(Rev. January 2020) Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 16, 2020

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.

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

Open to Public Inspection

OMB No. 1545-0047

<u>A</u> F	or the	2019 calendar year, or tax year beginning and c	ending						
	Check if opplicable	C Name of organization		D Employer identifi	cation number				
Г	Addre	GIRL RISING							
	Name chang			82-28625	54				
]Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r				
Final		114 W 26TH ST. 7TH FLOOR		201-649-3093					
	termin ated	1		G Gross receipts \$	3,443,482.				
	Ameno	NEW TORK, NI 10001		H(a) Is this a group re					
	Application pendir			for subordinates	? Yes X No				
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No				
		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) o	or 527	1	list. (see instructions)				
		e: WWW.GIRLRISING.ORG		H(c) Group exemptio					
		organization: X Corporation	L Year	of formation: 2017	M State of legal domicile; NY				
P	art I	Summary	מזוח מו	DOMED OF C					
ě	1	Briefly describe the organization's mission or most significant activities: TO US							
anc		TO CHANGE THE WAY THE WORLD VALUES GIRLS A							
Activities & Governance	1	Check this box (if the organization discontinued its operations or dispose Number of voting members of the governing body (Part VI, line 1a)		1	12				
်		Number of independent voting members of the governing body (Part VI, line 1b)			12				
∞ ∞		Total number of individuals employed in calendar year 2019 (Part V, line 1a)			18				
iţie		Total number of volunteers (estimate if necessary)			14				
ξ		Total unrelated business revenue from Part VIII, column (C), line 12			0.				
Ă		Net unrelated business taxable income from Form 990-T, line 39			0.				
		,		Prior Year	Current Year				
an an	8	Contributions and grants (Part VIII, line 1h)		2,228,466.	2,198,181.				
Revenue	1	Program service revenue (Part VIII, line 2g)		986,319.	960,078.				
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,641.	6,894.				
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-802.	217,848.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		3,220,624.	3,383,001. 198,732.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	imilar amounts paid (Part IX, column (A), lines 1·3)						
	I .	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.					
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		999,458.	974,556.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
ž	b	Total fundraising expenses (Part IX, column (D), line 25)		0 000 000	1 406 100				
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,009,999.	1,426,122.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,055,132.	2,599,410.				
	19	Revenue less expenses. Subtract line 18 from line 12		165,492.	783,591.				
Net Assets or		Total assets (Dart V. line 16)		ginning of Current Year 3,091,081.	End of Year 3,033,174.				
SSe	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		1,290,436.	448,938.				
let /	22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		1,800,645.	2,584,236.				
Pa	art II	Signature Block		1,000,045.	2,301,2301				
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is				
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi			,				
Sig	n	Signature of officer		Date					
Her		CHRISTINA LOWERY, CHIEF EXECUTIVE OFFI	CER						
		Type or print name and title							
		Print/Type preparer's name Preparer's signature		Oate Check [7/9/20	PTIN				
Paid	I	ISRAEL TANNENBAUM		self-employ					
-	arer	Firm's name MAZARS USA LLP		Firm's EIN ▶	13-1459550				
Use	Only	Firm's address 135 WEST 50TH STREET		, -	10) 010 500				
		NEW YORK, NY 10020-0002		Phone no. (2					
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				

Pai	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:
	GIRL RISING (GR) TELLS STORIES ABOUT GIRLS WHO FACE DAUNTING BARRIERS
	TO THEIR INDEPENDENCE WITH DETERMINATION AND COURAGE, STRATEGICALLY
	DEPLOYING THESE STORIES TO FUEL AND STRENGTHEN SOCIAL MOVEMENTS -
	INFORMING AND INSPIRING PEOPLE TO TAKE ACTION FOR GIRLS AND GENDER
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? X Yes No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes 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 \$ 381,663. including grants of \$) (Revenue \$ 394,841.)
	EXPLORE MORE: THIS PROJECT OPENS UP POSSIBILITIES FOR GIRLS IN 6
	COUNTRIES AROUND THE WORLD AND HELPS THEM EXPLORE A WIDE RANGE OF
	ISSUES RELATED TO SELF-EMPOWERMENT AND SELF CONFIDENCE. THIS WILL BE
	DONE BY UTILIZING A SERIES OF FILMS AND TOOLKITS WHICH AIM TO INSPIRE
	GIRLS TO EXPAND THEIR HORIZONS. GR REACHED 28,853 ADOLESCENT BOYS AND
	GIRLS.
	, , , , , , , , , , , , , , , , , , , ,
4b	(Code:) (Expenses \$ 506,736. including grants of \$) (Revenue \$187,813.) REFUGEE: THE BRAVE GIRL RISING FILM AND CAMPAIGN HIGHLIGHT THE
	CHALLENGES GIRLS IN REFUGEE AND DISPLACED SITUATIONS FACE AROUND THE
	WORLD. BACKED BY A ROBUST ONLINE ADVOCACY TOOLKIT AND CURRICULUM, BRAVE
	IS DESIGNED TO GET PEOPLE TALKING ABOUT THE REALITY FOR REFUGEE GIRLS
	ALL OVER THE GLOBE, THE BARRIERS THEY FACE IN SECURING BASIC HUMAN
	RIGHTS AND THE TRULY TRANSFORMATIVE POWER OF EDUCATION FOR GIRLS LIVING
	AS REFUGEES.
	AD KEI OCHED:
4c	(Code:) (Expenses \$
٠	GLOBAL EDUCATION FUND: GEF SEEKS OUT AND INVESTS IN LEADERS WHO ARE
	PROMOTING GENDER EQUALITY AND IMPROVING THE QUALITY OF EDUCATION FOR
	GIRLS AND BOYS LIVING IN POVERTY IN KENYA AND INDIA. WITH GEF FUNDING
	AND RESOURCES, ORGANIZATIONS LED BY STRONG SOCIAL ENTREPRENEURS HAVE
	NEW OPPORTUNITIES TO GROW AND CREATE POSITIVE CHANGE IN THEIR
	COMMUNITIES REACHING TO MORE THAN 50,850 ADOLESCENT BOYS AND GIRLS. GR
	CURRICULUM HAS BEEN PILOTED WITH 517 GIRLS AND BOYS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 840,991. including grants of \$) (Revenue \$ 394,740.)
4e	Total program service expenses ▶ 1,939,635.
	Form 990 (2019)

932002 01-20-20

Form 990 (2019) GIRL RISING Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		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 Revenue Procedure 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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
0	Schedule D, Part III	l °		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			₩.
	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		<u> X</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> X</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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	L	Х
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	Х	
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	Х	
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,	. <u> </u>		_ _ _
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		
10		18	Х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	10	- 22	\vdash
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_		v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

932003 01-20-20

Form 990 (2019) GIRL RISING
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	_X_	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		_
2 54	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	200		
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	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		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	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 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? If			l
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			v
00	"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		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? If "Yes," complete Schedule M	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
OL.	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? 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			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
Pai	Note: All Form 990 filers are required to complete Schedule O	38	X	Щ_
. u	Check if Schedule O contains a response or note to any line in this Part V			
	Shook is contidued to containe a response of flote to any line in this fact v		Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
b	Enter the number reported in Box 3 of Form 1030. Enter 40- in not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c	Х	
932004	\$ 01-20-20		990	(2019)

Form 990 (2019) GIRL RISING

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

ı aı	Statements negarding other ins runings and rax compliance (continued)							
			Yes	No				
2 a	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 2a1		l					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			٠,,				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١.		x				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		 ^				
D	If "Yes," enter the name of the foreign country See instructions for filling requirements for Fig.CEN Form 114. Papert of Foreign Bank and Financial Accounts (FDAD)							
Eo	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х				
5a h	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?							
C	16 Th C	5b 5c		X				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-1? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	00						
Ju	any contributions that were not tax deductible as charitable contributions?	6a		l x				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
_	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	7a	Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7с		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12							
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
-	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		X				
	If "Yes," see instructions and file Form 4720, Schedule N.			77				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.							

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	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 12			
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	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		X
b				
	persons other than the governing body?	7b		X
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	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
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		Х
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	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			
17	List the states with which a copy of this Form 990 is required to be filed ▶DC , NY			
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)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	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			
	THE ORGANIZATION - 201-649-3093			
	114 W 26TH ST. 7TH FLOOR, NEW YORK, NY 10001			

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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

See instructions for the order in which to list the persons above.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average		Position (do not check more than one box, unless person is both an		Reportable	Reportable	Estimated			
	hours per week		, unle cer ar					compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	direc				- - -		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensati		(W-2/1099-MISC)		organization
	organizations	al trus	onal tr		loyee	comp				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TARA SPIESS	2.00	드	드	JO.	Α	ΞE	요			
CO-CHAIR/TREASURER		Х		х				0.	0.	0.
(2) HOLLY GORDON	1.00								-	
DIRECTOR		Х						0.	0.	0.
(3) AMITA VYAS	2.00									
CO-CHAIR		Х		Х				0.	0.	0.
(4) ANN RUBLE	2.00									
SECRETARY		Х		Х				0.	0.	0.
(5) PHYLLIS HOCKETT	1.00									
DIRECTOR		Х						0.	0.	0.
(6) KATE ISLER	1.00									
DIRECTOR		Х						0.	0.	0.
(7) RAJ MALIK	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(8) ALLI MCCARTNEY	1.00	1								_
DIRECTOR	1	Х						0.	0.	0.
(9) COURTNEY MCDONNELL	1.00	ļ								
DIRECTOR	1 00	Х				_		0.	0.	0.
(10) EMILY NIELSON JONES	1.00	.,							_	
DIRECTOR	1 00	Х						0.	0.	0.
(11) MICHELE WOLFRAM	1.00	٠,,							_	_
DIRECTOR (12) ELIZA WOLOSON	1.00	Х						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(13) CHRISTINA LOWERY	40.00	Λ						0.	0.	· ·
CHIEF EXECUTIVE OFFICER	40.00	1		Х				181,442.	0.	43.
(14) JILL MILLER	40.00			^				101,442.	<u></u>	43.
CHIEF PROGRAM & ADMIN OFFI	40.00	1		Х				135,995.	0.	39.
(15) CATHERINE BRANDHI	40.00		I					133,333		
DEVELOPMENT OFFICER	10.00	1				x		117,641.	0.	4,228.
		-								
					l		<u> </u>			- 000 (aa (a)

932007 01-20-20 Form **990** (2019)

Part VII Section A. Officers, Directors, Tru													
(A) Name and title	(B) Average hours per week	box	officer and a director/trustee)					(D) Reportable compensation	(E) Reportable compensati		an	(F)	
	(list any hours for related organizations below line)	tee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	s compens			e ion ed
		드	드	10	- Ke	王も	2						
		-											
1b Subtotal c Total from continuation sheets to Part	VII, Section A						>	435,078.		0.		4,31	0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but							o re	435,078. eceived more than \$100,	000 of reportable	0.		4,31	<u>10.</u> 3
compensation from the organization 3 Did the organization list any former office	er director trust	ee. k	ev e	lame	ove	e. or	hia	hest compensated emp	lovee on			Yes	No
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the	such individual										3		Х
and related organizations greater than \$1Did any person listed on line 1a receive o											4	Х	
rendered to the organization? If "Yes." CO	mplete Schedul	e J f	or su	ıch <u>r</u>	oers	on					5		Х
Complete this table for your five highest of the organization. Report compensation for	•	•							•	oensa			
(A) Name and busines	ss address	N	ONE	3				(B) Description of s	ervices	C	(Compe		<u>n</u>
Total number of independent contractors \$100,000 of compensation from the organ		ot lir	nited	d to t	thos (ted	above) who received mo	ore than				

Form 990 (2019) GIRL RISING
Part VIII Statement of Revenue

			Check if Schedule O contains a response	or note to any lir	ne in this Part VIII			
			Officer if Schedule O Contains a response	or note to any in	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenuè excluded
						function revenue	business revenue	from tax under
								sections 512 - 514
ts ts	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues1b					
e, E		С	Fundraising events1c	4,646. 783,365.				
ifts Ir A			Related organizations 1d	783,365.				
n G≒			Government grants (contributions) 1e	•				
Sic			All other contributions, gifts, grants, and		-			
eti je		٠		,410,170.				
들				, 410, 170.	-			
t o		_	Noncash contributions included in lines 1a-1f 1g \$		0 100 101			
<u>ŏ</u> ĕ		h	Total. Add lines 1a-1f		2,198,181.			
				Business Code				
ø.	2	а	FILM PRODUCTION	900099	960,078.	960,078.		
کج		b						
Ser		С						
E S		d						
gra		_						
Program Service Revenue		•	All other program contine revenue					
_			All other program service revenue		960,078.			
-			Total. Add lines 2a-2f		300,070.			
	3		Investment income (including dividends, inter					
			other similar amounts)					
	4		Income from investment of tax-exempt bond	proceeds				
	5		Royalties	>	8,759.			8,759.
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c		-			
			Net rental income or (loss)					
			, , , , , , , , , , , , , , , , , , , ,	(ii) Other				
	′	а	(7	. ,	4			
			assets other than inventory 7a	13,410.	4			
		b	Less: cost or other basis					
e l			and sales expenses	6,516.	_			
ě		С	Gain or (loss) 7c	6,894.				
Revenue			Net gain or (loss)	<u></u>	6,894.	6,894.		
her	8	а	Gross income from fundraising events (not					
₽			including \$ 4,646. of					
			contributions reported on line 1c). See					
				252,632.				
		h	Less: direct expenses 8		-			
				<u> </u>	198,667.			198,667.
			Net income or (loss) from fundraising events		130,007.			190,007.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19		_			
		b	Less: direct expenses 9	o				
		С	Net income or (loss) from gaming activities	<u></u>				
	10	а	Gross sales of inventory, less returns					
			and allowances 10	a				
		b	Less: cost of goods sold	b				
			Net income or (loss) from sales of inventory					
\neg		_	The state of the s	Business Code				
ns	44	_	OTHER	900099	10,422.	10,422.		
e eo	"		<u> </u>	700079	10,422.	10,422.		
llan		b						
Se Se		С			-			
Miscellaneous Revenue			All other revenue		10 100			
		е	Total. Add lines 11a-11d	<u></u>	10,422.			
	12		Total revenue. See instructions		3,383,001.	977,394.	0.	207,426.

16060709 148365 69972

Form 990 (2019) GIRL RISING Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must compl	ete all columns. All othe	er organizations must com	nplete column (A).	
	Check if Schedule O contains a respons			(O)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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	198,732.	198,732.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	317,519.	187,794.	52,809.	76,916.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	560 406		22 512	105 010
7	Other salaries and wages	562,426.	332,642.	93,542.	136,242.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	24 422	00 101	F 0.45	0 004
9	Other employee benefits	34,133.	20,494.	5,245.	8,394.
10	Payroll taxes	60,478.	36,312.	9,293.	14,873.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	58,083.		58,083.	
d	, , , , , , , , , , , , , , , , , , , ,				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	450 604		64 000	40 456
	column (A) amount, list line 11g expenses on Sch O.)	458,634.	384,228.	61,930.	12,476.
12	Advertising and promotion	4,292.	4,208.	84.	
13	Office expenses	60,955.	39,180.	18,583.	3,192.
14	Information technology	5,057.	3,954.	1,075.	28.
15	Royalties	10.000			
16	Occupancy	18,358.	18,358.		
17	Travel	54,437.	43,844.	7,553.	3,040.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	34,991.		12 -11	34,991.
20	Interest	19,714.		19,714.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	578,871.	537,332.	27,041.	14,498.
23	Insurance				
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)				
а	amount, list line 24e expenses on Schedule 0.) PRODUCTION COSTS	109,776.	109,776.		
a b	DISALLOWED COSTS	16,631.	16,631.		
C	OTHER	6,323.	6,150.		173.
d	<u></u>	0,525•	0,130.		<u> </u>
	All other expenses				
е 25	Total functional expenses. Add lines 1 through 24e	2,599,410.	1,939,635.	354,952.	304,823.
<u>25</u> 26	Joint costs. Complete this line only if the organization	2,000,4100	±,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	55=1554	504,045
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	II following 501: 30-2 (A50 350-720)				000

16060709 148365 69972

GIRL RISING

Form 990 (2019) Part X | Balance Sheet

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part >	,		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	363,281.	1	882,278.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	290,204.	3	294,700.
	4	Accounts receivable, net		4	50,008.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ဖွ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ĕ	9	Prepaid expenses and deferred charges	1 11 167 1	9	1,974.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2,317,620.	15	1,804,214.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	3,033,174.
	17	Accounts payable and accrued expenses	184,086.	17	118,938.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
န္မ	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ap		controlled entity or family member of any of these persons		22	
-	23			23	
	24	Unsecured notes and loans payable to unrelated third parties	1,106,350.	24	330,000.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	440.020
	26	Total liabilities. Add lines 17 through 25	1,290,436.	26	448,938.
ر د		Organizations that follow FASB ASC 958, check here			
ا ۋ		and complete lines 27, 28, 32, and 33.	1 007 004		1 042 260
alar 	27	Net assets without donor restrictions		27	1,942,360.
Ä	28	Net assets with donor restrictions	702,751.	28	641,876.
<u> </u>		Organizations that do not follow FASB ASC 958, check here			
느		and complete lines 29 through 33.			
į į	29	Capital stock or trust principal, or current funds		29	
SSe	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	2 504 226
ž	32	Total net assets or fund balances		32	2,584,236.
	33	Total liabilities and net assets/fund balances	3,091,081.	33	3,033,174.

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	3,38				
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,59	9,4	<u> 10.</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3			91.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))						
5	Net unrealized gains (losses) on investments	5					
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	2,58	4,2	<u> 36.</u>		
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 in Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
	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:						
	X Separate basis 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 Single	gle Audit					
	Act and OMB Circular A-133?		3a		<u> </u>		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b				
			Form	990	(2019)		

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number Name of the organization GIRL RISING 82-2862554 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 or 990-EZ).) 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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 n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

16060709 148365 69972

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19

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

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

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")				2228466.	2198181.	4426647.	
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				2228466.	2198181.	4426647.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						1580926.	
	Public support. Subtract line 5 from line 4.						2845721.	
	ction B. Total Support	Г			1		_	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
	Amounts from line 4				2228466.	2198181.	4426647.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,				26 000	0 750	25 640	
	and income from similar sources				26,889.	8,759.	35,648.	
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				6 012	10 422	17,335.	
	assets (Explain in Part VI.)				6,913.	10,422.	4479630.	
11			`			40 1	,960,875.	
12	Gross receipts from related activities, First five years. If the Form 990 is for	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				, 900 , 075 .	
13	_	•			•		▶ X	
Sec	organization, check this box and storection C. Computation of Publi	c Support Per	centage		•••••		<u>A</u>	
	Public support percentage for 2019 (I		_	column (fl)		14	%	
15	Public support percentage from 2018					15	/ 6	
	33 1/3% support test - 2019. If the o							
	stop here. The organization qualifies						. —	
b	33 1/3% support test - 2018. If the o		-					
	and stop here. The organization qual							
17a	10% -facts-and-circumstances test							
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	nis box and stop	here. Explain in Par	t VI how the organ	ization	
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
b	b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or							
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the							
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
18	18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

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.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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							
	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
k	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							
	Public support. (Subtract line 7c from line 6.)							
Se	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
9	Amounts from line 6							
	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties,							
	and income from similar sources							
k	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
(Add lines 10a and 10b							
	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is							
	regularly carried on							
12	Other income. Do not include gain							
	or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiz	ation,	
	check this box and stop here						>	
Se	ction C. Computation of Publi	c Support Per	centage					
15	Public support percentage for 2019 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%	
	Public support percentage from 2018	·				16	%	
<u>Se</u>	ction D. Computation of Inves	tment Income	Percentage					
17	Investment income percentage for 20					17	%	
18	Investment income percentage from					18	%	
19a	33 1/3% support tests - 2019. If the	organization did r	not check the box o	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not	
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
k	33 1/3% support tests - 2018. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and	
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly suppo	orted organization		
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	structions		

16060709 148365 69972

Vas No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1		
2		
_		
За		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b	00 ==:	
n 990 or 9	YU-EZ	2019

Par	t IV Supporting Organizations _(continued)			
		Ye	es	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 in (b) and (c)			
	below, the governing body of a supported organization?			
b	A family member of a person described in (a) above?			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	:		
Sect	tion B. Type I Supporting Organizations			
		Ye	es	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization. 2 tion C. Type II Supporting Organizations			
000	non of Type in outporting organizations	Ye		No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	16	53	NO
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).		Т	
Sect	tion D. All Type III Supporting Organizations			
		Ye	es	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?		_	
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).			
	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u> </u>	supported organizations played in this regard. ition E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a b	The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	201		
	Activities Test. Answer (a) and (b) below.	Ye	25	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			110
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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? <i>Provide details in</i> Part VI.			
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 (explain in Part	VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must com	plete S	ections A through E.	
Sect	ion 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	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting organiz	ation (see
	instructions).			

Par	L V	ype III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Di	stributions			Current Year
1	Amounts				
2	Amounts				
	organiza				
3	Administ				
4	Amounts				
5	Qualified				
6	Other dis	stributions (describe in Part VI). See instructions.			
7	Total an	nual distributions. Add lines 1 through 6.			
8	Distribut				
	(provide	details in Part VI). See instructions.			
9	Distribut	able amount for 2019 from Section C, line 6			
10	Line 8 ar	nount divided by line 9 amount			
Secti	on E - Di	stribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distribut	able amount for 2019 from Section C, line 6			
2	Underdis	stributions, if any, for years prior to 2019 (reason-			
	able cau	se required- explain in Part VI). See instructions.			
3	Excess c	listributions carryover, if any, to 2019			
а	From 20	14			
b	From 20	15			
С	From 20	16			
d	From 20	17			
е	From 20	18			
f	Total of	lines 3a through e			
g	Applied 1	o underdistributions of prior years			
h	Applied t	o 2019 distributable amount			
i	Carryove	er from 2014 not applied (see instructions)			
j	Remaind	er. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distribut	ions for 2019 from Section D,			
	line 7:	\$			
а	Applied t	o underdistributions of prior years			
b	Applied t	o 2019 distributable amount			
С	Remaind	er. Subtract lines 4a and 4b from 4.			
5	Remainir	ng underdistributions for years prior to 2019, if			
	any. Sub	tract lines 3g and 4a from line 2. For result greater			
	than zero	o, explain in Part VI. See instructions.			
6	Remainir	ng underdistributions for 2019. Subtract lines 3h			
	and 4b fi	rom line 1. For result greater than zero, explain in			
	Part VI. See instructions.				
7	Excess distributions carryover to 2020. Add lines 3j				
	and 4c.				
8	Breakdo	wn of line 7:			
а	Excess f	rom 2015			
b	Excess f	rom 2016			
С	Excess f	rom 2017			
d	Excess f	rom 2018			
е	Excess f	rom 2019			