

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2018Open to Public
Inspection

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

Go to www.irs.gov/Form990 for instructions and the latest information.A For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GLOBAL FUND FOR CHILDREN		D Employer identification number 56-1834887
	Doing business as		E Telephone number (202) 331-9003
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 8,100,251.
	1411 K STREET	1200	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: JOHN HECKLINGER SAME AS C ABOVE			H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.GLOBALFUNDFORCHILDREN.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1993 M State of legal domicile: NC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ADVANCE THE RIGHTS AND OPPORTUNITIES OF CHILDREN AND YOUTH WORLDWIDE.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	35
	6 Total number of volunteers (estimate if necessary)	6	26
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 38	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	8,261,719.	5,575,746.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	78,443.	337,711.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,457.	20,209.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,361,619.	5,933,666.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	2,181,730.	2,242,175.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)	2,265,081.	2,084,848.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 707,359.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,722,028.	1,650,527.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,168,839.	5,977,550.
	19 Revenue less expenses. Subtract line 18 from line 12	2,192,780.	-43,884.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	11,487,540.	10,579,123.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,194,804.	534,123.
		10,292,736.	10,045,000.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date
	JOHN HECKLINGER, PRESIDENT & CHIEF EXECUTIVE OFFICER	4/16/20
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature
	MICHAELA CROMAR	MICHAELA CROMAR
	Date	Check <input type="checkbox"/> if self-employed PTIN
	04/16/20	P00895728
	Firm's name ▶ CLIFTONLARSONALLEN LLP	Firm's EIN ▶ 41-0746749
	Firm's address ▶ 901 N. GLEBE ROAD, SUITE 200 ARLINGTON, VA 22203	Phone no. 571-227-9500

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

GLOBAL FUND FOR CHILDREN PARTNERS WITH GRASSROOTS ORGANIZATIONS AROUND THE WORLD TO HELP CHILDREN AND YOUTH REACH THEIR FULL POTENTIAL AND ADVANCE THEIR RIGHTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 4,481,327. including grants of \$ 2,242,175.) (Revenue \$ 0.)**GRANTMAKING:**

THE GLOBAL FUND FOR CHILDREN (GFC) IDENTIFIES AND INVESTS IN COURAGEOUS GRASSROOTS ORGANIZATIONS THAT ADVANCE CHILDREN'S RIGHTS AROUND THE WORLD RUN BY DEDICATED LOCAL LEADERS. THESE GRASSROOTS PARTNERS EMPOWER YOUNG PEOPLE FACING POVERTY AND INJUSTICE TO REACH THEIR FULL POTENTIAL. GFC'S GOAL IS TO HELP THESE ORGANIZATIONS DEEPEN THEIR IMPACT AND BUILD THEIR CAPACITY FOR SOCIAL CHANGE. GFC CARRIES OUT THIS WORK ACROSS FOUR CORE FOCUS AREAS: EDUCATION; GENDER EQUITY; YOUTH EMPOWERMENT; AND FREEDOM FROM VIOLENCE AND EXPLOITATION.

4b (Code:) (Expenses \$ 351,371. including grants of \$ 0.) (Revenue \$ 0.)**COMMUNICATIONS:**

THROUGH ITS COMMUNICATIONS OUTREACH, GFC USES DIGITAL MEDIA, PHOTOGRAPHY AND STORIES TO TELL ABOUT ITS EFFORTS DEDICATED TO DISCOVERING, FUNDING, AND COACHING TRULY GRASSROOTS ORGANIZATIONS THAT EMPOWER CHILDREN AND YOUTH. BY USING ITS WEBSITE, ONLINE OUTREACH AND SOCIAL MEDIA, GFC HIGHLIGHTS ITS ABILITY TO TAKE SMART RISKS THAT OTHERS WON'T, PARTNERING WITH INNOVATIVE ORGANIZATIONS THAT ARE FIGHTING THE ODDS IN PLACES LIKE SLUMS, REFUGEE CAMPS, AND RURAL VILLAGES. GFC PROVIDES A CRUCIAL LINK, CONNECTING COMMUNITY LEADERS WITH THE PROFESSIONAL SERVICES AND SUPPORT THEY NEED TO SUCCEED.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **4,832,698.**

Form 990 (2018)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
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	X
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	X
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	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X
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	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
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	X
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 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a X	
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	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X
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 X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
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	14b X	
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 X	
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	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X
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	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

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

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

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 35		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b If "Yes," enter the name of the foreign country: HONG KONG See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X

Form 990 (2018)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

☒ X**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 11 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 10		
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?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI**

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

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records **▶**
RICHA CHOPRA - 202-331-9003
1411 K STREET, SUITE 1200, WASHINGTON, DC 20005

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GUNJAN JAIN CHAIR	5.00	X		X				0.	0.	0.
(2) EDWARD NUSBAUM TREASURER	1.00	X		X				0.	0.	0.
(3) MELISSA SWARTZ SECRETARY	1.00	X		X				0.	0.	0.
(4) CHRIS WOLZ SECRETARY	1.00	X		X				0.	0.	0.
(5) JENNIFER ALTABEF DIRECTOR	1.00	X						0.	0.	0.
(6) KEVIN CAVANAUGH DIRECTOR	1.00	X						0.	0.	0.
(7) MICHAEL DAFPEY DIRECTOR	1.00	X						0.	0.	0.
(8) STEPHEN FIAMMA DIRECTOR	1.00	X						0.	0.	0.
(9) NICOLE A. KAMALESON DIRECTOR	1.00	X						0.	0.	0.
(10) SHWETA MEHTA VICE CHAIR	1.00	X						0.	0.	0.
(11) MARIA VALLEJO-NGUYEN DIRECTOR	1.00	X						0.	0.	0.
(12) STACEY H. MITCHELL DIRECTOR	1.00	X						0.	0.	0.
(13) JOHN HECKLINGER CEO/PRESIDENT	40.00	X		X				223,740.	0.	9,993.
(14) BILAL AMIN CHIEF OPERATING OFFICER	40.00			X				120,129.	0.	6,337.
(15) COREY OSER VICE PRESIDENT, PROGRAMS	40.00			X				152,120.	0.	13,998.
(16) RICHA CHOPRA MISTRY DIRECTOR OF FINANCE	40.00			X				97,372.	0.	8,475.
(17) DOREEN CHI VICE PRESIDENT DEVELOPMENT OFFICER	40.00			X				114,296.	0.	16,580.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) STEVEN MARCUS DIRECTOR OF MAJOR GIFTS	40.00					X		109,174.	0.	10,445.
1b Sub-total								816,831.	0.	65,828.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								816,831.	0.	65,828.

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

5

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

0

Form 990 (2018)

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d	112,153.			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,463,593.			
	g Noncash contributions included in lines 1a-1f: \$		34,655.			
	h Total. Add lines 1a-1f		5,575,746.			
Program Service Revenue	2 a _____		Business Code			
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)				
		172,351.			172,351.	
4 Income from investment of tax-exempt bond proceeds						
5 Royalties		20,209.			20,209.	
6 a Gross rents		(i) Real	(ii) Personal			
b Less: rental expenses						
c Rental income or (loss)						
d Net rental income or (loss)						
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)						
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a				
b Less: direct expenses		b				
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances		a				
b Less: cost of goods sold		b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a _____						
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions			5,933,666.	0.	0.	357,920.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	244,039.	244,039.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,998,136.	1,998,136.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	696,877.	384,719.	123,777.	188,381.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,142,236.	846,318.	136,799.	159,119.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	32,162.	22,873.	2,801.	6,488.
9 Other employee benefits	83,169.	61,329.	12,377.	9,463.
10 Payroll taxes	130,404.	87,755.	18,399.	24,250.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	40,210.		40,210.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	6,636.		6,636.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	579,064.	435,023.	56,543.	87,498.
12 Advertising and promotion				
13 Office expenses	94,290.	14,737.	75,376.	4,177.
14 Information technology	154,197.	62,007.	45,084.	47,106.
15 Royalties				
16 Occupancy	210,422.	134,142.	32,716.	43,564.
17 Travel	229,802.	162,551.	26,987.	40,264.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	37,009.	25,534.	5,585.	5,890.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	51,035.	31,511.	7,591.	11,933.
23 Insurance	31,575.		31,575.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a KNOWLEDGE EXCHANGES	147,209.	144,541.	1,477.	1,191.
b STAFF/INTERN DEVELOPMEN	35,926.	16,965.	16,094.	2,867.
c STATE REGISTRATION FEES	10,461.		0.	10,461.
d ALLOCATION OF G&A	0.	155,424.	-207,484.	52,060.
e All other expenses	22,691.	5,094.	4,950.	12,647.
25 Total functional expenses. Add lines 1 through 24e	5,977,550.	4,832,698.	437,493.	707,359.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

		(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	4,012,942.	1 1,972,047.
	2	Savings and temporary cash investments	122,083.	2 103,335.
	3	Pledges and grants receivable, net	5,391,079.	3 5,232,370.
	4	Accounts receivable, net		4
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	49,307.	9 24,831.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 353,861.	
	b	Less: accumulated depreciation	10b 67,498.	10c 286,363.
	11	Investments - publicly traded securities	1,815,337.	11 2,896,110.
	12	Investments - other securities. See Part IV, line 11		12
	13	Investments - program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11	74,236.	15 64,067.
16	Total assets. Add lines 1 through 15 (must equal line 34)	11,487,540.	16 10,579,123.	
Liabilities	17	Accounts payable and accrued expenses	104,931.	17 137,743.
	18	Grants payable	178,299.	18 99,000.
	19	Deferred revenue		19
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable to unrelated third parties	7,729.	24 5,450.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	903,845.	25 291,930.
	26	Total liabilities. Add lines 17 through 25	1,194,804.	26 534,123.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27		Unrestricted net assets	3,084,351.	27 2,709,818.
28		Temporarily restricted net assets	7,131,297.	28 6,270,316.
29		Permanently restricted net assets	77,088.	29 1,064,866.
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
30		Capital stock or trust principal, or current funds		30
31		Paid-in or capital surplus, or land, building, or equipment fund		31
32		Retained earnings, endowment, accumulated income, or other funds		32
33		Total net assets or fund balances	10,292,736.	33 10,045,000.
34		Total liabilities and net assets/fund balances	11,487,540.	34 10,579,123.

Form 990 (2018)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,933,666.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,977,550.
3	Revenue less expenses. Subtract line 2 from line 1	3	-43,884.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10,292,736.
5	Net unrealized gains (losses) on investments	5	-203,852.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	10,045,000.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	

Form 990 (2018)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

Employer identification number

GLOBAL FUND FOR CHILDREN

56-1834887

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% 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 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **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.**
- 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.**
- 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.**
- d ☐ **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.**
- e ☐ 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.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6,222,710.	7,153,777.	7,840,992.	8,261,719.	5,575,746.	35,054,944.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	6,222,710.	7,153,777.	7,840,992.	8,261,719.	5,575,746.	35,054,944.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						10,222,341.
6 Public support. Subtract line 5 from line 4.						24,832,603.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	6,222,710.	7,153,777.	7,840,992.	8,261,719.	5,575,746.	35,054,944.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	115,080.	113,476.	91,767.	97,201.	192,560.	610,084.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						35,665,028.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	69.63 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	73.51 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2018

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c	

Section 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	

Section 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	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	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	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .	3a	
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.	3b	

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2018

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

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

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

Schedule A (Form 990 or 990-EZ) 2018

Part VI

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

Schedule B

(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

GLOBAL FUND FOR CHILDREN

Employer identification number

56-1834887

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

GLOBAL FUND FOR CHILDREN

56-1834887

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>326,350.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>700,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>450,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>125,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

GLOBAL FUND FOR CHILDREN

56-1834887

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 1,250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 112,153.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 24,721.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
12		\$ 9,934.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
GLOBAL FUND FOR CHILDREN	56-1834887

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
11	15 SHARES OF AMAZON	\$ 24,721.	12/20/18
12	69 SHARES OF FACEBOOK	\$ 9,934.	12/20/18
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

GLOBAL FUND FOR CHILDREN**56-1834887**

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

GLOBAL FUND FOR CHILDREN

Employer identification number

56-1834887

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1

▶ \$

(ii) Assets included in Form 990, Part X

▶ \$

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

a Revenue included on Form 990, Part VIII, line 1

▶ \$

b Assets included in Form 990, Part X

▶ \$

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

Schedule D (Form 990) 2018

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ Nob If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	77,088.			1,547,684.	1,570,827.
b Contributions	1,007,484.	77,088.		-1,547,684.	-44,814.
c Net investment earnings, gains, and losses	34,955.				21,671.
d Grants or scholarships	54,661.				
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,064,866.	77,088.			1,547,684.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☒ .00 %
- b Permanent endowment ☒ 100.00 %
- c Temporarily restricted endowment ☒ .00 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		255,274.	33,429.	221,845.
d Equipment		98,587.	34,069.	64,518.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				286,363.

Schedule D (Form 990) 2018

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED LEASE OBLIGATION	291,930.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	291,930.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	5,912,038.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-203,852.
b	Donated services and use of facilities	2b	188,860.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-6,636.
e	Add lines 2a through 2d	2e	-21,628.
3	Subtract line 2e from line 1	3	5,933,666.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	5,933,666.

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

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

1	Total expenses and losses per audited financial statements	1	6,159,774.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	188,860.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	188,860.
3	Subtract line 2e from line 1	3	5,970,914.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,636.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	6,636.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,977,550.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE PERMANENT ENDOWMENT FUNDS ARE TO BE HELD BY GLOBAL FUND FOR CHILDREN IN PERPETUITY. THE TEMPORARILY RESTRICTED ENDOWMENT FUNDS ARE USED IN ACCORDANCE WITH THE DONORS' RESTRICTIONS.

PERMANENTLY RESTRICTED NET ASSETS OF \$1,064,866 AT JUNE 30, 2019 ARE AVAILABLE FOR THE JULIETTE GIMON FUND FOR COURAGEOUS LEADERSHIP TO HONOR THE WORK JULIETTE BROUGHT TO CHILDREN AND YOUNG PEOPLE GLOBALLY. THIS AMOUNT REPRESENTS CONTRIBUTIONS INCLUDING MATCHING FUNDS RECEIVED TO ASSIST IN THE CREATION OF A PERMANENT ENDOWMENT FUND.

PART X, LINE 2:

GLOBAL FUND FOR CHILDREN IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION

Part XIII Supplemental Information (continued)

501(C)(3) OF THE INTERNAL REVENUE CODE (IRC). THE INTERNAL REVENUE SERVICE HAS CLASSIFIED GLOBAL FUND FOR CHILDREN AS A PUBLICLY SUPPORTED FOUNDATION UNDER SECTIONS 509(A)(1) AND 170(B)(1)(A)(VI) OF THE IRC. GLOBAL FUND FOR CHILDREN HAS ADOPTED THE GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS. THE IMPLEMENTATION OF THIS GUIDANCE HAD NO IMPACT ON GLOBAL FUND FOR CHILDREN'S FINANCIAL STATEMENTS. GLOBAL FUND FOR CHILDREN BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR BUSINESS POSITIONS AND, AS A RESULT, DOES NOT HAVE UNCERTAIN INCOME TAX POSITIONS THAT HAVE A MATERIAL IMPACT ON THE FINANCIAL STATEMENTS. GLOBAL FUND FOR CHILDREN FILES AS A TAX-EXEMPT ORGANIZATION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INVESTMENT EXPENSES -6,636.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

Employer identification number

GLOBAL FUND FOR CHILDREN

56-1834887

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	1	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	445,636.
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	1	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	167,964.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	1	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	397,387.
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	0	0	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	74,233.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	311,312.
RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	0	0	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	67,935.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	70,000.
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES,	0	1	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	422,403.
3 a Subtotal	0	4			1,956,870.
b Total from continuation sheets to Part I	0	0			644,250.
c Totals (add lines 3a and 3b)	0	4			2,601,120.

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

Schedule F (Form 990) 2018

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	PROGRAM SERVICES	TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	644,250.
Totals					644,250.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, PRIMARY GRANT		8,000	WIRE TRANSFER	0	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, OPPORTUNITY GRANT		391	WIRE TRANSFER	0	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, PRIMARY GRANT		7,000	WIRE TRANSFER	0	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, OPPORTUNITY GRANT		391	WIRE TRANSFER	0	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, PRIMARY GRANT		10,000	WIRE TRANSFER	0	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, PRIMARY GRANT		4,000	WIRE TRANSFER	0	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, OPPORTUNITY GRANT		135	WIRE TRANSFER	0	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, PRIMARY GRANT		14,000	WIRE TRANSFER	0	N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **170**

3 Enter total number of other organizations or entities **0**

Schedule F (Form 990) 2018

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	EMERGENCY GRANT	38,275.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	COURAGE AWARD GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	914.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	18,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	EMERGENCY GRANT	25,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	18,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	5,630.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	193.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	14,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	COVENING GRANT	4,174.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	ORGANIZATIONAL DEVELOPMENT AWARD	6,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	333.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	805.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	14,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	14,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	CONVENING GRANT	9,084.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	14,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	561.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	307.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	5,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	250.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	2,800.	WIRE TRANSFER	0.	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	2,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	162	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	4,000	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	8,000	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	ORGANIZATIONAL DEVELOPMENT AWARD	2,000	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	14,000	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	10,000	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	505	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	OPPORTUNITY GRANT	486	WIRE TRANSFER	0	N/A	N/A
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	14,000	WIRE TRANSFER	0	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PRIMARY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	AFFINITY GRANT	2,700.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	EMERGENCY GRANT	2,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PRIMARY GRANT	6,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PRIMARY GRANT	5,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	PRIMARY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	PRIMARY GRANT	26,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	PRIMARY GRANT	28,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	PRIMARY GRANT	26,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	COURAGE AWARD	20,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	PRIMARY GRANT	6,000.	WIRE TRANSFER	0.	N/A	N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) – ALBANIA, ANDORRA,	OPPORTUNITY GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA,	PRIMARY GRANT	150,000	WIRE TRANSFER	0		N/A
			EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA,	EMERGENCY GRANT	4,000	WIRE TRANSFER	0		N/A
			MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJBOUTI, EGYPT,	PRIMARY GRANT	22,000	WIRE TRANSFER	0		N/A
			MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJBOUTI, EGYPT,	STEP UP AWARD	25,000	WIRE TRANSFER	0		N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	20,000	WIRE TRANSFER	0		N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	EMERGENCY GRANT	2,500	WIRE TRANSFER	0		N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	CONVENING GRANT	2,640	WIRE TRANSFER	0		N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	630	WIRE TRANSFER	0		N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	24,500	WIRE TRANSFER	0		N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	320	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY	24,000	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	19,000	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY	1,732	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	800	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	1,632	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	500	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	700	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	2,000	WIRE TRANSFER	0	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	13,000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	1,450.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	1,732.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	450.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	13,500.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	ADVOCACY GRANT	3,000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	1,692.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	2,074	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	6,000	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	ORGANIZATIONAL DEVELOPMENT AWARD	6,000	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	365	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	450	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	ADVOCACY GRANT	4,500	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	13,000	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	ORGANIZATIONAL DEVELOPMENT AWARD	6,000	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	1,500	WIRE TRANSFER	0	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	353	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	24,000	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	ADVOCACY GRANT	380	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	720	WIRE TRANSFER	0	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	OPPORTUNITY GRANT	340	WIRE TRANSFER	0	N/A	N/A
			RUSSIA AND NEIGHBORING STATE – ARMENIA, AZERBIJAN,	SUSTAINABILITY AWARD	33,000	WIRE TRANSFER	0	N/A	N/A
			RUSSIA AND NEIGHBORING STATE – ARMENIA, AZERBIJAN,	PRIMARY GRANT	10,000	WIRE TRANSFER	0	N/A	N/A
			RUSSIA AND NEIGHBORING STATE – ARMENIA, AZERBIJAN,	STEP UP AWARD	25,000	WIRE TRANSFER	0	N/A	N/A
			RUSSIA AND NEIGHBORING STATE – ARMENIA, AZERBIJAN	PRIMARY GRANT	8,000	WIRE TRANSFER	0	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	PRIMARY GRANT	11,000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	EMERGENCY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A
			NORTH AMERIA – CANADA AND MEXICO, BUT NOT THE UNITED STATES	CONVENING GRANT	2,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH AMERICA – ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA,	PRIMARY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH AMERICA – ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA,	PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH AMERICA – ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH AMERICA – ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA,	SUSTAINABILITY AWARD	34,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	17,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	1,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A

Part II		Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)							
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	ORGANIZATIONAL DEVELOPMENT AWARD	19,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	17,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	13,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	23,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA – AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	OPPORTUNITY GRANT	1,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	OPPORTUNITY GRANT	1,000.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	8,367.	WIRE TRANSFER	0.	N/A	N/A
			SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	PRIMARY GRANT	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	18,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	23,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	16,398.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	9,500.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	27,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	14,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	13,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	16,398.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	13,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	STEP UP AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	16,398.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	4,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	18,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	17,714.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	17,305.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PRIMARY GRANT	8,500.	WIRE TRANSFER	0.	N/A	N/A

Part IV Foreign Forms

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

Schedule F (Form 990) 2018

Part V Supplemental Information

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

PART I, LINE 2:

GLOBAL FUND FOR CHILDREN (GFC) MONITORS THE USE OF GRANT FUNDS OUTSIDE OF THE US BY REQUIRING GRANTEES TO SUBMIT INTERIM AND FINAL NARRATIVE AND FINANCIAL REPORTS TO OUR PROGRAM OFFICERS WHO MONITOR THEIR GRANTEES. ADDITIONALLY, GFC COMPILES AND INPUTS DATA INTO OUR GRANTS MANAGEMENT AND METRICS SYSTEM. PROGRAM OFFICERS ALSO PERFORM SITE VISITS, TYPICALLY ON A BIENNIAL BASIS, VISITING A SELECTION OF GRANTEES EACH TRIP. THE GRANTS MANAGER ENSURES GRANT COMPLIANCE AND COMPLIANCE WITH US TREASURY VOLUNTARY GUIDELINES FOR ORDER 13224.

PART I, LINE 3, COLUMN (E):**(A) REGION:**

CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

REGION: EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

Part V Supplemental Information

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

(A) REGION:

EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

(A) REGION:

MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

REGION: NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

Part V Supplemental Information

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

REGION: RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

(A) REGION:

SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

(A) REGION:

SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM

CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC

GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL,

KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS

PARTNERS.

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

Part V Supplemental Information

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

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT PROVIDED GRANTMAKING SUPPORT AND CAPACITY BUILDING SERVICES TO GFC GRASSROOTS GRANTEE PARTNERS IN THE REGION. OTHER EXPENSES INCLUDE TRAVEL, KNOWLEDGE EXCHANGES AND CONVENINGS HELD IN THE REGION FOR THE GRASSROOTS PARTNERS.

**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.

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

2018

Open to Public
Inspection

Name of the organization

GLOBAL FUND FOR CHILDREN

Part I General Information on Grants and Assistance

Employer identification number
56-1834887

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AL OTRO LADO PO BOX 32578 LOS ANGELES, CA 90032	47-2910078	501(C)(3)	22,099.	0.	N/A	N/A	PRIMARY GRANT AND OPPORTUNITY GRANT
LAUNIDAD11 457 RIVERSIDE DRIVE, SUITE 678 NEW YORK, NY 10115	13-4080201	501(C)(3)	11,747.	0.	N/A	N/A	PRIMARY GRANT; OPPORTUNITY GRANT
HOMIES UNIDOS 2105 BEVERLY BOULEVARD, SUITE 219 LOS ANGELES, CA 90057	95-4740768	501(C)(3)	24,150.	0.	N/A	N/A	PRIMARY GRANT; OPPORTUNITY GRANT; PRIMARY GRANT
CREA NICARAGUA 5824 CLOVER DRIVE OAKLAND, CA 94618	13-1837418	501(C)(3)	14,000.	0.	N/A	N/A	PRIMARY GRANT
IMMIGRANT YOUTH COALITION 23532 CALABASAS ROAD, SUITE A CALABASSAS, CA 91302	95-4116679	501(C)(3)	21,000.	0.	N/A	N/A	PRIMARY GRANT; EMERGENCY GRANT
FIHANKRA AKOMA NTOASO FAN 3301 WHEELER RD, SE WASHINGTON, DC 20032	20-3235972	501(C)(3)	5,000.	0.	N/A	N/A	PRIMARY GRANT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **11.**

3 Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) (2018)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MALAIKA 244 FIFTH AVE, SUITE N225 NEW YORK, NY 10001	26-0670177	501(C)(3)	49,000.	0.	N/A	N/A	PRIMARY GRANT ; SUSTAINABILITY AWARD
ORGANIZACION PARA EL EMPODERAMIENTO DE LA JUVENTUD - 3351 18TH STREET NW - WASHINGTON, DC 20010	20-3195935	501(C)(3)	18,986.	0.	N/A	N/A	PRIMARY GRANT ; OPPORTUNITY GRANT
HESHIMA KENYA, INC. 1111 N. WELLS, ROOM 306 CHICAGO, IL 60610	26-0239864	501(C)(3)	25,000.	0.	N/A	N/A	STEPUP AWARD
TAHIRIH JUSTICE CENTER 1717 ST. JAMES PLACE, SUITE 450 HOUSTON, TX 77056	54-1858176	501(C)(3)	32,032.	0.	N/A	N/A	PRIMARY GRANT ; ORG DEVELOPMENT GRANT ; OPPORTUNITY GRANT
WOMEN'S JUSTICE INITIATIVE PO BOX 21540 NEW YORK, NY 10087	30-0681223	501(C)(3)	14,135.	0.	N/A	N/A	PRIMARY GRANT

Schedule I (Form 990)

Part III

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

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

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

GLOBAL FUND FOR CHILDREN'S MONITORING PROCEDURES FOR U.S. GRANTEES INVOLVE SITE VISITS BY THE PROGRAM OFFICER ASSIGNED TO U.S. GRANTMAKING. WE ALSO COLLECT A MIDTERM AND A FINAL REPORT FROM THE GRANTEES, WHICH INCLUDE ORGANIZATIONAL METRICS, NARRATIVE DESCRIPTIONS OF HOW THE MONEY WAS SPENT, AND FINANCIAL REPORTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

GLOBAL FUND FOR CHILDREN

Employer identification number

56-1834887

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2018

GLOBAL FUND FOR CHILDREN

[illegible]

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

GLOBAL FUND FOR CHILDREN

Employer identification number

56-1834887

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	2	34,655.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....				
26 Other ▶ (.....				
27 Other ▶ (.....				
28 Other ▶ (.....				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2018

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

COLUMN (B) REPORTS THE NUMBER OF CONTRIBUTORS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

GLOBAL FUND FOR CHILDREN

Employer identification number

56-1834887

FORM 990, PART VI, SECTION A, LINE 1:

THE BOARD OF DIRECTORS MAY BY RESOLUTION DESIGNATE AN EXECUTIVE COMMITTEE
CONSISTING OF NOT LESS THAN FIVE AND NOT MORE THAN SEVEN DIRECTORS AND MAY
DELEGATE TO SUCH COMMITTEE THE POWERS AND AUTHORITIES OF THE BOARD IN THE
MANAGEMENT OF THE BUSINESS AND AFFAIRS OF THE CORPORATION, TO THE EXTENT
PERMITTED, AND EXCEPT AS MAY OTHERWISE BE PROVIDED, BY PROVISIONS OF LAW.
THE COMMITTEE SHALL KEEP FULL AND FAIR RECORDS AND ACCOUNTS OF ITS
PROCEEDINGS AND TRANSACTIONS. THE MINUTES OF THE EXECUTIVE COMMITTEE SHALL
BE DISTRIBUTED TO ALL MEMBERS OF THE BOARD OF DIRECTORS.

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

FINAL DRAFT FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW
BEFORE IT IS FILED WITH THE IRS.

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

ALL NEW BOARD MEMBERS AND EMPLOYEES ARE GIVEN THE ORGANIZATION'S CONFLICT
OF INTEREST DISCLOSURE POLICY AND ARE REQUIRED TO SIGN THE CONFLICT OF
INTEREST DISCLOSURE STATEMENT. IF A CONFLICT ARISES, THE CHIEF EXECUTIVE
OFFICER (CEO) IS ENGAGED TO DETERMINE IF THERE IS A CONFLICT OF INTEREST.
IF IT IS DETERMINED THAT THERE IS A CONFLICT OF INTEREST, THE CEO WILL
PRESENT THE MATTER TO THE CHAIR OF THE BOARD OF DIRECTORS FOR A FINAL
DETERMINATION. THE CONFLICTED PARTY IS EXPECTED TO BE INVOLVED IN THE
DISCUSSION. BOARD MEMBER AND STAFF HAVE TO SIGN THE CONFLICT OF INTEREST
DOCUMENT DECLARING ANY CONFLICT THAT MAY EXIST. IN INSTANCES THAT A
CONFLICT OF INTEREST IS DETERMINED, THE BOARD MEMBER WOULD HAVE TO ABSTAIN
THEMSELVES FROM THE DECISION MAKING AND APPROVAL PROCESS. ANY SUCH

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

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

832211 10-10-18

Name of the organization

GLOBAL FUND FOR CHILDREN

Employer identification number

56-1834887

INSTANCES AND DECISIONS ARE REPORTED DURING THE BOARD MEETING AND ARE NOTED IN THE BOARD MINUTES.

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

THE GLOBAL FUND FOR CHILDREN HAS A SUBSET TO THE BOARD THAT REVIEWS THE SALARY OF THE CHIEF EXECUTIVE OFFICER ON AN ANNUAL BASIS. FACTORS THAT INFLUENCE THEIR DECISION INCLUDE: 1) COMPARISON TO PEER ORGANIZATIONS, 2) THE ORGANIZATION'S OVERALL PERFORMANCE DURING THE PRECEDING FISCAL YEAR, AND 3) ANY ADDITIONAL RELEVANT ITEMS. ALL EMPLOYEES ARE SUBJECT TO PERFORMANCE REVIEW PROCESS AT THE END OF EACH FISCAL YEAR. EMPLOYEES COMPLETE THEIR SELF-EVALUATIONS WHICH ARE REVIEWED AT THE MANAGER LEVEL AND SENT TO HR AND CEO FOR REVIEW AND APPROVAL. ANY PERFORMANCE-BASED OR MARKET-BASED SALARY ADJUSTMENTS ARE ASSESSED BY THE LEADERSHIP TEAM AND APPROVED BY THE CEO BASED ON THE EXISTING GFC SALARY BANDS. ANY CHANGES TO THE COMPENSATION IS FILED IN EMPLOYEE PERSONAL FILES. THE SELF-ASSESSMENT FOR THE CEO IS REVIEWED BY THE BOARD CHAIR AND CO-CHAIR. THE MOST RECENT YEAR IN WHICH THE PROCESS INCLUDED A REVIEW WAS FISCAL YEAR ENDING, JUNE 30, 2019.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT, VA, WI, WV

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

FINANCIAL STATEMENTS ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE.

Related Organizations and Unrelated Partnerships

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

Name of the organization

GLOBAL FUND FOR CHILDREN

Employer identification number
56-1834887

2018
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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
THE GLOBAL FUND FOR CHILDREN UK TRUST	TO IMPROVE THE LIVES OF VULNERABLE CHILDREN AND YOUTH IN OUR WORLD	UNITED KINGDOM			GLOBAL FUND FOR CHILDREN		
86-90 PAUL STREET LONDON, EC2A 4NE, UNITED KINGDOM						X	
THE GLOBAL FUND FOR CHILDREN HK LIMITED	TO ADVANCE EDUCATION FOR CHILDREN AND YOUNG PEOPLE IN HONG KONG	CHINA			GLOBAL FUND FOR CHILDREN		
RM301 3FLR SUN HUNG KAI CENTRE 30 HARBOUR RD WANCHAI, HONG KONG, CHINA						X	

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

Schedule R (Form 990) 2018

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE GLOBAL FUND FOR CHILDREN UK TRUST		C	112,153.	FAIR MARKET VALUE
(2) THE GLOBAL FUND FOR CHILDREN UK TRUST		B	150,000.	CASH PAID
(3)				
(4)				
(5)				
(6)				

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

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue ServiceA ☐ Check box if address changedName of organization (☐ Check box if name changed and see instructions.)

D Employer identification number (Employees' trust, see instructions.)

B Exempt under section

☒ 501(c)(3)☐ 408(e) ☐ 220(e)☐ 408A ☐ 530(a)☐ 529(a)

Print or Type

GLOBAL FUND FOR CHILDREN

56-1834887

Number, street, and room or suite no. If a P.O. box, see instructions.

1411 K STREET, NO. 1200

E Unrelated business activity code (See instructions.)

City or town, state or province, country, and ZIP or foreign postal code

WASHINGTON, DC 20005

900099

C Book value of all assets at end of year

10,579,123.

F Group exemption number (See instructions.)

G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

H Enter the number of the organization's unrelated trades or businesses. **1** Describe the only (or first) unrelated trade or business here **SEE STATEMENT 1**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☒ No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **RICHA CHOPRA**Telephone number **202-331-9003****Part I Unrelated Trade or Business Income**

	(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales			
b Less returns and allowances			
c Balance	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4 a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	13	0.	

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	0.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	31	
32 Unrelated business taxable income. Subtract line 31 from line 30	32	0.

Part III Total Unrelated Business Taxable Income

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	0.

Part IV Tax Computation

39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.

Part V Tax and Payments

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	136.
b	2018 estimated tax payments	50b	2,104.
c	Tax deposited with Form 8868	50c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other	50g	
51	Total payments. Add lines 50a through 50g	51	2,240.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	2,240.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded	55	2,240.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here HONG KONG	Yes	No
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer MICHAELA CROMAR Date 4/16/20 Title PRESIDENT & CHIEF EXECUTIVE OFFICER

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
MICHAELA CROMAR	MICHAELA CROMAR	04/16/20		P00895728
Firm's name CLIFTONLARSONALLEN LLP	Firm's EIN 41-0746749			
Firm's address 901 N. GLEBE ROAD, SUITE 200 ARLINGTON, VA 22203	Phone no. 571-227-9500			

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes No
4a Additional section 263A costs (attach schedule)	4a				
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)**(b) Total deductions.** Enter here and on page 1, Part I, line 6, column (B)**0.****Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)
			8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Totals		Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8		0.	0.

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Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).	Enter here and on page 1, Part I, line 9, column (B).	
Totals		0.	0.	

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).	Enter here and on page 1, Part II, line 26.		
Totals		0.	0.	0.		

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.				Enter here and on page 1, Part II, line 27. 0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

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FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT	1
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QUALIFIED TRANSPORTATION FRINGE BENEFITS
THE TAXPAYER CERTAINTY AND DISASTER TAX RELIEF ACT OF 2019 REPEALED
SEC 512A7 2017 TAX CUTS AND JOBS ACT. THE ORGANIZATION REQUESTS REFUND
OF ESTIMATED TAXES PAID RELATED TO UNRELATED BUSINESS INCOME
TRANSPORTATION FRINGE BENEFITS.

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