140	0
Admin	(ii)	0	0	0	0	0	0	0
6 Mark Milligan Managing Director, Finance	(i)	123,493	16,201	9,463	9,463	6,140	164,760	0
J .y =,	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015	chedule J (Form 990) 2015			
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) 2015

Treasurv

Service

GLOBAL IMPACT

Internal Revenue

Name of the organization

OMB No 1545-0047 2015 Open to Public Inspection

DLN: 93493051005147

Employer identification number

52-1273585

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

Return **Explanation** Reference FORM 990. (Continued) Global Impact is a leader in growing global philanthropy. The organization builds partnerships and raises resources PART III, LINE that help the world's most vulnerable people Global Impact provides a continuum of services including 1)Integrated, partner-1 - MISSION specific advisory and backbone services, 2) Campaign Design, Marketing and implementation for workplace and signature fundraising campaigns, and 3) 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 the Global Impact Alliance including CARE, Doctors without Borders, Heifer International, Save the Children, the U.S. Fund for UNICEF and World Vision 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. 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 \$7 MILLION IN GROSS PLEDGES ON BEHALF OF ITS ALLIANCE OF 128 INTERNATIONALLY-FOCUSED CHARITIES, GLOBAL IMPACT ENGAGED NEARLY 450 PUBLIC AND PRIVATE-SECTOR WORKPLACE GIVING CAMPAIGNS, WHICH COLLECTIVELY RAISED NEARLY \$217 MILLION IN GROSS PLEDGES IN fiscal year 2016 GLOBAL IMPACT ALSO PROVIDES IMPACT FUNDS, WHICH CURRENTLY ARE BUILT AROUND TEN THEWATIC 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 PHILANTHROPIC NEEDS OF A CORPORATION OR FOUNDATION BY LEVERAGING A BROAD AND LONG-STANDING NETWORK OF MEDIA ALLIANCES, GLOBAL IMPACT PROVIDES CHARITIES THE MEANS OF PARTICIPATING IN PRINT AND ELECTRONIC COOPERATIVE ADVERTISING CAMPAIGNS FOR NEARLY 10 YEARS GLOBAL IMPACT HAS SERVED AS FIDUCIARY FOR DONOR ADVISED FUNDS ON BEHALF OF CORPORATE FOUNDATIONS THROUGH THESE EFFORTS, \$35 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 MONITORING

Return Reference	Explanation
FORM 990, PART III, LINE 4b - PARTNER SOLUTIONS	The Partner Solutions Team brings customized consulting services to the private and non-profit sectors including strategy, implementation and on-going organizational support. The team provides integrated, cross-sector and collaborative approaches along a continuum of global resource development and partnership needs. Mobilizing the nexus of private and non-profit sectors, we create strategies, launch global campaigns and provide supporting mechanisms to grow resources, responsible business, and social impact. Services include research, strategy, activation, marketing visibility and evaluation Additionally, the partner solutions team has four turn-key service suites. fundraising strategy and campaigns, local to global, storytelling for development and backbone/ fiscal services.

Return Reference	Explanation
•	The organization's Form 990 undergoes a number of internal and external review's 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 and the President and Chief Executive Officer. 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. Individually, board members are provided an electronic version of the form, so that each can review it and raise questions before the form is filed.

Return Reference	Explanation
SECTION B, LINE 12C	A conflict of interest is executed and signed on an annual basis by all members of the board and staff. When any expression of conflict of interest seems even remotely possible, the person(s) potentially involved shall remove himself/herself (themselves) from any process leading to recommendations or decision making relating to matters in which a conflict may exist.

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

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

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
SCHEDULE R | Related Or

DLN: 93493051005147OMB No 1545-0047

Related Organizations and Unrelated Partnerships

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

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at $\underline{www.irs.qov/form990}$.

Name of the organization GLOBAL IMPACT				52-12735	dentification n	umber		
Part I Identification of Disregarded Entities Com	plete if the organization	answered "Yes" o	n Form 990, Part		63			
(a) Name, address, and EIN (ıf applıcable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income En	(e) id-of-year assets	(f) Direct cont entit			
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations Complete if in the tax year.	the organization ar	iswered "Yes" on	Form 990, Pai	rt IV, line 34	because it	had one	3
(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 s (if section 501((f) ect controlling entity	Section (13) coi enti	512(b)
(1)Campaign Accelerator Inc 1199 N FAIRFAX ST SUITE 300	See Part VII	DC	501(c)(3)	7	See Part	VII	Yes Yes	No
Alexandna, VA 22314 26-3265577								
								ĺ

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop r alloca) ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	aging	(k) Percentage ownership
]			Yes	No		Yes	No	
			·									
											L.,	
							 					
Port TV Identification of Polated Overninations Toyoble o												

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.

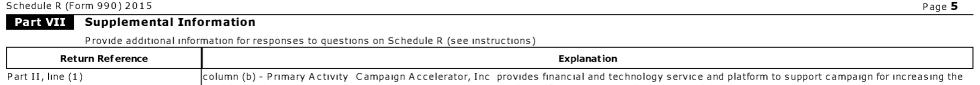
) n 512 13) olled ty?	No								
(h) Percentage ownership		ı	ļ	1		1	1		1
(g) Share of end- of-year assets		ı		1					
(f) Share of total Income		1		1				,	
(e) Type of entity (C corp, S corp, or trust)									
(d) Direct controlling entity									
(c) Legal domicile (state or foreign country)									
(b) Pnmary activity									
(a) Name, address, and EIN of related organization									

	,						
Pā	rt V Transactions With Related Organizations Complete if the organization answer	ered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations li	sted in Parts II-IV?				
а	Receipt 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)				1 b		No
c	Gift, grant, or capital contribution from related organization(s)				1 c		No
d	Loans or loan guarantees to or for related organization(s)				1 d		No
е	Loans or loan guarantees by related organization(s)				1e		No
f	Dividends from related organization(s)				1f		No
g	Sale of assets to related organization(s)				1g		No
h	Purchase of assets from related organization(s)				1h		No
i	Exchange of assets with related organization(s)				1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I	Performance of services or membership or fundraising solicitations for related organization(s)				11		No
n	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
0	Sharing of paid employees with related organization(s)				10		No
р	Reimbursement paid to related organization(s) for expenses				1 p		No
q	Reimbursement paid by related organization(s) for expenses				1q		No
r	Other transfer of cash or property to related organization(s)				1r		No
s	O ther transfer of cash or property from related organization(s)				1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete		overed relationships				
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount ir	nvolved	

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

revenue) that was not a related organization. See instructions i			ertaın ınvest										
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ²		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										 		1 !	



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