PUBLIC DISCLOSURE COPY \*\*

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public

Department of the Treasury

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

2023 A For the 2022 calendar year, or tax year beginning JUL 1, 2022 and ending JUN Check if applicable C Name of organization D Employer identification number Address change GLOBAL FUND FOR CHILDREN Name change 56-1834887 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated (202)331-90031411 K STREET 1200 18,090,868. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return Applica-tion pending 20005 WASHINGTON, DC H(a) Is this a group return F Name and address of principal officer: JOHN HECKLINGER Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.GLOBALFUNDFORCHILDREN.ORG H(c) Group exemption number K Form of organization: X Corporation Other L Year of formation: 1993 M State of legal domicile: NC Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: TO ADVANCE THE RIGHTS AND **Activities & Governance** OPPORTUNITIES OF CHILDREN AND YOUTH WORLDWIDE. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 13 3 Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 13,198,005. 17,194,602. Contributions and grants (Part VIII, line 1h) 8 0. 0. Program service revenue (Part VIII, line 2g) 155,755. 334,449. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 34,010. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 68,648. 11 17,563,061. 13,422,408. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 4,656,194. 5,610,167. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 2,526,234. 2,754,494. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,580,005. 2,790,611. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 11,155,272. 8,762,433. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,659,975. 6,407,789. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 14,679,326. 22,346,127. Total assets (Part X, line 16) 2,970,397 1,796,326. 21 Total liabilities (Part X, line 26) 三年 12,883,000. 19,375,730 Net assets or fund balances. Subtract line 21 from line 20 ..... 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. Signature of officer Date Sign JOHN HECKLINGER, PRESIDENT & CHIEF EXECUTIVE OFFICER Here Type or print name and title Date PTIN Check Preparer's signature Print/Type preparer's name ROBERT WILLIAMS 05/14/24 P01345960 ROBERT WILLIAMS Paid self-employed Firm's EIN 41-0746749CLIFTONLARSONALLEN LLP Preparer Firm's name Firm's address 901 NORTH GLEBE ROAD, SUITE 200 Use Only ARLINGTON, VA 22203 Phone no. (571) 227-9500 X Yes May the IRS discuss this return with the preparer shown above? See instructions No

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  Of OBAL FUND FOR CULL DREN DARWING WITH CRACEDOOMS ORGANIZATIONS ABOUND
	GLOBAL FUND FOR CHILDREN PARTNERS WITH GRASSROOTS ORGANIZATIONS AROUND THE WORLD TO HELP CHILDREN AND YOUTH REACH THEIR FULL POTENTIAL AND
	ADVANCE THEIR RIGHTS.
	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?
	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 X 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 \$9 , 424 , 263 • including grants of \$5 , 610 , 167 • ) (Revenue \$)
	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.
	EMPOWERMENT; AND FREEDOM FROM VIOLENCE AND EXPLOITATION.
4b	(Code:) (Expenses \$
	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 \$)
70	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
4 -	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses 9,946,472.
40	Total program service expenses 9,946,472.  Form <b>990</b> (2022)
	101111 999 (2022)

# Form 990 (2022) GLOBAL FUND FOR CHILDREN 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		Х
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		Х
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	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,	Ť		
•	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? <i>If</i> "Yes," <i>complete</i>	<b>-</b>		<del></del>
0	, ,	8		x
0	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in 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.			
а	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	<u> </u>
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
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
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	
е	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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	i		T -
	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,"	"		<del></del>
13	,	19		x
20-	complete Schedule G, Part III	20a		X
20a	•	20a 20b		<del>  ^</del>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		$\vdash$
21			Х	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	Λ	<u> </u>

Form 990 (2022) GLOBAL FUND FOR CH Part IV Checklist of Required Schedules (continued)

	(Sometimes)		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? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
<b>2</b> 4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			1
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del></del>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			7.7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		x
06	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			1
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		v	
0.5	Part V, line 1	34	X	<del></del>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	^	$\vdash$
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		x
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
30		36		x
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-30		<u> </u>
0,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	<del>"</del>		_ <u></u>
- <b>-</b>	Note: All Form 990 filers are required to complete Schedule O	38	х	1
Pai			•	
	Check 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			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

232004 12-13-22

Form 990 (2022) GLOBAL FUND FOR CHILDREN

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	25			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร? ฺ		2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccou	nt)?	4a	Х	
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 Advanced in the Financi	ccour	ts (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
С	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	e orga	anization 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 contribution		-			
_	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			_		v
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a		X
b			d	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 8282?			7-		х
		7d	1	7с		Λ
d	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		•	7e		Х
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		t?	7 <del>6</del>		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		199 as required?	7g		- 21
9 h	If the organization received a contribution of qualified intellectual property, did the organization file of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file of the organization file organization file of the organization file of the organization file of the organization file organization file of the organization file organization file of the organization file of the organization file organization			79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
_		-		8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:	_				
а	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:					
а	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				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	ı	?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	L			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
h	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the					
b	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a			1	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
•	excess parachute payment(s) during the year?			15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	inco	ne?	16		Х
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any actions.	tivitie	5			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					
				_	$\Omega\Omega\Omega$	(0000:

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line oa, ob, or rob below, describe the circumstances, processes, or changes on schedule of see instructions.			77					
Sac	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			X					
Sec	tion A. Governing Body and Management		Vaa	Na					
10	Enter the number of voting members of the governing body at the end of the tax year 13		Yes	No					
Ia	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 on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent 1b								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
_	officer, director, trustee, or key employee?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
•	of officers, directors, trustees, or key employees to a management company or other person?	3		х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х					
	5 Did the organization become aware during the year of a significant diversion of the organization's assets?								
6	Did the organization have members or stockholders?	5 6		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?	7a		х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
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 on Schedule O	9		Х					
Sec	tion 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?	10a		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?	11a	X						
b	Describe on 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	12a	Х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	on Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	Х						
14	Did the organization have a written document retention and destruction policy?	14	Х						
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?								
	The organization's CEO, Executive Director, or top management official	15a	X						
b	Other officers or key employees of the organization	15b	Х						
	If "Yes" to line 15a or 15b, describe the process on 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?	16a		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?	16b							
Sec	tion C. Disclosure		3.53						
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CT, FL, GA, HI, IL, KS								
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)	availal	ole					
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request Other (explain on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial						
	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 CHANDARA UN, CONTROLLER - 202-331-9003								
	1411 K STREET, SUITE 1200, WAHINGTON, DC 20005								
232006	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2022)					

7

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos			one	Reportable	Reportable	Estimated
	hours per	box	, unle: cer ar	ss per	son i	s both	n an	compensation	compensation	amount of
	week		T an			1	100)	from	from related	other
	(list any hours for	director				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	9e 0r	trustee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	om pe		1099-NEC)	,	and related
	below	Individual trustee or	Institutional	Jec	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	lust	Officer	Key	High	Former			
(1) JOHN HECKLINGER	40.00	-								
CEO/PRESIDENT	<u> </u>			Х				242,941.	0.	32,716
(2) COREY OSER	40.00	-								
VP PROGRAMS	<u> </u>			Х				171,179.	0.	26,280
(3) RICHA CHOPRA MISTRY	40.00	1								
VP FINANCE	<u> </u>			Х				169,050.	0.	16,562
(4) PALMER B SHEPARD	40.00							100 004		40 00-
VICE PRESIDENT, OPERATIONS AND GOVER	40.00					X		103,394.	0.	13,327
(5) CHARLENE BOWMAN	40.00	-				l		110 101		4 545
FINANCE CONTROLLER	40.00					X		112,121.	0.	4,517
(6) CHRISTINE BURKHART	40.00	-				l		111 510		1 000
VICE PRESIDENT, STRATEGIC PARTNERSHI	40.00					X		111,512.	0.	1,000
(7) KHAN KULSOOM	40.00	-				,,		102 201	_	4 165
SENIOR REGIONAL DIRECTOR, ASIA	40.00		_			X		103,391.	0.	4,165
(8) KIMBERLY MCCLAIN	40.00	-				7.		102 054	0	1 10E
REGIONAL CO-DIRECTOR, AMERICAS	F 00					X		103,054.	0.	4,485
(9) SHWETA SIRAJ MEHTA	5.00	Х		₩.				0.	0	^
CHAIR (10) SWATEE DEEPAK	1.00	Δ		Х				0.	0.	0
CO-CHAIR	1.00	Х		х				0.	0.	0
(11) GREG WALLIG	1.00	Λ		^				0.	0.	U
CO-CHAIR	1.00	Х		х				0.	0.	0
(12) LILA RYMER	1.00							0.	0.	0
DIRECTOR, TREASURER (START 05/23)	1.00	х		Х				0.	0.	0
(13) CHRIS WOLZ	1.00	22		22				•	<b>.</b>	0
SECRETARY	1.00	х		х				0.	0.	0
(14) JENNIFER ALTABEF	1.00							•	•	•
DIRECTOR (UNTIL 05/23)	1.00	х						0.	0.	0
(15) JAMES M. CAIN	1.00								0.1	-
DIRECTOR	=:	х						0.	0.	0
(16) ANTOINE DE GIULLENCHMIDT	1.00									
DIRECTOR		Х						0.	0.	0
(17) MAULIK DOSHI	1.00									
DIRECTOR		Х						0.	0.	0
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(A)	(B)	T		(0	C)			(D)	(E)	(F)
Name and title	Average	Average Position (do not check more than one						Reportable	Reportable	Estimated
	hours per					than o		compensation	compensation	amount of
	week		cer ar	nd a di	irecto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	ap.			ated		organization	(W-2/1099-MISC/	from the
	related organizations	stee	truste			bens		(W-2/1099-MISC/	1099-NEC)	organization
	below	nal tru	ional		ploye	t com		1099-NEC)		and related
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(18) METE COBAN	1.00									
DIRECTOR (UNTIL 05/23)		Х						0.	0.	0.
(19) JACLYN FOROUGHI	1.00									
DIRECTOR		Х						0.	0.	0.
(20) IAN GLASNER	1.00									
DIRECTOR		Х						0.	0.	0.
(21) NICOLE A. KAMALESON	1.00									
DIRECTOR		Х						0.	0.	0.
(22) STACEY H. MITCHELL	1.00									
DIRECTOR		Х						0.	0.	0.
(23) JOAN LOMBARDI	1.00									
DIRECTOR		Х						0.	0.	0.
(24) MILENA RUSU	1.00							-	-	-
DIRECTOR		х						0.	0.	0.
(25) MARIJANA SAVIC	1.00	1								
DIRECTOR	1100	x						0.	0.	0.
(26) MARK WILSON	1.00								•	
DIRECTOR		x						0.	0.	0.
1b Subtotal								1,116,642.	0.	103,052.
c Total from continuation sheets to Part								0.	0.	
d Total (add lines 1b and 1c)								1,116,642.	0.	103,052.
Total number of individuals (including but								eceived more than \$100.	000 of reportable	•
compensation from the organization						,		· · · · · · · · · · · · · · · · · · ·		9
										Yes No
3 Did the organization list any former office	er, director, trust	ee, k	кеу е	empl	loye	e, or	hig	hest compensated emp	loyee on	
line 1a? If "Yes," complete Schedule J for	r such individual									3 X
4 For any individual listed on line 1a, is the										
and related organizations greater than \$1	50,000? If "Yes,	" со	mple	ete S	Sche	edule	J f	for such individual		4 X
5 Did any person listed on line 1a receive of	r accrue comper	nsati	on fr	rom	any	unre	elate	ed organization or individ	dual for services	
rendered to the organization? If "Yes." co	omplete Schedul	e J f	or st	ıch ı	oers	on .				5 X
Section B. Independent Contractors										
1 Complete this table for your five highest	•	•							•	ation from
the organization. Report compensation for	or the calendar ye	ear e	enair	ng w	ith c	or wi	tnin		ear.	(0)
<b>(A)</b> Name and busine	ss address	NC	ONE	3				<b>(B)</b> Description of s	ervices	<b>(C)</b> Compensation
							$\dashv$			

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Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

56-1834887

Form 990 (2022) GLOBAL
Part VIII Statement of Revenue

		Check if Schedule O contains a response o	r note to any lin	e in this Part VIII			
		<u> </u>	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under
					Tunction revenue	business revenue	sections 512 - 514
ပ္ မ	1	a Federated campaigns 1a					
an du		b Membership dues 1b					
⊕ ह		c Fundraising events 1c					
ifts Ir A		d Related organizations 1d	37,312.				
nie Gig		e Government grants (contributions) 1e	-				
Sign		f All other contributions, gifts, grants, and					
her Her		I	17,157,290.				
풀		g Noncash contributions included in lines 1a-1f	111,083.				
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a-1f		17,194,602.			
		ì	Business Code				
Ð	2	a					
Ş		b					
Program Service Revenue		с					
an		d					
og. B		e					
Ā		f All other program service revenue					
		g Total. Add lines 2a-2f					
	3	Investment income (including dividends, interes	st, and				
		other similar amounts)		369,265.			369,265.
	4	Income from investment of tax-exempt bond pro					
	5	Royalties		13,182.			13,182.
		(i) Real	(ii) Personal				
	6	a Gross rents 6a					
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 492,991.					
		b Less: cost or other basis					
nue		and sales expenses 7b 527,807.					
eve		c Gain or (loss)		24 916			-34,816.
her Revenue		d Net gain or (loss)		-34,816.			-34,816.
	8	a Gross income from fundraising events (not					
Ò		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18  b Less: direct expenses  8b					
		c Net income or (loss) from fundraising events					
		a Gross income from gaming activities. See					
	3	Part IV, line 19 9a					
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities					
		a Gross sales of inventory, less returns					
		and allowances 10a					
		b Less: cost of goods sold 10b					
		c Net income or (loss) from sales of inventory					
			Business Code				
Miscellaneous Revenue	11	a MISCELLANEOUS REVENUE	900099	20,828.			20,828.
ane		b					
eve		с					
Aisc		d All other revenue					
		e Total. Add lines 11a-11d		20,828.			
	12	Total revenue. See instructions		17,563,061.	0.	0.	368,459.

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Section 501(c)(3) and 501(c)(4)	organizations must complete al	Lcolumne All other ora	ianizatione muet compli	ata column (A)
	organizations must complete ai	i colultilis. All ottici org	anizations must compi	ele coluitii (A).

Da :	Check if Schedule O contains a responsor include amounts reported on lines 6b.	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	64,694.	64,694.		
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	5,545,473.	5,545,473.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	665 040	500 104	25 252	40 565
	trustees, and key employees	667,843.	589,124.	37,952.	40,767
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 521 005	1 165 122	000	000 564
7	Other salaries and wages	1,731,985.	1,165,133.	273,288.	293,564
8	Pension plan accruals and contributions (include	E2 (12	22 524	0 600	10 400
	section 401(k) and 403(b) employer contributions)	53,613.	33,531.	9,682.	10,400 21,784
9	Other employee benefits	130,456.	88,393.	20,279.	
10	Payroll taxes	170,597.	123,871.	22,527.	24,199
11	Fees for services (nonemployees):				
а	Management				
b	Legal	54,350.		54,350.	
C	Accounting	54,550.		54,550.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	23,222.		23,222.	
f	Investment management fees	23,222•		23,222•	
g	Other. (If line 11g amount exceeds 10% of line 25,	1,076,219.	899,804.	158,515.	17,900
40	column (A), amount, list line 11g expenses on Sch 0.)	1,070,217.	0,004.	130,313.	17,500
12 13	Advertising and promotion	124,817.	46,731.	67,229.	10,857
13 14	Office expenses	208,405.	91,589.	80,826.	35,990
1 <del>4</del> 15		200,403.	31,303.	00,020.	33,330
16	Royalties Occupancy	269,368.	182,299.	45,222.	41,847
17	Travel	468,692.	421,130.	30,180.	17,382
ı, 18	Payments of travel or entertainment expenses	100,032.	121,1301	30,1001	17,302
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	116,394.	109,054.	7,340.	
20	Interest	6,953.		6,953.	
21	Payments to affiliates	7,7,7,7		.,,,,,,	
22	Depreciation, depletion, and amortization	42,738.	29,630.	6,270.	6,838
23	Insurance	35,177.	2,420.	32,757.	2,200
24	Other expenses. Itemize expenses not covered		, == • •		
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	KNOWLEDGE EXCHANGES	224,979.	224,979.		
b	STAFF/INTERN DEVELOPMEN	33,075.	26,273.	6,514.	288
c	INDIRECT EXPENSES	0.	259,629.	-318,228.	58,599
d			,	-,	,
e	All other expenses	106,222.	42,715.	44,248.	19,259
25	Total functional expenses. Add lines 1 through 24e	11,155,272.	9,946,472.	609,126.	599,674
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)				

Form 990 (2022)

Part X | Balance Sheet

Part X	Balance Sheet					
	Check if Schedule O contains a response or not	e to any	line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing			6,724,008.	1	6,318,075
2			103,590.	2	10,091,956	
3	Pledges and grants receivable, net	5,274,879.	3	1,902,362		
4	Accounts receivable, net		5,684.	4	22,958	
5	Loans and other receivables from any current or					
	trustee, key employee, creator or founder, subst					
	controlled entity or family member of any of thes		5			
6	Loans and other receivables from other disquali	fied pers	ons (as defined			
	under section 4958(f)(1)), and persons described	d in secti	on 4958(c)(3)(B)		6	
တ္ 7	Notes and loans receivable, net				7	
Assets	Inventories for sale or use				8	
₹   9	Prepaid expenses and deferred charges			49,552.	9	59,695
10	a Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D		374,501. 203,905.			4-0-0
	b Less: accumulated depreciation			194,671.		170,596 2,403,226
11	Investments - publicly traded securities			2,286,068.	11	2,403,226
12	•	Г		12		
13	,		13			
14		40.054	14	4 000 000		
15	Other assets. See Part IV, line 11			40,874.	15	1,377,259
16	Total assets. Add lines 1 through 15 (must equ			14,679,326.	16	22,346,127
17	Accounts payable and accrued expenses		229,088.	17	423,316	
18	Grants payable			755,957.	18	474,600
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete				21	
<sub>တို</sub> 22						
Liabilities	trustee, key employee, creator or founder, subst					
<u> </u>	controlled entity or family member of any of thes				22	
23	Secured mortgages and notes payable to unrela		·	E00 000	23	102 675
24	Unsecured notes and loans payable to unrelated	-		500,000.	24	493,675
25	Other liabilities (including federal income tax, pa					
	parties, and other liabilities not included on lines	-	•	311,281.	۰.	1,578,806
06	of Schedule D			1,796,326.	25 26	2,970,397
26	Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, che			1,790,320.	26	2,910,391
ဖွ	and complete lines 27, 28, 32, and 33.	CK HEIE				
ଅଁ   ଅଟି   27	Net assets without donor restrictions			2,024,994.	27	11,690,709
<u>e</u>   27 28				10,858,006.	28	7,685,021
<u> </u>	Organizations that do not follow FASB ASC 9			10,030,000.	20	7,005,021
돌	and complete lines 29 through 33.	Jo, Chec	K liefe			
5 29	Capital stock or trust principal, or current funds				29	
8   30	Paid-in or capital surplus, or land, building, or ed				30	
8   30 31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances 2	Total net assets or fund balances			12,883,000.	32	19,375,730
ž 32 33	Total liabilities and net assets/fund balances			14,679,326.	33	22,346,127
	Total liabilities and not assets/fully balafices			, 0.5,020.		Form <b>990</b> (202

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,56		
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,15		
3	Revenue less expenses. Subtract line 2 from line 1	3	6,40		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,88	3,0	00.
5	Net unrealized gains (losses) on investments	5	8	4,9	41.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	19,37	5,7	30.
Pa	rt XII Financial Statements and Reporting				
	Check 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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	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:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	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?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Forn	990	(2022)

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#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

GLOBAL FUND FOR CHILDREN 56-1834887 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5575746.	2952092.	6116730.	13198005.	17194602.	45037175.
2	Tax revenues levied for the organ-						
	ization'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	5575746.	2952092.	6116730.	13198005.	17194602.	45037175.
Ū	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,						
							7017873.
•							38019302.
	Public support. Subtract line 5 from line 4.						D001930Z.
		(a) 2018	/b) 2010	(a) 2020	(4) 2021	(a) 2022	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2018 5575746.	(b) 2019 2952092.	(c) 2020 6116730	(d) 2021 13198005.	(e) 2022	(f) Total
	Amounts from line 4	3373740.	2932092.	0110730.	13136003.	1/194002.	4303/1/3·
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	100 560	147 440	150 600	157 641	202 447	1020717
	and income from similar sources	192,560.	14/,449.	152,620.	15/,641.	382,447.	1032717.
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.)		42,094.	4,181.	42,808.		109,911.
11	<b>Total support.</b> Add lines 7 through 10						46179803.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	407,848.
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3)	
_	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	82.33 %
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	70.28 %
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not d	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	-	-		-		
	more, and if the organization meets the	-					
	organization meets the facts-and-circu						
18	Private foundation. If the organization						
				,,	,		(Form 990) 2022

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# 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1	T			
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•		•	•		· —
0-	check this box and stop here						
	ction C. Computation of Publi					T T	
	Public support percentage for 2022 (I	, (,,	,	( //		15	<u>%</u>
	Public support percentage from 2021 ction D. Computation of Investigation					16	%
	•			no 13 column (f)		17	0/
	Investment income percentage for 20						<u>%</u>
	Investment income percentage from :					18   3 1/3% and line 1	7 is not
198	33 1/3% support tests - 2022. If the						
L	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the						
i.	line 18 is not more than 33 1/3%, che						
20	<b>Private foundation</b> If the organization						

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# Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
- iu		
4b		
15		
4c		
70		
_		
5a		
5b		
5c		
6		
7		
8		
,		
9a		
9b		
30		
9с		
10a		
10b		

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Par	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Seci	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, 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		
	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,	_		
Sect	supervised, or controlled the supporting organization. ion C. Type II Supporting Organizations	2		
000	Ton C. Type it capporating organizations		Vaa	Na
4	Ware a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
	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 <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sect	the supported organization(s). ion 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		100	140
	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		
	By reason of the relationship described on line 2, above, 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		
Sect	ion 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).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see installable).	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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	0-		
<b>L</b>	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, 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	2b		
	these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.	ZIJ		
	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? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
~				

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

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
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			
Sect	on 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		
Sect	on 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		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional		d Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

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

OMB No. 1545-0047

2022

**Employer identification number** 

GLOBAL FUND FOR CHILDREN 56-1834887 Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 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 X 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), 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), 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

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

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **2** 

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
1		\$ <u>10,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 630,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 627,483.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 524,994.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>452,000.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)

14520514 131839 A480692

Name of organization Employer identification number

# GLOBAL FUND FOR CHILDREN

56-1834887

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I 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
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
223/53 11-15.			Schedule B (Form 990) (2022)

Name of organization **Employer identification number** 56-1834887 GLOBAL FUND FOR CHILDREN 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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 Inspection

Name of the organization

GLOBAL FUND FOR CHILDREN

**Employer identification number** 56-1834887

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Si	milar Funds o	r Ac	coun	ts. Complete if the
	organization anomorou neo orni om oco, natriv, iiii	(a) Donor adv	vised	funds	(1	<b>b)</b> Fun	ds 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 v	vriting that the assets	held	d in donor advised	d fund	s	
	are the organization's property, subject to the organization's	-					Yes No
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?						
Par	t II Conservation Easements. Complete if the org	ganization answered "	Yes	" on Form 990, Pa	art IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that appl	y).				
	Preservation of land for public use (for example, recreat	tion or education)		Preservation of a	a histo	rically	important land area
	Protection of natural habitat			Preservation of a	certif	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation cont	ribu	tion in the form of	a cor	servat	
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b						2b	
С	Number of conservation easements on a certified historic stru					2c	
d	Number of conservation easements included in (c) acquired a						
	historic structure listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	or te	rminated by the o	organiz	zation	during the tax
	year						
4	Number of states where property subject to conservation eas	_					
5	Does the organization have a written policy regarding the per						
	violations, and enforcement of the conservation easements it						Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations,	, and	l enforcing conse	rvatioi	n ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and	enfo	orcina conservatio	on eas	ement	ts during the vear
		,		J			,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requireme	ents	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	on easements in its re	venu	ue and expense st	tateme	ent and	d
	balance sheet, and include, if applicable, the text of the footn	ote to the organization	n's f	inancial statemen	its tha	t desc	ribes the
Da	organization's accounting for conservation easements.	Aut Historiaal T		arrage ar Oth	- · · · ·	:1	w Accete
Pai	t III Organizations Maintaining Collections of		rea	sures, or Oth	er Si	ımııaı	r Assets.
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 956	•					
	of art, historical treasures, or other similar assets held for pub	•				ce of p	DUBLIC
	service, provide in Part XIII the text of the footnote to its finan						
b	If the organization elected, as permitted under FASB ASC 956	•					
	art, historical treasures, or other similar assets held for public	exhibition, education	, or	research in furthe	rance	of pub	olic service,
	provide the following amounts relating to these items:						•
	(i) Revenue included on Form 990, Part VIII, line 1						
•							\$
2	If the organization received or held works of art, historical treat				gain, p	rovide	•
_	the following amounts required to be reported under FASB AS						¢
a	Revenue included on Form 990, Part VIII, line 1						Φ
D	Assets included in Form 990, Part X						φ

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Schedule D (Form 990) 2022

	t III Organizations Maintaining Co	llections of Art	, Historical Tre	asures, or Oth	er Sim	ilar Assets	(continu	ued)
3	Using the organization's acquisition, accession						(OOTHING	100)
_	collection items (check all that apply):	.,	,	ononing and mane	o.g			
а	Public exhibition	d	I oan or exc	hange program				
b	Scholarly research	e	Other					
c	Preservation for future generations	· ·						
4	Provide a description of the organization's coll	ections and explain	how they further th	e organization's ev	emnt nu	rnose in Part	XIII	
5	During the year, did the organization solicit or	·	•	•		•	AIII.	
J	to be sold to raise funds rather than to be mair						Yes	☐ No
Par	t IV Escrow and Custodial Arrange							110
	reported an amount on Form 990, Part		te ii tile organizatio	Transwered res e	// OIIII	550, r art iv,	iii iC 5, 6i	
	Is the organization an agent, trustee, custodiar		ary for contributions	s or other assets no	t include	ed		
	on Form 990, Part X?						Yes	☐ No
h	If "Yes," explain the arrangement in Part XIII ar						_ 100	
	ii res, explain the arrangement iiir are xiii ar	id complete the folk	owing table.				Amount	
_	Beginning balance					С		
	Additions during the year					d		
	Distributions during the year					e		
f	Ending balance					lf		
	Did the organization include an amount on For						Yes	No
	If "Yes," explain the arrangement in Part XIII. C				-		_	
Par								
		(a) Current year	(b) Prior year	(c) Two years back		ree years back	(e) Four	years back
10	Beginning of year balance	1,109,746.	1,377,875.	1,138,072		1,064,866.		77,088.
	Contributions	36,652.	11,500.	· · · · · ·		68,344.		007,484.
	Net investment earnings, gains, and losses	78,445.	-181,735.	,		46,762.		34,955.
	Grants or scholarships	68,516.	97,894.	81,100		41,900.		54,661.
	Other expenditures for facilities		27,022.	01,100	1	,,,,,,,		,
е								
	and programs				+			
	Administrative expenses	1,156,327.	1,109,746.	1,377,875	+	1,138,072.	1	064,866.
g	End of year balance	· · · · · ·			· I	1,130,072.		304,000.
2	Provide the estimated percentage of the currer Board designated or quasi-endowment	• 0000		) rieid as.				
_	100	%	_%					
b	0000							
C								
0-	The percentages on lines 2a, 2b, and 2c should be the second and the second sec	•						
3a	Are there endowment funds not in the possess	sion of the organizat	lion that are neid ar	ia administered for	urie		Γ,	Yes No
	organization by:							X
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations	and listed on require	d an Cabadula DO				3a(ii)	
							3b	
4 Par	Describe in Part XIII the intended uses of the of tVI Land, Buildings, and Equipme		iment iunas.					
· ui	Complete if the organization answered		Part IV line 11a S	ee Form 990 Part )	( line 10	1		
	Description of property	(a) Cost or ot			Accumu		(d) Book	value
	Description of property	basis (investm			leprecia		(a) Book	value
4-	Land	<del>- '</del>	50.15	(3.101)	- Spi Soia			
	Land							
	Buildings		25	5,274.	122	,093.	1 2 2	,181.
	Leasehold improvements	I		9,227.		812.		,415.
	Equipment			J, 441 •	70	, 014•	40	,410.
	Other		( a a b unit (D) " 11	<u> </u>			170	,596.
rotal	. Auu IIIIes Ta IIIIOUUIT Te. (Column (d) must ear	ıaı Form 990. Part X	: column (B) line 10	UC 1			<b>1</b> /0	,

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 GLOBAL FUND	FOR CHILDREN	56	5-1834887 Page <b>3</b>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" of	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 en	d-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" of	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 en	d-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" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description	, ,	(b) Book value
(1) DEPOSITS	,		57,377.
(2) EMPLOYEE TRAVEL ADVANCES			9,577.
(3) DUE FROM RELATED ENTITIES			17,106.
(4) RIGHT-OF-USE ASSET - OPERA	TTNG		1,293,199.
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15 )		1,377,259.
Part X Other Liabilities.	10.)		1/3///2330
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11e or 11f. See Form 990. Part X. line 25	j.
1. (a) Description of liability	, - 3,		(b) Book value
(1) Federal income taxes			
(2) LEASE LIABILITY - OPERATIN	rG		1,578,806.
(3)			
(4)			
(5)			ļ
(6)			

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	LEASE LIABILITY - OPERATING	1,578,806.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990. Part X. col. (B) line 25.)	1,578,806.

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

Schedule D (Form 990) 2022

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

Part XIII   Supplemental Information (continued)
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.

## SCHEDULE F (Form 990)

# 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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization **Employer identification number** GLOBAL FUND FOR CHILDREN 56-1834887 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, X No the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (f) Total (c) Number of (d) Activities conducted in the region (a) Region employees. expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region TO PROVIDE GRANTS PROGRAM CONSULTING CENTRAL AMERICA AND SERVICES AND CAPACITY THE CARIBBEAN 0 5 PROGRAM SERVICES BUILDING SUPPORT, THE 902,884. TO PROVIDE GRANTS PROGRAM CONSULTING EAST ASTA AND THE SERVICES AND CAPACITY PACIFIC 2 PROGRAM SERVICES BUILDING SUPPORT, THE 0 221,812. TO PROVIDE GRANTS PROGRAM CONSULTING SERVICES AND CAPACITY 0 2 BUILDING SUPPORT. THE PROGRAM SERVICES 822,833. EUROPE TO PROVIDE GRANTS PROGRAM CONSULTING MIDDLE EAST AND SERVICES AND CAPACITY NORTH AFRICA BUILDING SUPPORT. THE 0 0 PROGRAM SERVICES 538. TO PROVIDE GRANTS PROGRAM CONSULTING SERVICES AND CAPACITY NORTH AMERICA 0 3 PROGRAM SERVICES BUILDING SUPPORT. THE 858,315. TO PROVIDE GRANTS PROGRAM CONSULTING SERVICES AND CAPACITY RUSSTA AND NEIGHBORING STATES 0 6 PROGRAM SERVICES BUILDING SUPPORT. THE 1,470,662. TO PROVIDE GRANTS PROGRAM CONSULTING SERVICES AND CAPACITY SOUTH AMERICA 0 PROGRAM SERVICES BUILDING SUPPORT. THE 607,380. TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY 0 6 BUILDING SUPPORT THE SOUTH ASIA PROGRAM SERVICES 1,201,117. 0 25 6,085,541. 3 a Subtotal **b** Total from continuation 0 0 1,226,487. sheets to Part I ...... Totals (add lines 3a 7,312,028.

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

Schedule F (Form 990) 2022

SEE PART V FOR COLUMN (E) DESCRIPTIONS

and 3b)

Part I   Continuatio	n of Activities	s per Region	Schedule F (Form 990), Part I, line 3	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	0	0		TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE	1,226,487.
Totals					1,226,487.

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>(b)</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)
		SUB-SAHARAN	18TWENTY8: FY23					
		AFRICA	PRIMARY GRANT	18,000.	WIRE TRANSFER	0.	N/A	N/A
			ACADEMIA DE LIDERAZGO					
		CENTRAL AMERICA	SOCIAL: FY23 PRIMARY					
		AND THE CARIBBEAN	GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	ACCION HONDURAS: FY23					
			PRIMARY GRANT	7 000	WIRE TRANSFER	0	N/A	N/A
		AND THE CARIBBEAN	INIMANI GNANI	7,000.	WIKE IKANSPEK	0.	N/A	N/A
			AFRICAN WRITERS					
		SUB-SAHARAN	DEVELOPMENT TRUST:					
		AFRICA	FY23 PRIMAY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
			AMOS YOUTH CENTER:					
		AFRICA	FY23 PRIMARY GRANT	17,000.	WIRE TRANSFER	0.	N/A	N/A
			AMPLIAMENTE: FY23					
		SOUTH AMERICA	PRIMARY GRANT	17,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
			AMUNO RURAL HUB: FY23					
		AFRICA	PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
			AMURT/BIBLIOTECA					
		SUB-SAHARAN	COMUNITARIA MOARA:					
			FY23 PRIMARY GRANT	16 000	WIRE TRANSFER		N/A	N/A

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

3 Enter total number of other organizations or entities

► 271 ► 0

Schedule F (Form 990) 2022

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90). Part II. line	1)	r ago <b>z</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			APPLIED SCIENCES AND					
			TECHNOLOGY					
		SUB-SAHARAN	LABORATORIES: FY23					
		AFRICA	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	ASOCIACION AMA: FY23					
		AND THE CARIBBEAN	PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			ASOCIACION COMUNIDAD					
		CENTRAL AMERICA	LA ESPERANZA: FY23					
		AND THE CARIBBEAN	PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
			ASOCIACION DEJANDO					
		CENTRAL AMERICA	UNA SONRISA: FY23			_		
		AND THE CARIBBEAN	PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			ASOCIACION FUTURO					
		CENTRAL AMERICA	VIVO: FY23 SPECIAL	16 000				
		AND THE CARIBBEAN	AWARD	16,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	ASOCIACION GENERANDO:					
		AND THE CARIBBEAN	FY23 PRIMARY GRANT	8 800	WIRE TRANSFER	,	N/A	N/A
		AND THE CARIBBEAN	F123 PRIMARI GRANT	8,800.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	ASOCIACION POP NO'J:					
		AND THE CARIBBEAN	FY23 SPECIAL AWARD	29 250	WIRE TRANSFER	,	N/A	N/A
		IND THE CHAIDBEAN	I 123 BIECINE MAND	25,250.	WIRE TRANSFER	<u> </u>	14/21	14/21
		CENTRAL AMERICA	ASOCIACION SERNINA:					
		AND THE CARIBBEAN	FY23 PRIMARY GRANT	15 000	WIRE TRANSFER	0	N/A	N/A
		THE CHILDDENIA	220 ZHIMMI OHMI	13,000.	THE THE PERSON DIVINITION OF THE PERSON OF T	<u> </u>		
			ASOCIATIA ALTERNATIVE					
			SOCIALE: FY23					
		EUROPE	EMERGENCY GRANT	8,600.	WIRE TRANSFER	0.	N/A	N/A
				. ,			I .	

Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ago <u>z</u>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount	(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)
			ASOCIATIA ANAIS: FY23			_		
		EUROPE	EMERGENCY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
			ASOCIATIA PENTRU					
			LIBERTATEA SI					
			EGALITATEA DE GEN:					
		EUROPE	FY23 EMERGENCY GRANT	25,000.	WIRE TRANSFER	0.	N/A	N/A
			ASSOCIACAO DE					
			ASSESSORIA AOS POVOS					
			DA FLORESTA					
		SOUTH AMERICA	(AFLORA)/SECOYA: FY	15,420.	WIRE TRANSFER	0.	N/A	N/A
			ASSOCIACAO NUCLEO DE					
			EDUCACAO COMUNITARIA					
			DO COROADINHO: FY 23					
		SOUTH AMERICA	PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			ASSOCIACAO PAZEAR: FY					
		SOUTH AMERICA	23 PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			ATOOT: FY 23 PRIMARY					
		SOUTH ASIA	GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
			AUDACIOUS LEADERS					
		SUB-SAHARAN	NETWORK: FY23 PRIMARY					
		AFRICA	GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			AVANI: FY23 PRIMARY					
		SOUTH ASIA	GRANT	22,050.	WIRE TRANSFER	0.	N/A	N/A
			BA NGA AFAYO					
		SUB-SAHARAN	INITIATIVE UGANDA:					
		AFRICA	FY23 PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other I	Assistance to Organiza	tions or Entities Outside the I	Jnited States.	(Schedule F (Form 9	90), 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)
			BAITHAK: FY23					
			EMERGENCY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
				,			•	
			BEBIKO: FY23					
		EUROPE	EMERGENCY GRANT	33,500.	WIRE TRANSFER	0.	N/A	N/A
			BILKIS: FY23					
			EMERGENCY GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A
			BLAHO: FY23 EMERGENCY					
		EUROPE	GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			BLOOM NEPAL SCHOOLS:					
			FY 23 PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
				,				
			BREAKING THE SILENCE:					
		EUROPE	FY23 EMERGENCY GRANT	7,500.	WIRE TRANSFER	0.	N/A	N/A
			CASA ASTI: FY 23					
			PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTER FOR ADVOCACY	,				
			AND SUSTAINABLE					
			EMPOWERMENT SIERRA					
		AFRICA	LEONE: FY23	15,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTER FOR ADVOCACY					
			AND SUSTAINABLE EMPOWERMENT SIERRA					
			LEONE: FY23 PRIMARY	8 000	WIRE TRANSFER	n	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90). Part II. line	1)	r ugo z
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			CENTER FOR ADVOCACY					
			AND SUSTAINABLE					
		SUB-SAHARAN	EMPOWERMENT SIERRA					
		AFRICA	LEONE: FY23	7,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRE FOR ADOLESCENT	,				
			REPRODUCTIVE HEALTH					
		SUB-SAHARAN	FOUNDATION: FY23					
		AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRE FOR	,				
			DEVELOPMENT & PEACE					
			(CDP): FY23 PRIMARY					
		SOUTH ASIA	GRANT	18 600.	WIRE TRANSFER	0.	N/A	N/A
			CENTRO CULTURAL					
			POPULAR VICTOR JARA:					
		SOUTH AMERICA	FY23 PRIMARY GRANT	20 000	WIRE TRANSFER		N/A	N/A
		DOUTH MILKICH	CENTRO DE DERECHOS	20,000.	WIRE TRANSFER	<u> </u>	14/21	1771
			HUMANOS FRAY MATIAS					
		NORTH AMERICA -	DE CORDOVA: FY23					
		NON US	PRIMARY GRANT	15 000	WIRE TRANSFER	,	N/A	N/A
		NON 03	CENTRO DE NINOS CON	13,000.	WIRE TRANSFER	0.	N/A	N/A
			NECESIDADES					
		CENTRAL AMERICA						
			EDUCATIVAS ESPECIALES	0 000	MIDE MDANGEED		AT / 3	NT / 3
		AND THE CARIBBEAN	(CNNEE): FY23 PRIMARY	9,000.	WIRE TRANSFER	0.	N/A	N/A
			CENTRO DE NINOS CON					
			NECESIDADES					
		CENTRAL AMERICA	EDUCATIVAS ESPECIALES	4= 500	l		L.,_	L.,_
		AND THE CARIBBEAN	(CNNEE): FY23 PRIMARY	17,500.	WIRE TRANSFER	0.	N/A	N/A
			CHANAN DEVELOPMENT					
			ASSOCIATION: FY23	0.7.00	L	_	L.,	L.
		SOUTH ASIA	EMERGENCY GRANT	25,000.	WIRE TRANSFER	0.	N/A	N/A
			CHANAN DEVELOPMENT					
			ASSOCIATION: FY23			_	L	
		SOUTH ASIA	CONVENING GRANT	7,500.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ugo z
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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	CHANGING STORIES NEPAL: FY23 PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
		EUROPE	CHERKASY HUMAN RIGHTS CENTERL: FY23 EMERGENCY GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A
		SOUTH ASIA	CHILDREACH NEPAL: FY23 PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN AFRICA	CHILDREN'S FORUM NETWORK-KENEMA: FY23 PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	CHISPA PROJECT: FY23 PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	COINCIDIR: FY23 PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN	COLECTIVA FEMINISTA MAPAS: FY23 PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		SOUTH AMERICA	COLECTIVO CARAVANA CINE: FY23 PRIMARY AWARD	20,000.	WIRE TRANSFER	0.	N/A	N/A
		SOUTH AMERICA	COLECTIVO DE MUJERES AFRODESCENDIENTES WIWAS: FY23 PRIMARY AWARD	20,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	990). Part II. line	1)	r ago <u>z</u>
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			COLECTIVO JUVENIL					
			INDEPENDIENTE TUUMBEN					
		CENTRAL AMERICA	KAAMBAL: FY23 PRIMARY					
		AND THE CARIBBEAN	GRANT	9,500.	WIRE TRANSFER	0.	N/A	N/A
			COLECTIVO KOKOPELLI					
		CENTRAL AMERICA	TLALLI: FY23 PRIMARY					
		AND THE CARIBBEAN	GRANT	11,000.	WIRE TRANSFER	0.	N/A	N/A
			COLECTIVO MUJERES					
		CENTRAL AMERICA	UTOPIA: FY23 PRIMARY					
		AND THE CARIBBEAN	GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	COLECTIVO TAJPIANIJ:					
		AND THE CARIBBEAN	FY23 PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	COLECTIVO VIDA DIGNA:					
		AND THE CARIBBEAN	FY23 PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			COMMUNITY FOCUS					
		SUB-SAHARAN	INTERNATIONAL: FY23					
		AFRICA	PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
		GUD GAUADAN	COMMUNITY HEALTH CARE					
		SUB-SAHARAN	INITIATIVE: FY23	10.000				
		AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			COMMINITAL MANAGEMENT					
		GIID GAIIADAN	COMMUNITY MANAGEMENT					
		SUB-SAHARAN	CENTER (CMC): FY23	10 600	MIDE MDANGEED	_	NT / 7	NT / 7
		AFRICA	PRIMARY GRANT	10,600.	WIRE TRANSFER	0.	N/A	N/A
			CONCORDIA ROMANIA:					
		EUROPE	FY23 EMERGENCY GRANT	30 000	WIRE TRANSFER		N/A	N/A
		FOROFE	F123 EMERGENCI GRANT	50,000.	MITUE IVWNOLEK	ı .	M / A	P/A

(g) Name of organization (h) RES code section and EN (if applicable)  CERTRAL AMERICA NO THE CARISBEAN PERBARY GRAPT  CONNECTED; FY23 AND THE CARISBEAN PERBARY GRAPT  CERTRAL AMERICA AND THE CARISBEAN PERBARY GRAPT  CORPORACION MUSICAS DE LA TIERRA; FY23 AND THE CARISBEAN PERBARY GRAPT  CERTITUR HANDS  CHARTIVE HANDS  CHARTIC	Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ago <b>z</b>
AND THE CARIBBEAN PRIMARY GRANT  CORPORACION MUSICAS DESTRUCT AMERICA AND THE CARIBBEAN PRIMARY GRANT  CREATIVE HANDS SUB-SAHARAN ARRICA  CREATIVE HANDS SUB-SAHARAN ARRICA  CREATIVE LIFE BAST ASIA AND THE POUNDATION: P723 PACIFIC  PRIMARY GRANT  DEVELOPMENT FOR DISADVANTAGED PROPLE: SOUTH ASIA  P723 PRIMARY GRANT  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  N/A  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  P724 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A	1	(b) IRS code section	(c) Region	(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of non-cash	(h) Description of non-cash	valuation (book, FMV,
AND THE CARIBBEAN PRIMARY GRANT  CORPORACION MUSICAS DESTRUCT AMERICA AND THE CARIBBEAN PRIMARY GRANT  CREATIVE HANDS SUB-SAHARAN ARRICA  CREATIVE HANDS SUB-SAHARAN ARRICA  CREATIVE LIFE BAST ASIA AND THE POUNDATION: P723 PACIFIC  PRIMARY GRANT  DEVELOPMENT FOR DISADVANTAGED PROPLE: SOUTH ASIA  P723 PRIMARY GRANT  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  N/A  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  P724 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A									
AND THE CARIBBEAN PRIMARY GRANT  CORPORACION MUSICAS DESTRUCT AMERICA AND THE CARIBBEAN PRIMARY GRANT  CREATIVE HANDS SUB-SAHARAN ARRICA  CREATIVE HANDS SUB-SAHARAN ARRICA  CREATIVE LIFE BAST ASIA AND THE POUNDATION: P723 PACIFIC  PRIMARY GRANT  DEVELOPMENT FOR DISADVANTAGED PROPLE: SOUTH ASIA  P723 PRIMARY GRANT  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  N/A  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  DEVELOPMENT OF EDUCATIONAL SERVICE POR HUMAN (DESH): SOUTH ASIA  P723 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A  P724 PRIMARY GRANT  18,600 WIRE TRANSFER  0.N/A  N/A			COMPAL AMEDICA	CONTEGUED EXT					
CORPORACION MUSICAS DE LA TIERRA: FY23 AND THE CARIBBEAN PRIMARY GRAPT  CREATIVE HANDS SUB-SAHARAN APRICA  CREATIVE LIFE EAST ASIA AND THE POUNDATION: FY23 PACIFIC  CREATIVE LIFE EAST ASIA AND THE POUNDATION: FY23 PACIFIC  CREATIVE PRIMARY GRAPT  12,000, WIRE TRANSFER  0. N/A  N/A  CREATIVE LIFE EAST ASIA AND THE POUNDATION: FY23 PRIMARY GRAPT  12,000, WIRE TRANSFER  0. N/A  N/A  DEVELOPMENT OF DISADVANTAGED PROFILE: SOUTH ASIA  PY23 PRIMARY GRAPT  18,600, WIRE TRANSFER  0. N/A  N/A  DEVELOPMENT OF SUBCLOTMENT					16 000.	WIRE TRANSFER	0.	N/A	N/A
CENTRAL AMERICA AND THE CARIBBEAN FRIMARY GRANT 16,000. WIRE TRANSFER 0. N/A N/A  CREATIVE HANDS ZAMBIA: FY23 PRIMARY AFRICA GRANT 7,000. WIRE TRANSFER 0. N/A N/A  CREATIVE LIFE EAST ASIA AND THE FOUNDATION: FY23 PACIFIC PRIMARY GRANT 12,000. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:									
AND THE CARIBBEAN FRIMARY GRANT 16,000.WIRE TRANSFER 0.N/A N/A  CREATIVE HANDS SUB SAHARAN ZAMSIA: FY23 FRIMARY AFRICA GRANT 7,000.WIRE TRANSFER 0.N/A N/A  CREATIVE LIFE EAST ASIA AND THE FOUNDATION: FY23 PACIFIC FRIMARY GRANT 12,000.WIRE TRANSFER 0.N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 FRIMARY GRANT 18,600.WIRE TRANSFER 0.N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 FRIMARY GRANT 18,600.WIRE TRANSFER 0.N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000.WIRE TRANSFER 0.N/A N/A  EUROPE EMERGENCY GRANT 30,000.WIRE TRANSFER 0.N/A N/A				CORPORACION MUSICAS					
TREATIVE HANDS SUB-SAHARAN EAMEIA: FY23 PRIMARY AFRICA GRANT 7,000. WIRE TRANSFER 0. N/A N/A  REATIVE LIFE EAST ASIA AND THE FOUNDATION: FY23 PACIFIC PRIMARY GRANT 12,000. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA PY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA PY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUBNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:			CENTRAL AMERICA	DE LA TIERRA: FY23					
SUB-SAHARAN ZAMBIA: FY23 PRIMARY 7,000. WIRE TRANSFER 0. N/A N/A  CREATIVE LIFE  EAST ASIA AND THE FOUNDATION: FY23  PACIFIC PRIMARY GRANT 12,000. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23  EUROPE MERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23  EUROPE MERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EUROPE MERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EUROPE MERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A			AND THE CARIBBEAN	PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
SUB-SAHARAN ZAMBIA: FY23 PRIMARY 7,000. WIRE TRANSFER 0. N/A N/A  CREATIVE LIFE  EAST ASIA AND THE FOUNDATION: FY23  PACIFIC PRIMARY GRANT 12,000. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23  EUROPE MERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23  EUROPE MERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EUROPE MERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EUROPE MERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A				CDEAMINE HANDS					
AFRICA GRANT 7,000. WIRE TRANSPER 0. N/A N/A  CREATIVE LIFE EAST ASIA AND THE FOUNDATION: FY23 PACIFIC PRIMARY GRANT 12,000. WIRE TRANSPER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSPER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSPER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSPER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSPER 0. N/A N/A  EDELGIVE FOUNDATION:			SUB-SAHARAN						
CREATIVE LIFE FOUNDATION: FY23 PACIFIC PRIMARY GRANT 12,000. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA PY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A					7,000.	WIRE TRANSFER	0.	N/A	N/A
PACIFIC PRIMARY GRANT 12,000. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:					,				
PACIFIC PRIMARY GRANT 12,000. WIRE TRANSPER 0. N/A N/A  DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSPER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSPER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSPER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSPER 0. N/A N/A  EDELGIVE FOUNDATION:				CREATIVE LIFE					
DEVELOPMENT FOR DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0.N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0.N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0.N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0.N/A N/A  EDELGIVE FOUNDATION:				FOUNDATION: FY23					
DISADVANTAGED PEOPLE: SOUTH ASIA FY23 PRIMARY GRANT 18,600.WIRE TRANSPER 0.N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600.WIRE TRANSPER 0.N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000.WIRE TRANSPER 0.N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000.WIRE TRANSPER 0.N/A N/A  EDELGIVE FOUNDATION:			PACIFIC	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
DISADVANTAGED PEOPLE: SOUTH ASIA  FY23 PRIMARY GRANT  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA  FY23 PRIMARY GRANT  18,600.WIRE TRANSFER  0.N/A  N/A  DOSTUPNO: FY23  EUROPE  EMERGENCY GRANT  DOREAM WORKSHOP: FY23  EUROPE  EMERGENCY GRANT  30,000.WIRE TRANSFER  0.N/A  N/A  EDELGIVE FOUNDATION:				DEVEL ODMENIE EOD					
SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:									
DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:			SOUTH ASIA		18 600.	WIRE TRANSFER	0.	N/A	N/A
FOR HUMAN (DESH): SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A									
SOUTH ASIA FY23 PRIMARY GRANT 18,600. WIRE TRANSFER 0. N/A N/A  DOSTUPNO: FY23 EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:				EDUCATIONAL SERVICE					
EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23  EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:				FOR HUMAN (DESH):					
EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23  EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:			SOUTH ASIA	FY23 PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23  EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:									
EUROPE EMERGENCY GRANT 20,000. WIRE TRANSFER 0. N/A N/A  DREAM WORKSHOP: FY23  EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:				DOCULIDAD. EV23					
DREAM WORKSHOP: FY23 EUROPE EMERGENCY GRANT 30,000.WIRE TRANSFER 0.N/A N/A EDELGIVE FOUNDATION:			EUROPE		20 000	WIRE TRANSFER	0	N/A	N/A
EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:					20,000.		-		1,72
EUROPE EMERGENCY GRANT 30,000. WIRE TRANSFER 0. N/A N/A  EDELGIVE FOUNDATION:									
EDELGIVE FOUNDATION:				DREAM WORKSHOP: FY23					
			EUROPE	EMERGENCY GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A
				EDELCTIVE EQUINDAMION.					
pooth for product that the product of the product o			SOUTH ASIA	FY23 PRIMARY GRANT	110,250.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ago <u>z</u>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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	EDUCACION DIARIA:					
			FY23 PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
		SOUTH ASIA	EKMATTRA SOCIETY: FY23 PRIMARY GRANT	18 600	WIRE TRANSFER	<u> </u>	N/A	N/A
		SOUTH ASIA	FIZS FRIMARI GRANI	18,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	EKMATTRA SOCIETY:					
		AND THE CARIBBEAN	FY23 PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
			ENFOLD PROACTIVE					
			HEALTH TRUST: PRIMARY					
		SOUTH ASIA	GRANT	7,500.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	EPRODEP GUATEMALA:					
			FY23 PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
		SOUTH AMERICA	ESCUELA RESILIENTE: FY23 PRIMARY GRANT	20 000	WIRE TRANSFER	0	N/A	N/A
				20,000.				
		NORTH AMERICA -	ESPACIO MIGRANTE:					
		NON US	FY23 PRIMARY GRANT ETHNIC PEOPLE	16,000.	WIRE TRANSFER	0.	N/A	N/A
			DEVELOPMENT					
		EAST ASIA AND THE	FOUNDATION: FY23					
		PACIFIC	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			FAITH FOUNDATION:					
		SOUTH ASIA	FY23 PRIMARY GRANT	22,050.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	990). Part II. line	1)	r ago <b>z</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount	(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)
			FEMINISMD: FY23					
		EUROPE	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			FEMINIST GROUP					
			BANGLADESH: FY23					
		SOUTH ASIA	PRIMARY GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
			FEMINIST WORKSHOP:					
		EUROPE	FY23 EMERGENCY GRANT	40,000.	WIRE TRANSFER	0.	N/A	N/A
		EUROPE	PRIMARY GRANT 5800	12,000.	WIRE TRANSFER	0.	N/A	N/A
			FULCROM UA: FY23					
		EUROPE	EMERGENCY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
			FUNDACION CENTRO					
		CENTRAL AMERICA AND THE CARIBBEAN	CULTURAL INFANTIL: FY23 PRIMARY GRANT	9 000.	WIRE TRANSFER	0.	N/A	N/A
				, , , , , ,				
			FUNDACION CULTURAS					
		CENTRAL AMERICA AND THE CARIBBEAN	CAMPESINAS: FY23 PRIMARY GRANT	20 000	WIRE TRANSFER	0	N/A	N/A
		AND THE CARIBBEAN	FRIFARI GRANI	20,000.	WIRE TRANSPER	0.	N/A	N/A
		GOLIMII AMEDICA	FUNDACION DAR AMOR:	16 000	WIDE MDANGERS		NT / 2	hT / 2
		SOUTH AMERICA	FY23 PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			FUNDACION ENSEANOS A					
			CREER: FY23 PRIMARY					
		SOUTH AMERICA	GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ago z
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			FUNDACION ESPRITU					
			INDOMABLE: FY23					
		SOUTH AMERICA	PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			FUNDACION HAGA QUE					
			PASE: FY23 PRIMARY			_		
		SOUTH AMERICA	GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			EUNDAGION NIAG DE					
			FUNDACION NIAS DE LUZ: FY23 PRIMARY					
		SOUTH AMERICA	GRANT	16 000	WIRE TRANSFER	,	N/A	N/A
		DOUTH THEIRICH	CHINI	10,000.	WIRE IRRIVEIER	<u> </u>	147.21	1771
			FUNDACION NUEVA					
		CENTRAL AMERICA	ESPERANZA RO NEGRO:					
			FY23 EMERGENCY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
				·				
			FUNDACION PARA EL					
		CENTRAL AMERICA	DESAROLLOS: FY23					
		AND THE CARIBBEAN	SUSTAINABILITY AWARD	15,000.	WIRE TRANSFER	0.	N/A	N/A
			GABFAI COMMUNITY					
		EAST ASIA AND THE	THEATRE: FY 23	45.000	L			L.,_
		PACIFIC	PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
			GENDER ZED: FY23					
		EUROPE	EMERGENCY GRANT	30 000	WIRE TRANSFER	0	N/A	N/A
				30,000.		-		
			GRACE ASSOCIATION:					
		SOUTH ASIA	FY23 PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND	HAVASAR EDUCATIONAL					
		NEIGHBORING	FOUNDATION: FY23					
		STATES	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name	e of organization	<b>(b)</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)
				THE A I TRIGUIOUND					
			SUB-SAHARAN	HEALINGWOUND ASSOCIATION: FY23					
			AFRICA	PRIMARY GRANT	10 000	WIRE TRANSFER	0	N/A	N/A
			III KICI	I KIMMI GRANI	10,000.	WIRE TRANSFER	· ·	147.21	11/21
				HER CHOICES TRUST:					
			SOUTH ASIA	FY23 PRIMARY GRANT	22,050.	WIRE TRANSFER	0.	N/A	N/A
				HUNHELP: FY23					
			EUROPE	EMERGENCY GRANT	9,398.	WIRE TRANSFER	0.	N/A	N/A
			COLUMN ACTA	IDENTITY INCLUSION:	21 000	MEDI MDANGEED		7./2	NT / 2
			SOUTH ASIA	FY23 PRIMARY GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
				IMPLICIT EFFECT					
			SUB-SAHARAN	ADMONITORS AGENCY:					
			AFRICA	FY23 PRIMARY GRANT	15 000.	WIRE TRANSFER	0.	N/A	N/A
									1,7-2
				INFORMAL EDUCATION					
				CENTER DIVERSITY:					
			EUROPE	FY23 EMERGENCY GRANT	69,200.	WIRE TRANSFER	0.	N/A	N/A
				INICIATIVAS PARA EL					
			NORTH AMERICA -	DESARROLLO HUMANO AC:					
			NON US	FY23 PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
				INITIATIVE FOR SOCIAL					
			EIDODE	CHANGE: FY23 PRIMARY	12 000	WIDE MDANGEED	_	NT / 7	NT / 2
			EUROPE	GRANT	12,000.	WIRE TRANSFER	· · ·	N/A	N/A
				INNOVATION ACTION:					
			EUROPE	FY23 EMERGENCY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90). Part II. line	1)	r ago <b>z</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			INSTITUTE FOR RURAL					
			INITIATIVES: FY23					
		EUROPE	EMERGENCY GRANT	60,000.	WIRE TRANSFER	0.	N/A	N/A
			INSTITUTO DE ACAO					
			SOCIAL E DESPORTIVA					
			D'JOANAI: FY23					
		SOUTH AMERICA	PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			INSTITUTO ME LALU:	16 000				
		SOUTH AMERICA	FY23 PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			INTEGRATE UK: FY23					
		EUROPE	PRIMARY GRANT	40 000	WIRE TRANSFER	_	N/A	N/A
		EUROPE	PRIMARI GRANI	40,000.	WIRE TRANSFER	0.	N/A	N/A
			CHILD DEVELOPMENT					
		SUB-SAHARAN	PROGRAM: FY23 PRIMARY					
		AFRICA	GRANT	10 000	WIRE TRANSFER	0	N/A	N/A
		III NI GII	INTERNATIONAL CHILD	10,000.	WIND THINKS IN	<u> </u>	17,22	117.22
			RESOURCE					
			INSTITUTE-NEPAL: FY23					
		SOUTH ASIA	PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
				,				-
		RUSSIA AND						
		NEIGHBORING	INVISIBLE LABOR: FY23					
		STATES	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			JITEGEMEE CHILDREN'S					
		SUB-SAHARAN	PROGRAM: FY23 PRIMARY					
		AFRICA	GRANT	17,000.	WIRE TRANSFER	0.	N/A	N/A
			JOINTLY ACT GIRLS:					
		EUROPE	FY23 PRIMARY GRANT	8,500.	WIRE TRANSFER	0.	N/A	N/A

Part II	Continuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name	of organization	<b>(b)</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)
			anumnat aventaa	JOVENES POR EL					
			CENTRAL AMERICA AND THE CARIBBEAN	CAMBIO: FY23 PRIMARY GRANT	7 000	WIRE TRANSFER		N/A	NT / 7
			AND THE CARIBBEAN	JUBAYER MASUD	7,000.	WIRE TRANSFER	0.	N/A	N/A
				EDUCATIONAL &					
				CHARITABLE TRUST:					
			SOUTH ASIA	FY23 PRIMARY GRANT	18 600.	WIRE TRANSFER	0.	N/A	N/A
									17.55
				JVENES POR EL CAMBIO:					
			EUROPE	FY23 EMERGENCY GRANT	7,500.	WIRE TRANSFER	0.	N/A	N/A
				KARAKORUM INTEGRATED	·				
				RURAL DEVELOPMENT					
				ORGANIZATION: FY23					
			SOUTH ASIA	PRIMARY GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
				KATALYST: FY23					
			EUROPE	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			EAST ASIA AND THE	KHIANG RIM KHONG:	0.500	L		L.,_	
			PACIFIC	FY23 PRIMARY GRANT	8,500.	WIRE TRANSFER	0.	N/A	N/A
				KHUDKAAR: FY23					
			SOUTH ASIA	PRIMARY GRANT	21 000	WIRE TRANSFER	_	N/A	N/A
			DOUTH ADIA	IKIMAKI GKANI	21,000.	WIRE TRANSPER	· ·	N/A	N/A
				KIEV CHILDREN AND					
				YOUTH SUPPORT CENTER:					
			EUROPE	FY23 PRIMARY GRANT	40,000.	WIRE TRANSFER	0.	N/A	N/A
					, ,				
				KITWE ARTS					
			SUB-SAHARAN	FOUNDATION: FY23					
			AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), 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)
			KLONG TOEY DEE JUNG					
		EAST ASIA AND THE	PROGRAM: FY23 PRIMARY					
		PACIFIC	GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			MODEN ENDS EMEDGENCY					
		EUROPE	KOBZA: FY23 EMERGENCY GRANT	20 000	WIRE TRANSFER	0	N/A	N/A
		EUROLE	GKANI	20,000.	WIKE IKANSPEK	· ·	N/A	N/A
			KOCHAM DEBNIKI: FY23					
		EUROPE	EMERGENCY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
		EAST ASIA AND THE	KONG WAI SAI: FY23	45.000	L			L.,_
		PACIFIC	PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
		NORTH AMERICA -	LAS VANDERS: FY23					
		NON US	PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
			LEGIS: FY23 EMERGENCY					
		EUROPE	GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
			LET'S HELP TOGETHER FOUNDATION: FY23					
		EUROPE	EMERGENCY GRANT	20 000	WIRE TRANSFER	0	N/A	N/A
		BOROTE	EMERGENCT GRANT	20,000.	WIRE IRMOIER	· ·	., 21	147.21
			LGBT ASSOCIATION					
			LIGA: FY23 EMERGENCY					
		EUROPE	GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			LGBT UNION YOU ARE					
			NOT ALONE: FY23					
		EUROPE	EMERGENCY GRANT	70,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), 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)
			TIMEDA ENGO					
			LITERA: FY23 EMERGENCY GRANT	10 000	WIRE TRANSFER	0	N/A	N/A
		LOKOT L	EMERGENCT GRANT	10,000.	WIRE IRMOIER	· ·	., 21	17721
			LITTLE ANGELS: FY23					
		EUROPE	EMERGENCY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			LITTLE FISH THEATRE:	40.000				
			FY23 PRIMARY GRANT LUHANSK REGIONAL	40,000.	WIRE TRANSFER	0.	N/A	N/A
			ORGANIZATION -					
			ASSOCIATION OF WOMEN,					
			YOUTH, AND FAMILIES	89,000.	WIRE TRANSFER	0.	N/A	N/A
			LUHANSK REGIONAL					
			ORGANIZATION -					
			ASSOCIATION OF WOMEN,					
		EUROPE	YOUTH, AND FAMILIES	25,000.	WIRE TRANSFER	0.	N/A	N/A
			LYCEUM EDUCATOR: FY23					
			EMERGENCY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
			MAGNOLIA: FY23					
		EUROPE	EMERGENCY GRANT	15,510.	WIRE TRANSFER	0.	N/A	N/A
			MA II MARUDI GENEDE					
			MAJI MAZURI CENTRE INTERNATIONAL: FY23					
			PRIMARY GRANT	17 000	WIRE TRANSFER	0	N/A	N/A
		_ · · · · <del>-</del>		=,,,,,,,,		· ·		
			MARE (FUNDACION					
			SOCEH): FY23 PRIMARY					
		EUROPE	GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	(Schedule F (Form 9	1)				
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount	(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)
			MARTYNKA: FY23					
		EUROPE	PRIMARY GRANT	20.000.	WIRE TRANSFER	0.	N/A	N/A
				,				
			MAVI KALEM: FY23			_		
		EUROPE	EMERGENCY GRANT	58,420.	WIRE TRANSFER	0.	N/A	N/A
			METALAB: FY23					
		EUROPE	EMERGENCY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
			MIND MENDERS: FY23			_		
		SOUTH ASIA	PRIMARY GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
			MOSEPELE FOUNDATION DEVELOPMENT FORUM					
		SUB-SAHARAN	(MFDF): FY23 PRIMARY					
		AFRICA	GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
			MOTHER OF ALL NATIONS					
		SUB-SAHARAN	FOUNDATION: FY23					
		AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN	MOVE THE WORLD: FY23					
		AFRICA	PRIMARY GRANT	17,000.	WIRE TRANSFER	0.	N/A	N/A
			MOVIMENTO SOCIAL E	,				
			CULTURAL CORES DO					
			AMANHA: FY23 PRIMARY					
		SOUTH AMERICA	GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
			MUDITA: FY23 PRIMARY					
		EUROPE	GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	<u> </u>
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)
			ALL MUDDI DIAGO					
			NA TUBELENGE					
			CHILDREN'S LIBRARY:	7 000	WIDE MDANCEED	,	NT / 7	N/A
		AFRICA	FY23 PRIMARY GRANT	7,000.	WIRE TRANSFER	٠.	N/A	N/A
		RUSSIA AND						
			NADIYA: FY23 PRIMARY					
			GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
		RUSSIA AND						
		NEIGHBORING	NADIYA: FY23					
		STATES	EMERGENCY GRANT	7,500.	WIRE TRANSFER	0.	N/A	N/A
			NATIONAL FEDERATION					
		RUSSIA AND	OF FEMALE COMMUNITIES					
		NEIGHBORING	OF KYRGYZSTAN: FY23					
		STATES	PRIMARY GRANT	11,500.	WIRE TRANSFER	0.	N/A	N/A
			NATIONAL YOUTH SPORTS					
			DEVELOPMENT PLATFORM:					
		AFRICA	FY23 PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN	NAYANAYA TRUST: FY23					
			PRIMARY GRANT	10 000	WIRE TRANSFER	,	N/A	N/A
		AFRICA	PRIMARI GRANI	18,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND						
			NGO DEMOS: FY23					
			EMERGENCY GRANT	10 000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND						
			NGO GIRLS: FY23					
		STATES	EMERGENCY GRANT	40,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND						
		NEIGHBORING	NGO INSIGHT: FY23					
		STATES	EMERGENCY GRANT	40,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</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)
		RUSSIA AND						
		NEIGHBORING	NGO PARITY: FY23	20.000	MIDE MDANGEED		NT / 3	NT / 2
	+	STATES	EMERGENCY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND						
		NEIGHBORING	NGO PHAROS: FY23					
		STATES	PRIMARY GRANT	12 000.	WIRE TRANSFER	0.	N/A	N/A
				,				
		SUB-SAHARAN	OASIS MATHARE: FY23					
		AFRICA	EMERGENCY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
		EAST ASIA AND THE	ONE SKY FOUNDATION:					
		PACIFIC	FY23 PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			ONGONA FEMINIST					
			GROUP: FY23 PRIMARY					L
		SOUTH ASIA	GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
			ORGANIZACION					
		CENTRAL AMERICA	SOLOLATECA POR LOS DERECHOS DE LA					
		AND THE CARIBBEAN	MUJERES JOVENES	16 000	WIRE TRANSFER	,	N/A	N/A
		AND THE CARIBDEAN	MODENES GOVERNES	10,000.	WIKE TRANSPER	· ·	N/A	N/A
		RUSSIA AND						
		NEIGHBORING	ORPHAN'S FUTURE: FY23					
		STATES	EMERGENCY GRANT	55,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
			OTROS DREAMS EN					
		NORTH AMERICA -	ACCION: FY23 PRIMARY					
		non us	GRANT	18,000.	WIRE TRANSFER	0.	N/A	N/A
			OUR CHOICE: FY23					
		EUROPE	PRIMARY GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ugo <b>z</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			PATSIMEREDU					
		SUB-SAHARAN	EDUTAINMENT TRUST:					
		AFRICA	FY23 PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
		SOUTH ASIA	PEACE FOR PEOPLE: FY23 PRIMARY GRANT	19 600	WIRE TRANSFER		NT / 7	N/A
		CENTRAL AMERICA	F125 PRIMARI GRANI	18,800.	WIRE TRANSFER	0.	N/A	N/A
		AND THE CARIBBEAN						
		- ANTIGUA &	PERONIA ADOLESCENTE:					
		BARBUDA, ARUBA,	FY23 PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
		E3.05 3.073 3.35 550	DI MONGIDE EVO?					
		EAST ASIA AND THE PACIFIC	PLAYONSIDE: FY23 PRIMARY GRANT	12 000	WIRE TRANSFER	,	N/A	N/A
				12,000.		-		1,72
			SAMAZIK UNNAYAN					
			SANGSTHA (PSUS): FY23					
		SOUTH ASIA	PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
		DUGGIA AND						
		RUSSIA AND NEIGHBORING	PRAVO VIBORA: FY23					
		STATES	EMERGENCY GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	PROGRAMA	, -			•	
		AND THE CARIBBEAN	SOCIOEDUCATIVO PASO A					
		- ANTIGUA &	PASO: FY23 PRIMARY					
		BARBUDA, ARUBA,	GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA AND THE CARIBBEAN						
		AND THE CARIBBEAN - ANTIGUA &	PROYECTO UREMU: FY23					
		BARBUDA, ARUBA,	PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
		, ,		, ,				
			PSICOPRIDE: FY23					
		SOUTH AMERICA	PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</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 &	PUERTA DE ESPERANZA:					
		BARBUDA, ARUBA,	FY23 PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
			PURNATA: FY23 PRIMARY					
			GRANT	22 050	WIRE TRANSFER	0	N/A	N/A
		500111 115111		22,030.	WIRE TRINGEDIC	••	17,22	
		RUSSIA AND						
			QUEER SISTA PLATFORM:					
			FY23 PRIMARY GRANT	12 000.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN	REACHALL: FY23					
			PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
				,				
			READ TO LEARN					
		SUB-SAHARAN	FOUNDATION: FY23					
		AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	RED DE INTERPRETES Y					
		AND THE CARIBBEAN	PROMOTORES					
		- ANTIGUA &	INTERCULTURALES A.C.:					
		BARBUDA, ARUBA,	FY23 PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
			RED DE JOVENES					
			ARTISTAS POR LA					
		CENTRAL AMERICA	JUSTICIA SOCIAL: FY23					
		AND THE CARIBBEAN	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			RED DE JOVENES					
			ARTISTAS POR LA					
		CENTRAL AMERICA	JUSTICIA SOCIAL: FY23					
		AND THE CARIBBEAN	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			RED POPULAR TRANS:					
		SOUTH AMERICA	FY23 PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90). Part II. line	1)	r ago <b>z</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount	(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)
		THE OPE	ROMAVERSITAS: FY23	20.000	WIDE MONGEED		NT / 3	NT / 2
		EUROPE	PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
			ROSHNI RESEARCH AND DEVELOPMENT WELFARE					
			ORGANIZATION: FY23					
		SOUTH ASIA	PRIMARY GRANT	10 000	WIRE TRANSFER	,	N/A	N/A
		BOUTH ASIA	FRIMARI GRANI	10,000.	WIKE IKANSFEK	0.	N/A	N/A
			RULELI CORPORACION					
			SOCIAL Y CULTURAL:					
		SOUTH AMERICA	FY23 PRIMARY GRANT	16 000	WIRE TRANSFER	0	N/A	N/A
				20,000.		•		
			RURAL AID: FY23					
		SOUTH ASIA	PRIMARY GRANT	27.000.	WIRE TRANSFER	0.	N/A	N/A
			RURAL ECONOMIC AND	,				-
			COMMUNITY DEVELOPMENT					
			ORGANIZATION: FY23					
		SOUTH ASIA	PRIMARY GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
				-				
			SABUJ SANGHA: FY23					
		SOUTH ASIA	PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
			SAMA FOUNDATION: FY21					
		SOUTH ASIA	PRIMARY GRANT	10,500.	WIRE TRANSFER	0.	N/A	N/A
			SANJOG PAKISTAN: FY23					
		SOUTH ASIA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND						
		NEIGHBORING	SEE WITH YOUR HEART:					
		STATES	FY23 EMERGENCY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation of	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</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)
		RUSSIA AND						
		NEIGHBORING STATES	SERVENOW UKRAINE:	30 000	WIRE TRANSFER		N/A	NT / 7
		STATES	FY23 EMERGENCY GRANT	30,000.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN	SHIFT SPACE: FY23					
		AFRICA	PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
				,		-		
			SINDH GREEN					
			FOUNDATION: FY23					
		SOUTH ASIA	PRIMARY GRANT	21,000.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN	SPARKREAD TRUST: FY23					
		AFRICA	PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN	STARTERS TECHNOLOGY:	10.000				
		AFRICA	FY23 PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			STREET CHILDREN					
		SUB-SAHARAN	EMPOWERMENT FOUNDATION: FY23					
		AFRICA	PRIMARY GRANT	15 000	WIRE TRANSFER	,	N/A	N/A
		AFRICA	SUCHANA THE UTTOR	13,000.	WIRE TRANSPER	· ·	N/A	N/A
			CHANDIPUR COMMUNITY					
			SOCIETY: FY23 PRIMARY					
		SOUTH ASIA	GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A
				,				
			SUNSHINE CHARITY:					
		SOUTH ASIA	FY23 EMERGENCY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
			SUPRAVA PANCHASHILA					
			MAHILA UDDYOG SAMITY:					
		SOUTH ASIA	FY23 COURAGE AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1 ago 2		
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)	
			SUPRAVA PANCHASHILA						
			MAHILA UDDYOG SAMITY:						
		SOUTH ASIA	FY23 PRIMARY GRANT	10,500.	WIRE TRANSFER	0.	N/A	N/A	
			TAP INDIA FOUNDATION:						
		SOUTH ASIA	FY23 PRIMARY GRANT	18,600.	WIRE TRANSFER	0.	N/A	N/A	
		RUSSIA AND							
			TEENERGIZER: FY23	60.000	MIDE MDANGEED	_	N/A	NT / 7	
			EMERGENCY GRANT THAI CHILD	80,000.	WIRE TRANSFER	٠.	N/A	N/A	
			DEVELOPMENT						
			FOUNDATION: FY23						
			EMERGENCY GRANT	11 500.	WIRE TRANSFER	0.	N/A	N/A	
			THE ANDTEX TRAINING	,					
			AND CARE						
		SUB-SAHARAN	ORGANIZATION: FY23						
		AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A	
			THE BUTTERFLY						
			SANCTUARY						
		SUB-SAHARAN	ORGANISATION: FY23						
		AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A	
			THE FREEDOM STORY:			_			
		PACIFIC	FY23 PRIMARY GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A	
		SUB-SAHARAN	THE PAIDEIA PROJECT:						
			FY23 PRIMARY GRANT	7 000	WIRE TRANSFER		N/A	N/A	
		III KICA	1123 INTERNI GRANI	7,000.	MATCH INAMOPEK	<u> </u>	r4 / 21	Ν/Α	
		RUSSIA AND	THE SPHERE WOMEN'S						
			ASSOCIATION NGO: FY23						
			EMERGENCY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A	

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ago <u>z</u>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
			THE WAS THE					
			THE VIOLENCE					
		EUROPE	INTERVENTION PROJECT: FY23 EMERGENCY GRANT	7 500	WIRE TRANSFER	_	N/A	N/A
		EUROFE	THEATRE OF	7,300.	WIKE IKANSFEK	0.	N/A	N/A
		RUSSIA AND	CONTEMPORARY DIALOGUE					
		NEIGHBORING	(TCD): FY23 PRIMARY					
		STATES	GRANT	12 000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA		,				
		AND THE CARIBBEAN						
		- ANTIGUA &	TIERRA NUEVA ONG:					
		BARBUDA, ARUBA,	FY23 PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA						
		AND THE CARIBBEAN						
		- ANTIGUA &	TIERRA NUEVA ONG:					
		BARBUDA, ARUBA,	FY23 EMERGENCY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
			TOPPING CRUE					
		SUB-SAHARAN	FOUNDATION: FY23		L			L.,_
		AFRICA	PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
			TOPPING CRUE					
		SUB-SAHARAN	FOUNDATION: FY23					
		AFRICA	SPECIAL AWARD	14 000	WIRE TRANSFER	0	N/A	N/A
		iii ki ch	DI HCIME NWIND	14,000.	WIRE IREMOTER	<u> </u>	147 21	147.21
			TUSEKWILE IMITI IKULA					
		SUB-SAHARAN	FOUNDATION: FY23					
		AFRICA	PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND						
		NEIGHBORING	UKRAINIAN WOMANITY:					
		STATES	FY23 PRIMARY GRANT	33,000.	WIRE TRANSFER	0.	N/A	N/A
		CENTRAL AMERICA	UN MUNDO: FY23	15 000		_	NT / 3	17/2
		AND THE CARIBBEAN	EMERGENCY GRANT	15,000.	WIRE TRANSFER	J 0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the I	United States.	(Schedule F (Form 9	90), Part II, line	1)	r age z
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount	(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	UNITED WAY HONDURAS:					
			FY23 PRIMARY GRANT	9,000.	WIRE TRANSFER	0.	N/A	N/A
			UNITED WAY HONDURAS: FY23 EMERGENCY GRANT	6 000	WIRE TRANSFER	0	N/A	N/A
		IND THE CARTEDERIN	1123 EMERCENCI GREAT	0,000.	WIRE TRANSFER		147.21	147.22
		RUSSIA AND						
			URBAN CURATORS: FY23					
		STATES	EMERGENCY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
		EAST ASIA AND THE	URBAN LIGHT: FY23					
		PACIFIC	PRIMARY GRANT	24,000.	WIRE TRANSFER	0.	N/A	N/A
			VISION PAKISTAN: FY23					
			PRIMARY GRANT	15,000.	WIRE TRANSFER	0.	N/A	N/A
			VIVA A VIDA: FY23 PRIMARY GRANT	15 000	WIRE TRANSFER	0	N/A	N/A
		Doorn militer	VOCES MESOAMERICANAS	13,000.	WIRE TRUNCTER		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11,72
			ACCIN CON PUEBLOS					
			MIGRANTES A.C: FY23					
		NON US	PRIMARY GRANT	28,000.	WIRE TRANSFER	0.	N/A	N/A
			VOCES VIOLETA: FY23					
		SOUTH AMERICA	PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
		DUGGIA AND						
		RUSSIA AND NEIGHBORING	VOICE OF ROMNI: FY23					
			PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ugo z
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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)
		RUSSIA AND						
		NEIGHBORING	VOLUNTEERS: ADULTS:		L		L.,_	L.,_
		STATES	FY23 EMERGENCY GRANT	38,000.	WIRE TRANSFER	0.	N/A	N/A
			WARREN YOUTH PROJECT:					
		EIDODE		7 500	WIRE TRANSFER	,	NT / 7	NT / 2
		EUROPE	FY23 EMERGENCY GRANT	7,500.	WIRE TRANSFER	0.	N/A	N/A
			WARRIORS ZULU NATION					
		CENTRAL AMERICA	HONDURAS: FY23					
		AND THE CARIBBEAN	PRIMARY GRANT	15 000	WIRE TRANSFER	,	N/A	N/A
		AND THE CARIBDEAN	FRIMARI GRANI	13,000.	WIRE TRANSPER	· ·	N/A	N/A
		RUSSIA AND	WE ARE CLOSE CRISIS					
		NEIGHBORING	CENTER: FY23					
		STATES	EMERGENCY GRANT	10 000	WIRE TRANSFER	0	N/A	N/A
			WE ARE PURPOSEFUL:					
		EUROPE	FY23 SPECIAL AWARD	25,000.	WIRE TRANSFER	0.	N/A	N/A
			WOMEN AGAINST	,				
			VIOLENCE AND					
		SUB-SAHARAN	EXPLOITATION IN					
		AFRICA	SOCIETY: FY23 PRIMARY	9,000.	WIRE TRANSFER	0.	N/A	N/A
			WOMEN FIRST SELF-HELP					
		SUB-SAHARAN	PROGRAM: FY23 PRIMARY					
		AFRICA	GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			XTREME YOUTH					
		SUB-SAHARAN	PROJECTS: FY23					
		AFRICA	PRIMARY GRANT	20,000.	WIRE TRANSFER	0.	N/A	N/A
		NORTH AMERICA -	YO ON IXIM: FY23					
		non us	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	r ago z
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount	(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 &	YOO GUATEMALA: FY23					
		BARBUDA, ARUBA,	PRIMARY GRANT	7,000.	WIRE TRANSFER	0.	N/A	N/A
			YOUNG AFRICA					
		SUB-SAHARAN	INTELLECTUALS (YAL):					
		AFRICA	FY23 PRIMARY GRANT	8,000.	WIRE TRANSFER	0.	N/A	N/A
			YOUNG VISIONARY					
		SUB-SAHARAN	LEADERS GHANA: FY23					
		AFRICA	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND						
		NEIGHBORING	YOUR FUTURE: FY23					
		STATES	PRIMARY GRANT	28,400.	WIRE TRANSFER	0.	N/A	N/A
			YOUTH ADVOCATES					
		SUB-SAHARAN	GHANA: FY23 PRIMARY					
		AFRICA	GRANT	17,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND	YOUTH COMMUNITY OF					
		NEIGHBORING	LYSYCHANSK: FY23					
		STATES	PRIMARY GRANT	10,000.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND	YOUTH FOR PUBLIC					
		NEIGHBORING	HEALTH: FY23 PRIMARY					
		STATES	GRANT	12,000.	WIRE TRANSFER	0.	N/A	N/A
			YOUTH GROUP STUDEM:					
		EUROPE	FY23 PRIMARY GRANT	12,400.	WIRE TRANSFER	0.	N/A	N/A
		RUSSIA AND	YOUTH ORGANIZATION					
		NEIGHBORING	STAN: FY23 EMERGENCY					
		STATES	GRANT	55,000.	WIRE TRANSFER	0.	N/A	N/A

Part II Continuation o		Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90). Part II. line	1)	r ago <b>z</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Pagion	(d) Purpose of grant	(e) Amount	(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	YOUTH SAFETY AWARENESS INITIATIVE: FY23 EMERGENCY GRANT	6,400.	WIRE TRANSFER	0.	N/A	N/A
			ZAPORUKA: FY23 EMERGENCY GRANT	40,000.	WIRE TRANSFER	0.	N/A	N/A
		SUB-SAHARAN	ZVAVAHERA TRANSFORMATIONAL YOUTH CLUB: FY23 PRIMARY GRANT	16,000.	WIRE TRANSFER	0.	N/A	N/A
		EAST ASIA AND THE	ZY MOVEMENT FOUNDATION: FY23 PRIMARY GRANT		WIRE TRANSFER		N/A	N/A

Part III	Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.								
Part III can be duplicated if a (a) Type of grant or assistance		dditional space is neede	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

# Schedule F (Form 990) 2022 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	X 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	X 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	X 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	X 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	X 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	X No

# 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 BIANNUAL 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):

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(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

(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: EUROPE

(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: MIDDLE EAST AND NORTH AFRICA

(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

(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: RUSSIA AND NEIGHBORING STATES

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE GRANTS, PROGRAM CONSULTING SERVICES AND CAPACITY BUILDING SUPPORT. THE CONSULTANT

# 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.

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: SOUTH AMERICA

(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: SOUTH ASIA

(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

(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

# 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.

PARTNERS.

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: APPLIED SCIENCES AND TECHNOLOGY LABORATORIES: FY23

ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ASSOCIACAO DE ASSESSORIA AOS POVOS DA FLORESTA

(AFLORA)/SECOYA: FY 23 PRIMARY GRANT

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ASSOCIACAO DE ASSESSORIA AOS POVOS DA FLORESTA

(AFLORA)/SECOYA: FY 23 ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ASSOCIACAO DE ASSESSORIA AOS POVOS DA FLORESTA

(AFLORA)/SECOYA: FY 23 OPPORTUNITY GRANT

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ASSOCIACAO NUCLEO DE EDUCACAO COMUNITARIA DO

COROADINHO: FY 23 ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: CENTER FOR ADVOCACY AND SUSTAINABLE EMPOWERMENT

SIERRA LEONE: FY23 SUSTAINABILITY AWARD GRANT

# 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: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: CENTER FOR ADVOCACY AND SUSTAINABLE EMPOWERMENT

SIERRA LEONE: FY23 PRIMARY GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: CENTER FOR ADVOCACY AND SUSTAINABLE EMPOWERMENT

SIERRA LEONE: FY23 OPPORTUNITY GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: CENTER FOR ADVOCACY AND SUSTAINABLE EMPOWERMENT

SIERRA LEONE: FY23 EMERGENCY GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: CENTRE FOR ADOLESCENT REPRODUCTIVE HEALTH

FOUNDATION: FY23 ORGANIZATIONAL DEVELOPMENT GRANT

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: CENTRO DE NINOS CON NECESIDADES EDUCATIVAS

ESPECIALES (CNNEE): FY23 PRIMARY GRANT

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: CENTRO DE NINOS CON NECESIDADES EDUCATIVAS

ESPECIALES (CNNEE): FY23 ORGANIZATIONAL DEVELOPMENT GRANT

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: CENTRO DE NINOS CON NECESIDADES EDUCATIVAS

ESPECIALES (CNNEE): FY23 OPPORTUNITY GRANT

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: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: CENTRO DE NINOS CON NECESIDADES EDUCATIVAS

ESPECIALES (CNNEE): FY23 OPPORTUNITY GRANT

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: CENTRO DE NINOS CON NECESIDADES EDUCATIVAS

ESPECIALES (CNNEE): FY23 PRIMARY GRANT

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: COLECTIVO DE ZANKISTAS FUEGO Y SON: FY23

ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: DEVELOPMENT OF EDUCATIONAL SERVICE FOR HUMAN

(DESH): ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: INSTITUTO DE ACAO SOCIAL E DESPORTIVA D'JOANAI:

FY23 ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: INTERNATIONAL CHILD RESOURCE INSTITUTE-NEPAL: FY23

ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: JUBAYER MASUD EDUCATIONAL & CHARITABLE TRUST: FY23

# 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.

#### ORGANIZATIONAL DEVELOPMENT GRANT

REGION: EUROPE

(D) PURPOSE OF GRANT: LUHANSK REGIONAL ORGANIZATION - ASSOCIATION OF

WOMEN, YOUTH, AND FAMILIES WITH DISABILITIES OF THE EASTERN DONBAS

(AMI-EAST): FY23 EMERGENCY GRANT

REGION: EUROPE

(D) PURPOSE OF GRANT: LUHANSK REGIONAL ORGANIZATION - ASSOCIATION OF

WOMEN, YOUTH, AND FAMILIES WITH DISABILITIES OF THE EASTERN DONBAS

(AMI-EAST): FY23 COURAGE AWARD

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: MOVIMENTO SOCIAL E CULTURAL CORES DO AMANHA: FY23

ORGANIZATIONAL DEVELOPMENT GRANT

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: ORGANIZACION SOLOLATECA POR LOS DERECHOS DE LA

MUJERES JOVENES INDIGENAS: FY23 PRIMARY GRANT

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: PRATTASHA SAMAZIK UNNAYAN SANGSTHA (PSUS): FY23

ORGANIZATIONAL DEVELOPMENT GRANT

(A) REGION:

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

(D) PURPOSE OF GRANT: PROGRAMA SOCIOEDUCATIVO PASO A PASO: FY23

# 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.

# ORGANIZATIONAL DEVELOPMENT GRANT

(A) REGION:

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

(D) PURPOSE OF GRANT: RED DE MASCULINIDAD POR LA IGUALDAD DE GENERO

(REDMAS): FY23 ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: STREET CHILDREN EMPOWERMENT FOUNDATION: FY23

ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: SUCHANA UTTOR CHANDIPUR COMMUNITY SOCIETY: FY23

ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: THE ANDTEX TRAINING AND CARE ORGANIZATION: FY23

ORGANIZATIONAL DEVELOPMENT GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: WOMEN AGAINST VIOLENCE AND EXPLOITATION IN

SOCIETY: FY23 PRIMARY GRANT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: WOMEN AGAINST VIOLENCE AND EXPLOITATION IN

SOCIETY: FY23 OPPORTUNITY GRANT

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

2022

OMB No. 1545-0047

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.

Open to Public Inspection

Schedule I (Form 990) 2022

Name of the organization	Employer identification number						
GLOBAL FUND FOR CHILDREN 56-1834887  Part I General Information on Grants and Assistance							
Does the organization maintain records to criteria used to award the grants or assist      Describe in Part IV the organization's properties.  Part II Grants and Other Assistance to 1	to substantiate the stance?	oring the use of grant	funds in the United	States.			X Yes No
recipient that received more than S  1 (a) Name and address of organization or government	(b) EIN	be duplicated if additi (c) IRC section (if applicable)	(d) Amount of cash grant	ed.  (e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
HOMIES UNIDOS 2105 BEVERLY BLVD., SUITE 219 LOS ANGELES, CA 90057	95-4740768	501(C)(3)	28,000.	0.	N/A	N/A	PRIMARY AND OPPORTUNITY
CONNECTED P.O. BOX 7483 SANTA CRUZ, CA 95061	46-3546942	501(C)(3)	22,194.	0.	N/A	N/A	PRIMARY AND OPPORTUNITY GRANT
CREATIVE LIFE FOUNDATION 250 NORTHERN AVENUE, SUITE 400 BOSTON, MA 02210	82-2926467	501(C)(3)	12,000.	0.	N/A	N/A	PRIMARY GRANT
2 Enter total number of section 501(c)(3) a  3 Enter total number of other organizations	-		e line 1 table				3.

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

Part III Grants and Other Assistance to Domestic Individuals 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 req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.			
PART I, LINE 2:							
GLOBAL FUND FOR CHILDREN (GFC) MONITORS THE USE OF GRANT FUNDS IN 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 BIANNUAL BASIS,							
VISITING A SELECTION OF GRANTEES EACH TRIP. THE GRANTS MANAGER ENSURES							
GRANT COMPLIANCE AND COMPLIANCE WITH US TREASURY VOLUNTARY GUIDELINES FOR							
ORDER 13224.							

## SCHEDULE J (Form 990)

**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.

ZUZZ

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

GLOBAL FUND FOR CHILDREN

 $Employer\ identification\ number \\ 56-1834887$ 

Tax 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.    First-class or charter travel	Pa	art I Questions Regarding Compensation							
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.    First-class or charter travel				Yes	No				
First-class or charter travel	1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,							
Travel for companions		Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
Tax indemnification and gross-up payments Discretionary spending account 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 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?  3 Indicate which, if any, of the following the 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 committee Written employment contract Independent compensation consultant Compensation survey or study X Form 990 of other organizations X 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?  4 A X  b Participate in or receive payment from a supplemental nonqualified retirement plan?		First-class or charter travel Housing allowance or residence for personal use							
Discretionary spending account  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  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 Indicate which, if any, of the following the 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  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?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4 Dring 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 Participate in or receive payment from a supplemental nonqualified retirement plan?		Travel for companions Payments for business use of personal residence							
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  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 Indicate which, if any, of the following the 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X 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?  4 A X  b Participate in or receive payment from a supplemental nonqualified retirement plan?		Tax indemnification and gross-up payments Health or social club dues or initiation fees							
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain  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?  Indicate which, if any, of the following the 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  Approval by the board or compensation committee  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?		Discretionary spending account Personal services (such as maid, chauffeur, chef)							
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain  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?  Indicate which, if any, of the following the 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  Approval by the board or compensation committee  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?									
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?  3 Indicate which, if any, of the following the 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  X 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 filling organization or a related organization:  a Receive a severance payment or change-of-control payment?  4 A X  b Participate in or receive payment from a supplemental nongualified retirement plan?  4 A X	b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?  Indicate which, if any, of the following the 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  X Approval by the board or compensation committee  During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization:  Receive a severance payment or change-of-control payment?  4a X  b Participate in or receive payment from a supplemental nonqualified retirement plan?		reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b						
Indicate which, if any, of the following the 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.  Compensation committee  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  Approval by the board or compensation committee  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:  Receive a severance payment or change-of-control payment?  A Example 1	2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,							
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.  Compensation committee  Independent compensation consultant  Compensation survey or study  X Approval by the board or compensation committee  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:  Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?  Let Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?							
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.  Compensation committee  Independent compensation consultant  Compensation survey or study  X Approval by the board or compensation committee  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:  Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?  Let Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
establish compensation of the CEO/Executive Director, but explain in Part III.  Compensation committee  Independent compensation consultant  Tompensation survey or study  X 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?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization:  4 A X  4 A X  4 A X	3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's							
Compensation committee  Independent compensation consultant  X Form 990 of other organizations  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:  Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?  Written employment contract  Compensation survey or study  Approval by the board or compensation committee		CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
Independent compensation consultant  X Form 990 of other organizations  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?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  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:  4 A X  5 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:		establish compensation of the CEO/Executive Director, but explain in Part III.							
X Form 990 of other organizations X 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?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4 X		Compensation committee Written employment contract							
<ul> <li>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:</li> <li>a Receive a severance payment or change-of-control payment?</li> <li>b Participate in or receive payment from a supplemental nonqualified retirement plan?</li> <li>4b X</li> </ul>									
organization or a related organization:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4b X		X Approval by the board or compensation committee							
organization or a related organization:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4b X									
<ul> <li>a Receive a severance payment or change-of-control payment?</li> <li>b Participate in or receive payment from a supplemental nonqualified retirement plan?</li> <li>4a X</li> <li>b X</li> </ul>	4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
<ul> <li>a Receive a severance payment or change-of-control payment?</li> <li>b Participate in or receive payment from a supplemental nonqualified retirement plan?</li> <li>4a X</li> <li>b X</li> </ul>		organization or a related organization:							
b Participate in or receive payment from a supplemental nonqualified retirement plan?	а	Receive a severance payment or change-of-control payment?	<u>4a</u>	<u> </u>	<u>X</u>				
	b				X				
o vanispaio menerali populari nemana ana aquiny successiva nemana agentina	С		4c		Х				
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
Only coation E04(a)(2) E04(a)(4) and E04(a)(00) agranizations must complete lines E.O.		Only continue 504(a)(2), 504(a)(4), and 504(a)(00) arguminations must complete lines 5.0							
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	5								
contingent on the revenues of:	_		E0		x				
a The organization?  5a X  b Appreciated examination?	a h				X				
b Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	D	•	30						
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	6	·							
contingent on the net earnings of:	U								
	•		62		х				
o V					X				
b Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	J	•	00						
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7	,							
	•		7		х				
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	8								
	-		8		х				
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9								
Regulations section 53.4958-6(c)?	-		9						

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

Schedule J (Form 990) 2022

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

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

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

		<b>(B)</b> Breakdown of W	/-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JOHN HECKLINGER	(i)	242,941.	0.	0.	10,249.	22,467.	275,657.	0.
CEO/PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) COREY OSER	(i)	171,179.	0.	0.	12,793.	13,487.	197,459.	0.
VP PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RICHA CHOPRA MISTRY	(i)	169,050.	0.	0.	6,850.	9,712.	185,612.	0.
VP FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

### **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Inspection **Employer identification number** 

	GLOBAL FUND	FOR CH	TLDREN		56-1	8348	887	
Pai	rt I Types of Property			1				
		(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 de noncash contribu			S
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			110 000				
9	Securities - Publicly traded	X	9	110,083.	MARKET VALU	E		
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 ()							
<u>28</u> 29	Other ( )	tation during	the tay year far a	antributions				
29	Number of Forms 8283 received by the organization completed Form 828	-	•				0	
	for which the organization completed Form 626	oo, Fait V, L	onee Acknowledg	ement 29			Yes	No
302	During the year, did the organization receive by	, contributio	n any property rep	orted in Part I lines 1 throug	h 28 that it		163	NO
Jua	must hold for at least 3 years from the date of		*	· · · · · · · · · · · · · · · · · · ·				
	exempt purposes for the entire holding period?		•	cirisii trequired to be used		30a		Х
h	If "Yes," describe the arrangement in Part II.					OGG		
31	Does the organization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contribut	ions?	31	х	
	Does the organization hire or use third parties of	-	· · ·	•		<del></del>		
UZA	contributions?		-	· ·		32a		х
h	If "Yes," describe in Part II.					JE a		
33	If the organization didn't report an amount in c	olumn (c) for	r a type of property	for which column (a) is chec	ked			
	describe in Part II.	2.2 (0) 101	, po o, proport)	milon oblamin (a) to onec				
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990	).	Schedule N	l (Form	n 990)	2022

232142 09-09-22 Schedule M (Form 990) 2022

### **SCHEDULE 0** (Form 990)

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 Form 990-EZ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

GLOBAL FUND FOR CHILDREN

**Employer identification number** 56-1834887

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

THE BOARD OF DIRECTORS MAY BY RESOLUTION DESIGNATE AN EXECUTIVE COMMITTEE CONSISTING OF THREE OR MORE DIRECTORS AND MAY DELEGATE TO SUCH COMMITTEE THE POWERS AND AUTHORITIES OF THE BOARD IN THE MANAGEMENT OF THE BUSINESS TO THE EXTENT PERMITTED, AND AFFAIRS OF THE CORPORATION, AND EXCEPT AS MAY BY PROVISIONS OF LAW. THE COMMITTEE SHALL KEEP FULL OTHERWISE BE PROVIDED, AND FAIR RECORDS AND ACCOUNTS OF ITS PROCEEDINGS AND TRANSACTIONS. 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.

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

ALL NEW BOARD MEMBERS AND EMPLOYEES ARE GIVEN THE ORGANIZATION'S CONFLICT INTEREST DISCLOSURE POLICY AND ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST DISCLOSURE STATEMENT. IF A CONFLICT ARISES, THE CHIEF EXECUTIVE (CEO) IS ENGAGED TO DETERMINE IF THERE IS A CONFLICT OF INTEREST. 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) 2022

Schedule O (Form 990) 2022 Page **2** 

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 AFTER THE END OF EACH FISCAL YEAR. EMPLOYEES

COMPLETE THEIR SELFEVALUATIONS WHICH ARE REVIEWED AT THE MANAGER LEVEL AND

SENT TO HR AND CEO FOR REVIEW AND APPROVAL. ANY PERFORMANCEBASED OR

MARKETBASED 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 SELFASSESSMENT

FOR THE CEO IS REVIEWED BY THE BOARD CHAIR AND COCHAIR. THE MOST RECENT

YEAR IN WHICH THE PROCESS INCLUDED A REVIEW WAS FISCAL YEAR ENDING, JUNE 30

2023.

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

AL,AR,CA,CT,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.

#### **SCHEDULE R** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

GLOBAL FUND FO	R CHILDREN					56-18348	87	
Part I Identification of Disregarded Entities. Complete	e if the organization answered "Yes	s" on Form 990, Part IV, line 33	<b>3.</b>					
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity			(d) (e) Total income End-of-yea		Direct c	<b>(f)</b> Direct controlling entity	
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization	answered "Yes" on Form 990	, Part IV, line 34, b	ecause it had one	or more	related tax-exer	npt	
(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) et controlling entity		g) 512(b)(13) rolled ity?
4 CROWN PLACE	TO IMPROVE THE LIVES OF VULNERABLE CHILDREN AND YOUTH IN OUR WORLD	UNITED KINGDOM			GLOBAL CHILDRI	FUND FOR	X	NO

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

Schedule R (Form 990) 2022

		0 1 - 1 - 1 - 1 - 1 - 1	IIX / II F 000	D - + N / P O / 1	and a contract of the contract
David III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 34, t	decause it nad one or more related
Part III	organizations treated as a partnership during the tax year.			, ,	

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule		(k) Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec.	i) ction
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		(i) ction (b)(13) rolled tity?
		Couriery)						Yes	No
								Ь	<u> </u>
								<b>↓</b>	<u> </u>

Page 3

Yes No

1a

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**b** Gift, grant, or capital contribution to related organization(s)

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

_	c Gift, grant, or capital contribution from related organization(s)				1c	Х	
4	d Loans or loan guarantees to or for related organization(s)				1d		X
	e Loans or loan guarantees by related organization(s)				1e		_ <del></del>
٠	E Loans of four guarantees by related organization(s)				-10		
f	f Dividends from related organization(s)				1f		Х
g	g Sale of assets to related organization(s)				1g		X
	h Purchase of assets from related organization(s)				1h		X
i	i Exchange of assets with related organization(s)				1i		X
i	j Lease of facilities, equipment, or other assets to related organization(s)				1j		X
•	• • • • • • • • • • • • • • • • • • • •						
k	k Lease of facilities, equipment, or other assets from related organization(s)				1k		X
1	Performance of services or membership or fundraising solicitations for related organization(s)				11		X
n	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
					10		X
р	p Reimbursement paid to related organization(s) for expenses				1p		X
	Reimbursement paid by related organization(s) for expenses				1q		X
r	r Other transfer of cash or property to related organization(s)				1r		X
s	s Other transfer of cash or property from related organization(s)				1s		Х
	If the answer to any of the above is "Yes," see the instructions for information on who must compl						
	(a) (b) Name of related organization Transaction		(c) Amount involved	(d) Method of determining amount invo	lved		
	type (a-s)	)					
<b>1</b> \	THE GLOBAL FUND FOR CHILDREN UK TRUST C		37,312.	CASH			
<u>')</u>	THE GEODAL TOND TON CHIEDREN ON TROOT		31,312.	CADII			
2)							
3)							
4)							
5)							
6)							
3216	163 09-14-22			Schedule R	(Forn	n 990)	2022

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocation Yes N	General of managing partner?  Yes No	(k) r Percentage ownership

232165 09-14-22 Schedule R (Form 990) 2022