GLOBAL FUND FOR WOMEN, INC.

PUBLIC DISCLOSURE COPY

RETURN OF EXEMPT ORGANIZATION

PERIOD ENDED JUNE 30,2017

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

or calendar year 2016, or fiscal year beginning	J	UL	1	, 2016, and end	ting JUN	1 30	, 20 17

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service		not send to the IRS. Keep for you n 8879-EO and its instructions is	-		2010
Name of exempt organization		100/9-LO and its misu actions is			entification number
	ND FOR WOMEN INC			//-01	55782
Name and title of officer MUSIMIBI KANY	ORO				
PRESIDENT AND					
		mation (Whole Dollars Only)			·
on line 1a, 2a, 3a, 4a, or 5 whichever is applicable, bl than 1 line in Part I.	a, below, and the amount on th ank (do not enter -0-). But, if you	Form 8879-EO and enter the applic at line for the return being filed with a entered -0- on the return, then en	h this form was blank, ther ter -0- on the applicable lin	n leave lin e below.	e 1b, 2b, 3b, 4b, or 5b, Do not complete more
1a Form 990 check here	b Total revenue	e, if any (Form 990, Part VIII, colum	n (A), line 12)	1b _	10,030,023.
2a Form 990-EZ check he		enue, if any (Form 990-EZ, line 9)			
3a Form 1120-POL check	nere b lotal	tax (Form 1120-POL, line 22)d on investment income (Form 99	MARE Root VI line 5)	30 _	
4a Form 990-PF check he 5a Form 8868 check here		(Form 8868, line 3c)			
Ja i Olili OOOO Check hele	b balance bue	(i omi dodd, mie dd)		36 _	
Part II Declarat	ion and Signature Autho	orization of Officer			
processing of the electroni payment. I have selected a	ic payment of taxes to receive c a personal identification number electronic funds withdrawal.	payment (settlement) date. I also a onfidential information necessary t (PIN) as my signature for the organ	o answer inquiries and res	olve issue	es related to the
	SS ADAMS LLP		to	enter my	PIN 55782
A l'authorize MO	DO ADAMO LILI	ERO firm name	101	enter my	Enter five numbers, bu
					do not enter all zeros
is being filed with enter my PIN on As an officer of the indicated within	h a state agency(ies) regulating the return's disclosure consent he organization, I will enter my	PIN as my signature on the organiz turn is being filed with a state agen	ate program, I also authorization's tax year 2016 elect	e the afo	rementioned ERO to
	tion and Authentication			· .	
•	our six-digit electronic filing ident your five-digit self-selected PIN		94022889318 do not enter all zeros		
certify that the above nunconfirm that I am submitting a Providers for Busines	ng this return in accordance with	ny signature on the 2016 electronic n the requirements of Pub. 4163, I	cally filed return for the org Modernized e-File (MeF) Inf	anization ormation	indicated above. I for Authorized IRS
RO's signature ► MOSS	ADAMS LLP		Date ▶ <u>05/03</u>	3/18	

ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So

PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 067074

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.

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Department of the Treasury Internal Revenue Service

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

<u>A</u>	For the	2016 calendar year, or tax year beginning 00L 1, 2016 and 6	enaing U	UN 30, 2017						
В	Check if applicable	C Name of organization		D Employer identifi	cation number					
	Addres									
	Name change	Doing business as		77-0	155782					
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number						
	Final return/	800 MARKET STREET, 7TH FLOOR		(415) 248-4800						
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	19,175,857.					
	Amend return			H(a) Is this a group return						
	Applica tion	F Name and address of principal officer: MUSIMIBI KANYORO		for subordinates						
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in						
$\overline{}$	Тах-ехе	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) o	r 527	1 ` ′	list. (see instructions)					
		e: WWW.GLOBALFUNDFORWOMEN.ORG	021	H(c) Group exemption	,					
		organization: X Corporation Trust Association Other	I Vear		M State of legal domicile: CA					
		Summary	L Toai	or formation. 230711	VI Otate of legal dofficite. C11					
		Briefly describe the organization's mission or most significant activities: GLOBA	T. FUN	D FOR WOMEN	TS A					
ဗ	'	GLOBAL CHAMPION FOR THE HUMAN RIGHTS OF WO								
Jan	2	Check this box if the organization discontinued its operations or dispose								
Jerr	3	- · · · · · · · · · · · · · · · · · · ·		1	22					
é	4	Number of independent voting members of the governing body (Part VI, line 1b)			21					
∘ŏ	5	Total number of individuals employed in calendar year 2016 (Part V, line 1a)			49					
ties	3				30					
Activities & Governance	6	Total number of volunteers (estimate if necessary)			0.					
Ğ	/ a	Total unrelated business revenue from Part VIII, column (C), line 12			0.					
_	D	Net unrelated business taxable income from Form 990-T, line 34								
		Contributions and supply (Dod VIII line 11)		Prior Year 15,169,795.	Current Year 14,768,360.					
ne	8	Contributions and grants (Part VIII, line 1h)		217,480.	632,619.					
Revenue	9	Program service revenue (Part VIII, line 2g)		600,016.	606,240.					
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		8,386.	51,406.					
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		15,995,677.	16,058,625.					
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,617,997.	10,038,023.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0,017,997.						
	1	Benefits paid to or for members (Part IX, column (A), line 4)		4,460,230.	0. 4,484,744.					
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		64,370.						
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		04,370.	49,995.					
.X	b	Total fundraising expenses (Part IX, column (D), line 25) 1,816,50		2 570 710	2 070 200					
	1 ''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,578,710.	2,070,200.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,721,307.	16,802,041.					
	19	Revenue less expenses. Subtract line 18 from line 12		2,274,370.	-743,416.					
Net Assets or			Ве	ginning of Current Year	End of Year					
Ssel	20	Total assets (Part X, line 16)		25,746,151.	28,469,973.					
etA	21	Total liabilities (Part X, line 26)		4,903,917.	7,700,767.					
	22 art II	Net assets or fund balances. Subtract line 21 from line 20		20,842,234.	20,769,206.					
		1 9			The second of the Bart State					
	-	ties of perjury, I declare that I have examined this return, including accompanying schedules			/ knowledge and belief, it is					
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whi	ch preparer	nas any knowledge.						
		PUBLIC DISCLOSURE COPY Signature of officer		I Date						
Sig		,		Date						
Hei	re	MUSIMIBI KANYORO, PRESIDENT AND CEO								
		Type or print name and title	T i	Date Check	PTIN					
<u>.</u>	,	Print/Type preparer's name Preparer's signature		if						
Pai	1	TRACY S. PAGLIA TRACY S. PAGLIA	C	05/14/18 self-employ						
	parer	Firm's name MOSS ADAMS LLP		Firm's EIN ▶	91-0189318					
Use Only Firm's address 3121 W MARCH LN, STE 200										
		STOCKTON, CA 95219-2367		Phone no. 20	9-955-6100					
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No					

Par	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:
	GLOBAL FUND FOR WOMEN IS A GLOBAL CHAMPION FOR THE HUMAN RIGHTS OF
	WOMEN AND GIRLS. WE USE OUR POWERFUL NETWORKS TO FIND, FUND, AND
	AMPLIFY THE COURAGEOUS WORK OF WOMEN WHO ARE BUILDING SOCIAL MOVEMENTS
	AND CHALLENGING THE STATUS QUO. WE ARE COMMITTED TO GETTING MONEY AND
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 \$ 12,140,184. including grants of \$ 10,197,102.) (Revenue \$ 632,619.)
	GRANTS AND GRANTEE SERVICES: IN FYE2017 GLOBAL FUND FOR WOMEN AWARDED
	269 GRANTS TO 230 ORGANIZATIONS IN 60 COUNTRIES. THEY HELPED STRENGTHEN
	AND SUSTAIN WOMEN'S HUMAN RIGHTS GROUPS IN FIVE MAIN REGIONS OF THE
	WORLD - ASIA AND THE PACIFIC, EUROPE AND CENTRAL ASIA, LATIN AMERICA
	AND THE CARIBBEAN, THE MIDDLE EAST AND NORTH AFRICA, AND SUB-SAHARAN
	AFRICA. OUR FUNDING SUPPORTED GROUPS WORKING TO END GENDER-BASED
	VIOLENCE, PROMOTE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS, AND
	ADVANCE ECONOMIC AND POLITICAL EMPOWERMENT. THIS WORK INCLUDED ENDING
	GENDER-BASED VIOLENCE IN GARMENT FACTORIES IN ASIA, STRENGTHENING YOUNG
	WOMEN'S LEADERSHIP IN SOUTH ASIA, SUPPORTING SYRIAN WOMEN REFUGEES IN
	THE MIDDLE EAST, PEACE BUILDING AND SECURITY IN THE GREAT LAKES REGION
	OF SUB-SAHARAN AFRICA, ADDRESSING RISING FUNDAMENTALISMS IN EUROPE AND
4b	(Code:) (Expenses \$1, 983, 044. including grants of \$0. (Revenue \$)
	ADVOCACY AND INNOVATION: GLOBAL FUND FOR WOMEN CONTINUED TO EXPAND ITS
	ADVOCACY BY INTENSIFYING MEDIA, CAMPAIGNING, AND DIGITAL ENGAGEMENT
	ACTIVITIES. THIS YEAR WE COMPLETED AN ORGANIZATIONAL RESTRUCTURE
	INTEGRATING OUR ADVOCACY, STRATEGIC GRANTMAKING, AND MOVEMENT-BUILDING
	FUNCTIONS INTO ONE PROGRAMS TEAM TO BETTER ALIGN OUR FOCUS ON CORE
	IMPACT AREAS AND TO MAXIMIZE OUR ABILITY TO AMPLIFY THE VOICES OF WOMEN
	AND GRANTEE PARTNERS AROUND THE WORLD. IN FALL 2016 WE LAUNCHED
	#DEFENDHER, AN ART-DRIVEN CAMPAIGN THAT PRESENTED ILLUSTRATED PORTRAITS
	AND STORIES OF 14 WOMEN HUMAN RIGHTS DEFENDERS GLOBALLY TO RAISE
	AWARENESS OF AND SPARK CRITICAL CONVERSATIONS ON WOMEN'S RIGHTS AND
	EXPAND VISIBILITY. THE CAMPAIGN PREMIERED AT THE AWID FORUM FOR WOMEN'S
	RIGHTS IN BRAZIL AND REACHED NEARLY 26,000 UNIQUE WEBSITE VISITORS,
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 14,123,228.
	000

Form 990 (2016) THE GLOBAL FUND FOR WOMEN INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
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	
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		X
		Form	990	(2016)

Form 990 (2016) THE GLOBAL FUND FOR WOMEN INC. Part IV Checklist of Required Schedules (continued)

			Yes	_
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? 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			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
•	A compart of famous officers discount works on less completes O to the Control of	28a		х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C		28c		x
29	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	21	
30	, , , , , , , , , , , , , , , , , , , ,	30		x
21	contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations?	24		x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		 ^
32	, ,	20		x
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		Х	
05-	Part V, line 1	34	X	-
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Λ	_
р	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			 ₩
00	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?			_V
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	(= = . =)

Form 990 (2016) THE GLOBAL FUND FOR WOMEN INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

Series S		Check if Schedule O contains a response or note to any line in this Part V					
b Enter the number of Forms W-2G included in line 1a Enter-0+ in not applicable						Yes	No
C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, 12a	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	36			
Leganization winnings to prize winners? 2	b		1b	0			
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 b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to a-rise (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a A Tay time during the calendar year, did the organization have an explanation in Schedule O 3b If "Yes," has it field a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b If "Yes," the time the name of the foreign country, is provided an explanation in Schedule O 3c If "Yes," enter the name of the foreign country, INDITED XINGDOM See instructions for filing requirements for FiniceN Form 114, Report of Foreign Bank and Financial accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8886-17 6c If "Yes," to line 5a or 5b, did the organization file Form 8886-17 6d Does the organization have all gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible? 7 Organization that may receive deductible contributions under section 170(c). 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization seleve any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 To Ya X 7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 To Ya X 7 Did the organization received a contribution of cars, boats, ariplanes, or other vehicles, did the organizat	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
filed for the calendar year ending with or within the year covered by this return A S		(gambling) winnings to prize winners?			1c	X	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3a Did the organization have unrealed business gross income of \$1,000 or more during the year? 3b Did the organization have unrealed business gross income of \$1,000 or more during the year? 3a A at yit mean and organization have unrealed business gross income of \$1,000 or more during the year? 3a A at yit medium; the calendary year, did the organization have un interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account); over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAF). 5a Was the organization a party to a prohibited tax shelter transaction? 5b Us any taxeb party notify the organization have that was or is a party to a prohibited as shelter transaction? 5c If "Yes," it oline Sa or Sb, did the organization file form 8886-17 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicitic any contributions that were not tax deductible as charitable contributions? 6b If "Yes," id dit en organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b If "Yes," id dit en organization include with every solicitation an express statement that such contributions or gifts were not tax deductible or organization ander section 170c). 8c If "Yes," id dit en organization notify the donor of the value of the goods or services provided? 7c If a granization sell, exchange, or otherwise dispose of transible personal property for which it was required? 7d If If yes, a did the organization neceive a payment in excess of ST made party as a contribution of quality and property, did the organization file and provided to the payments? 7d If Did the organization received a contribution of undersided provi	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required tonie (see instructions) 3		filed for the calendar year ending with or within the year covered by this return	2a	49			
3a X X X X X X X X X	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
b If "Yes," has it filed a Form 990-T for this year? #"No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X b If "Yes," enter the name of the foreign country. INTED XINGDOM See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X c If "Yes," to line Sa or Sb, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Line Sa or Sb, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Line Sa or Sb, did the organization that was or is a party to a prohibited tax shelter transaction? 5c Line Sa or Sb, did the organization to tax deductibles as charitable contributions? 5c Line Sa or Sb, did the organization to tax deductibles as charitable contributions? 6c X 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," indicate the number of Forms 8282 filed during the year for the organization into the develoar to the value of the goods or services provided? 7c X 7d If "Yes," indicate the number of Forms 8282 filed during the year 7d If the organization received an contribution of qualified intellectual property, did the organization file Form 8999 as required? 7f If the organization receive any tuminums, directly or indirectly, on a personal benefit contract? 77 X 78 Y 89 Sponsoring organization saminatining donor advised funds. 80 Jim section 501(c)(T) organizations make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a d		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
4a Al any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, as country as a bank as a b	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		<u>X</u>
financial account in a foreign country (such as a bank account, securities account, or other financial accounts? b If "Yes," enter the name of the foreign country. ➤ UNITED KINGDOM See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 58 Was the organization a party to a prohibited tax sheler transaction at any time during the tax year? 59 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 50 Dos the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 60 Dos the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 60 Did my taxable party notify the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? 70 Organizations that may receive deductible contributions under section 170(c). 80 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 70 Organization state may receive deductible contributions under section 170(c). 80 If "Yes," did the organization notify the donor of the value of the goods or services provided? 71 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8882? 81 If "Yes," indicate the number of Forms 8282 filed during the year 82 If the organization received a contribution of qualified intellectual property, did the organization file Form 8893 as required? 72 If If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1984 C? 83 Sponsoring organization marks any taxable distributi	b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	O		3b		
b If "Yes," indicate the name of the foreign country: Note in Foreign Earth (surface) the organization aparty for goods and services provided to the payor? To regarization aparty for surface the organization that it was or is a party to a prohibited tax shelter transaction? So if "Yes," in line Sa or 50, bid the organization that it was or is a party to a prohibited tax shelter transaction? So if "Yes," in line Sa or 50, bid the organization line form 8886-77 Bo Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductable as characteristic contributions? Bif "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductable? To regarizations that may receive deductable contributions under section 170(c). Bid lite organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To Vas indicate the number of Forms 8282 filed during the year Did the organization neceive application of the value of the goods or services provided? To Vas if "Yes," indicate the number of Forms 8282 filed during the year Did the organization received a contribution of underectly, to pay premiums on a personal benefit contract? To Vas if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Section 501(c)(7) organizations. Enter: Gross income from ther sources (0) not net amounts due or paid to other sources against amounts due or received from them.) Lite Section 501(c)(29) qualified nonprofit health insurance issuers. In Intilation fees and capital contributions included on Part VIII, line 12 Section 501(c)(29) qua	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			
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til "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c	5a						
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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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b c Enter the amount of reserves any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	11	Section 501(c)(12) organizations. Enter:					
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b	Gross income from other sources (Do not net amounts due or paid to other sources against					
b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b		/	$\overline{}$				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a X The lf "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b			1) 	12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O. 14b			12b				
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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O. 14b							
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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b	а	-			13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15b 17 Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b	_	·					
c Enter the amount of reserves on hand 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O 14b	b						
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b 14b							
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			130		14-		Y
	D	ii res, rias it liled a Form 720 to report triese payments? If "No," provide an explanation in Scheduli	e U			990	(2016)

THE GLOBAL FUND FOR WOMEN INC. 77-0155782 Form 990 (2016) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 22 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 21 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes

iua	Did the organization have local chapters, branches, or affiliates?	10a		Δ
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	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	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			
	in 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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	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		Х
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		
C	tion C Displaceurs			

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	►AK	, AZ	, AR	, CA	CT,	,FL	,GA	HI,	,IL	,KS,	KY,	, М	Α

18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.
	T7

X Own website X Upon request Other (explain in Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records: GENEVIEVE ZARAGOZA - (415) 248-4800

800 MARKET STREET SUITE 700, SAN FRANCISCO

SEE SCHEDULE O FOR FULL LIST OF STATES

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.

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

(A)	(B)	l		((C)		Jour	(D)	(E)	(F)
Name and Title	Average hours per		not c		more) than o s both		Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below	stee or director		id a d		Highest compensated sn.ty.uc	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	line)	Indiv	Instit	Officer	Key e	Highe	Former			
(1) SHARON BHAGWAN ROLLS	2.00	٠,		,,					_	
BOARD CO-CHAIR	2 00	Х	_	Х				0.	0.	0.
(2) BLYTHE MASTERS BOARD CO-CHAIR	2.00	Х		х				0.	0.	_
(3) MARISSA WESELY	2.00	Λ		^				0.	0.	0.
TRESURER	2.00	Х		х				0.	0.	0.
(4) LINDA GRUBER	2.00	<u> </u>							<u></u>	<u></u>
SECRETARY	2.00	х		х				0.	0.	0.
(5) BISI ADELEYE-FAYEMI	2.00	<u> </u>							0.1	
DIRECTOR		Х						0.	0.	0.
(6) CAROLINE BARLERIN	2.00								-	
DIRECTOR		Х						0.	0.	0.
(7) JULIE PARKER BENELLO	2.00									
DIRECTOR		Х						0.	0.	0.
(8) ROXANE DIVOL	2.00									
DIRECTOR		Х						0.	0.	0.
(9) NURGUL DJANAEVA	2.00									
DIRECTOR		Х						0.	0.	0.
(10) AMINA DOHERTY	2.00									
DIRECTOR		Х						0.	0.	0.
(11) LAURIE EMRICH	2.00	1								_
DIRECTOR		Х						0.	0.	0.
(12) KERRY GARDNER	2.00	ļ								
DIRECTOR	2 00	Х						0.	0.	0.
(13) MOZN HASSAN	2.00	. ,							_	_
DIRECTOR	2.00	Х						0.	0.	0.
(14) NITA ING DIRECTOR	2.00	Х						0.	0.	_
(15) ANNE KORNBLUT	2.00	Λ						· ·	0.	0.
DIRECTOR	4.00	Х						0.	0.	0.
(16) MEKALA KRISHNAN	2.00	21	\vdash		\vdash			.		`
DIRECTOR		х						0.	0.	0.
(17) LAYLI MAPARYAN	2.00								•	<u>`</u>
DIRECTOR		х						0.	0.	0.
632007 11_11_16		_								Form 990 (2016)

632007 11-11-16

Part VII Section A. Officers, Directors, Trus	tees. Kev Emi	olov	ees.	and	l Hi	ahes	t C	Compensated Employee	S (continued)				
(A)	(B)		,	((J		(D)	(E)	(F)			
Name and title	Average	Position (do not check more than one						Reportable	Reportable		Fs	timate	ed
Tains and the	hours per		not c , unle					compensation	compensation			nount	
	week	offi	cer ar	nd a d	irecto	r/trus	tee)	from	from related			other	
	(list any	ector						the	organizations			pensa	
	hours for related	or dir	e e			ated		organization	(W-2/1099-MISC	;)		om th	
	organizations	ustee	trust		9	suedu		(W-2/1099-MISC)			•	anizat d relat	
	below	lual tr	tional		ploye	st con	_					anizati	
	line)	Individual trustee or director	Institutional trustee	Officer	sey employee	Highest compensated employee	Former				o, g.	inzaci	0110
(18) TABARA NDIAYE	2.00				_								
DIRECTOR		Х						0.	(0.			0.
(19) MARIA NUNEZ	2.00												
DIRECTOR		Х						0.		0.			0.
(20) REBEKKA VAN ROEMBURG	2.00												
DIRECTOR		Х						0.	(0.			0.
(21) JURIMA WERNECK	2.00												
DIRECTOR		Х						0.	(0.			0.
(22) MUSIMBI KANYORO	40.00												
PRESIDENT AND CEO	26.00	Х		Х				256,750.	(0.	3	1,1	02.
(23) ELIZABETH SCHAFFER CFO/COO (THRU 8/17)	36.00	1		х				166 562		۱. د	2	7 0	77
(24) CHANDRA ALEXANDRE	40.00			^				166,563.	'	٠.		1,0	77.
VP OF DEVELOPMENT	40.00	1			x			164,000.		۱. د		8 9	96.
(25) JANE SLOANE	40.00							101/0001				<u> </u>	
VP OF PROGRAMS (THRU 8/16)						x		136,619.		o.		9,0	31.
(26) CLARE WINTERTON	40.00											-	
VP OF PROGRAMS AND INNOVATION						Х		136,196.		0.		5,6	
1b Sub-total								860,128.		0.		2,6	
c Total from continuation sheets to Part VI								402,325.		0.		$\frac{3,1}{5}$	
d Total (add lines 1b and 1c)							<u> </u>	1,262,453.		0.	Τ0.	5,8	65.
2 Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	a ac	ove	e) wn	o re	eceived more than \$100,	000 of reportable				8
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director, or tru	ıste	e. ke	v en	olan	vee.	or	highest compensated er	nplovee on	ſ			
line 1a? If "Yes," complete Schedule J for s										- 1	3		х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	edule	J 1	for such individual	-	[4	X	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	plete Schedule	e J f	or st	ıch ı	oers	on .					5		X
Section B. Independent Contractors					_								
Complete this table for your five highest contains the appropriation. Borney to appropriate form.										nsat	ion fro	om	
the organization. Report compensation for the organization (A)	ne calendar ye	eare	eriair	ig w	itri C	or wi	LITIII	(B)	ear.		(0	••	
Name and business	address	NO	ONE	3				Description of s	ervices	С	ompe		n
2 Total number of independent contractors (ii	ncluding but n	ot lir	nited	d to	thos	se lis	ted	above) who received me	ore than				

\$100,000 of compensation from the organization ► 0

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 THE GLOBA	AL FUND	FC	R	WO	ME	N	IN	C.	77-015	5782
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				loyee		the	organizations	compensation
	(list any hours for	lirect				d em b		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e 0r (stee			nsateo		(***2/1099*****100)		and related
	organizations	Individual trustee or director	Institutional trustee) yee	Highest compensated employee				organizations
	below	vidual	tutior	Je .	Key employee	nest c	ner			
	line)	lndi	Insti	Officer	Key	High	Former			
(27) PEIYAO CHEN	40.00									
LEAD, LEI AND GRANTS OPERATIONS						X		131,850.	0.	15,954.
(28) CATHERINE KING	40.00									
LEAD ADVOCACY						Х		135,410.	0.	18,070.
(29) AMELIA WU	40.00								_	
LEAD FUNDRAISING OPERATIONS						Х		135,065.	0.	29,168.
		-								
		_								
			-		_	\vdash				
	I		l	l	<u> </u>	L				
Total to Dout VIII. Continu A. line 1								402,325.		63,192.
Total to Part VII, Section A, line 1c								±04,34J•		03,134

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
ran uni		Membership dues		53,530.				
<u>0</u>		Fundraising events		12,351.				
ifts ar A		Related organizations						
s, mik		Government grants (contributi						
Sig		All other contributions, gifts, gran						
her		similar amounts not included above		14,702,479.				
Ē	g	Noncash contributions included in lines		297,595.				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f			14,768,360.			
				Business Code				
ø	2 a	FEES FOR SERVICES		900099	632,619.	632,619.		
Program Service Revenue	b							
Ser	С							
ž Š	d							
Beg	е	•						
Prc		All other program service reve	nue					
	g	-			632,619.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		>	292,252.			292,252.
	4	Income from investment of tax						
	5	Royalties	. <u></u>	>				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
		Less: rental expenses						
	С	Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	3,425,005.					
	b	Less: cost or other basis						
		and sales expenses	3,111,017.					
	С	Gain or (loss)	313,988.					
	d	Net gain or (loss)		. <u></u>	313,988.			313,988.
ø	8 a	Gross income from fundraising	g events (not					
ň		including \$12	,351. of					
eve		contributions reported on line	1c). See					
<u>ج</u> ج		Part IV, line 18	a	11,160.				
Other Reven	b	Less: direct expenses	b	6,215.				
O	С	Net income or (loss) from fund	Iraising events	>	4,945.			4,945.
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	a					
	b	Less: direct expenses	b	0.				
	С	Net income or (loss) from gam	ing activities		3,461.			3,461.
	10 a	Gross sales of inventory, less	returns					
		and allowances	a					
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sales	s of inventory	>				
		Miscellaneous Revenue		Business Code				
	11 a	INSURANCE CLAIM PROCEED	os	900099	43,000.			43,000.
	b							
	С							
		All other revenue						
	е	Total. Add lines 11a-11d		>	43,000.			
	12	Total revenue. See instructions.		>	16,058,625.	632,619.	0	. 657,646.

Form 990 (2016) THE GLOBAL FURTHER Part IX Statement of Functional Expenses

<u>Secti</u>	on 501(c)(3) and 501(c)(4) organizations must comp		er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon	nse or note to any line in	this Part IX		
	oot include amounts reported on lines 6b, 3b, 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	62,180.	62,180.		
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		10 101 000		
	individuals. See Part IV, lines 15 and 16	10,134,922.	10,134,922.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	655 000	005 000	165 400	100 510
	trustees, and key employees	655,288.	297,288.	165,488.	192,512.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 006 040	1 544 060	F.C.C. 0.0.1	605 000
7	Other salaries and wages	3,006,842.	1,744,862.	566,091.	695,889.
8	Pension plan accruals and contributions (include	120 266	74 077	24 507	20 760
_	section 401(k) and 403(b) employer contributions)	130,266.	74,977.	24,527.	30,762. 95,939.
9	Other employee benefits	423,080.		108,225.	95,939.
10	Payroll taxes	269,268.	147,843.	54,803.	66,622.
11	Fees for services (non-employees):				
	Management	4 020		4 020	
	Legal	4,938. 57,748.		4,938.	7 560
	Accounting	5/,/48.		50,188.	7,560.
	Lobbying	40.005			40 00E
	Professional fundraising services. See Part IV, line 17	49,995. 52,057.		52,057.	49,995.
	Investment management fees	32,037.		34,037.	
g	Other. (If line 11g amount exceeds 10% of line 25,	467,297.	373,549.	40,703.	53,045.
40	column (A) amount, list line 11g expenses on Sch O.)	36,191.	19,613.	5,628.	10,950.
12	Advertising and promotion	297,336.	31,703.	94,599.	171,034.
13 14	Office expenses	249,485.	26,882.	200,220.	22,383.
15	Information technology	245,405.	20,002.	200,2201	22,303.
16	Royalties	429,515.	2,000.	427,015.	500.
17	Occupancy	350,291.	197,076.	74,911.	78,304.
18	Payments of travel or entertainment expenses	33072310	23770700	7 1 / 3 1 1 1	7075011
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	30,147.	21,179.	4,030.	4,938.
20	Interest	20,2270	,	2,0000	2,5500
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	79,183.		79,183.	
23	Insurance	16,012.		16,012.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	ALLOCATION OF SHARED CO	0.	770,238.	-1,106,313.	336,075.
b	THE CONTROL OF STREET CO		,2001	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	322,0.30
c					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	16,802,041.	14,123,228.	862,305.	1,816,508.
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)				
					000

Form 990 (2016)

Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or no	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			4,487,659.	1	3,373,535.
	2	Savings and temporary cash investments	916,417.	2	3,253,189.		
	3	Pledges and grants receivable, net			8,271,401.	3	8,629,230.
	4	Accounts receivable, net	112,664.	4	456,614.		
	5	Loans and other receivables from current and for			•		
	•	trustees, key employees, and highest compens		· · · · · · · · · · · · · · · · · · ·			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual					
	•	section 4958(f)(1)), persons described in section	•	,			
		employers and sponsoring organizations of sec					
.		employees' beneficiary organizations (see instr)		·		6	
Assets	7	Notes and loans receivable, net				7	
Ass	8					8	
	9	Inventories for sale or use			270,336.	9	303,598
		1 1	 I I		210,3301	9	303,330
	iva	Land, buildings, and equipment: cost or other	100	312,262.			
	L	basis. Complete Part VI of Schedule D	10a	135,763.	250,646.	10c	176 /99
		Less: accumulated depreciation		· · · · · · · · · · · · · · · · · · ·	11,373,003.	11	176,499 12,237,628
	11	Investments - publicly traded securities			11,373,003.		12,231,020
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets	64 025	14	20 600		
	15	Other assets. See Part IV, line 11	64,025.	15	39,680		
	16	Total assets. Add lines 1 through 15 (must equ			25,746,151.	16	28,469,973
	17	Accounts payable and accrued expenses	439,589.	17	477,619		
	18	Grants payable	4,365,707.	18	7,110,411		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to current and forme					
∄		key employees, highest compensated employee	es, and di	squalified persons.			
Liabilities		Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line	s 17-24). (Complete Part X of			
		Schedule D		98,621.	25	112,737. 7,700,767.	
	26	Total liabilities. Add lines 17 through 25			4,903,917.	26	7,700,767.
		Organizations that follow SFAS 117 (ASC 958		here ▶ X and			
Se		complete lines 27 through 29, and lines 33 and 34.					5 5 1 1 2 2 3 3
ŭ	27	Unrestricted net assets			6,112,300.	27	7,511,996.
3ale	28	Temporarily restricted net assets			10,315,588.	28	8,842,864.
힐	29	Permanently restricted net assets			4,414,346.	29	4,414,346.
ᆵ		Organizations that do not follow SFAS 117 (A	SC 958),	check here ▶ □			
Net Assets or Fund Balances		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or e	quipment	fund		31	
et A	32	Retained earnings, endowment, accumulated in	ncome, or	other funds		32	
ž	33	Total net assets or fund balances			20,842,234.	33	20,769,206.
	34	Total liabilities and net assets/fund balances			25,746,151.	34	28,469,973.

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			8,6	
2	Total expenses (must equal Part IX, column (A), line 25)	2	16	,80	2,0	41.
3	Revenue less expenses. Subtract line 2 from line 1	3		-74	3,4	16.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20	,84	2,2	34.
5	Net unrealized gains (losses) on investments	5		67	0,3	88.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	20	,76	9,2	<u>06.</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?					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					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	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,					
	review, or compilation of its financial statements and selection of an independent accountant?				X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit				
	Act and OMB Circular A-133?			За		Х
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 in Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2016)

632012 11-11-16

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** THE GLOBAL FUND FOR WOMEN INC. 77-0155782 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	15684724.	16092741.	13064122.	15169795 .	14768360.	74779742.	
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	15684724.	16092741.	13064122.	15169795.	14768360.	74779742.	
	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)						10769899.	
6	Public support. Subtract line 5 from line 4.						64009843.	
	ction B. Total Support			ı		ı		
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
	Amounts from line 4	15684724.	16092741.	13064122.	15169795.	14768360.		
	Gross income from interest,							
Ŭ	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources	315.977.	292.453.	299.043.	224.652.	292.252.	1424377.	
۵	Net income from unrelated business	313/3//	232,1331	233 / 0131	221,0321	23272320	11213774	
3	activities, whether or not the							
	business is regularly carried on	-124,762.	-252 408.	8,032.	8,386.	8 406.	-352,346.	
10	Other income. Do not include gain	121,702.	232,400.	0,032.	0,300.	0,400.	332,340.	
10	or loss from the sale of capital							
	assets (Explain in Part VI.)					43 000	43,000.	
44	Total support. Add lines 7 through 10						75894773.	
	Gross receipts from related activities,	eta (eco inetruetio	no)				,065,834.	
	First five years. If the Form 990 is fo		,	d fourth or fifth to			,,005,054.	
13	-	•			•		ightharpoonup	
Sec	organization, check this box and stop	c Support Per	centage				······	
	Public support percentage for 2016 (l		_	olumn (fl)		14	84.34 %	
							22 22	
104	16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and							
_	stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
L		•		•		•		
47-	and stop here. The organization qual							
17a	10% -facts-and-circumstances test	-						
	and if the organization meets the "fac		•	•		•		
	meets the "facts-and-circumstances"							
b	10% -facts-and-circumstances test	-						
	more, and if the organization meets the				-		e	
	organization meets the "facts-and-circ			•	,		>	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b			s \[\bullet \] or 990-F7) 2016	

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.)

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subratiline 7c from line 6) Section B. Total Support	Secti	ion A. Public Support						
membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or bus iness under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included in lines 1, 2, and 3 received from disqualified persons by Amounts included in lines 1, 2, and 3 received from their than disqualified persons that exceed the greater of \$5.000 or 15 of the amount on line 13 for the year. C Add lines 7 and 7b 8 Public support. (Subtractive to line 1) 9 Amounts from line 6 10 Gross income from interest, dividends, payments received on securities loans, ronts, royalties and income from similar sources by Unrelated business taxable income (less section 511 taxes) from businesses activities not included in line 10b, whether or not the sub of capital assets (Explain in Part VI.) 10 Total support. (Subtractive to line 10b, whether or not the sub of capital assets (Explain in Part VI.) 11 Total support to control to loude gain or loss from the sale of capital assets (Explain in Part VI.) 12 Total support. (Applices 2, 11, 1 and 12)	Calenda	ar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
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2 Gross receipts from admissions, merchandes sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons but Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the grade of slow, or 14 of the amount on line 15 er the year country or 15 of the amount on line 15 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 16 er the year country or 15 of the amount on line 6 er the year country or 15 of the amount on line 6 er the year country or 15 of the amount of line 16 er the year country or 15 of the amount of line 16 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the amount of line 10 er the year country or 15 of the year country or 15 of the	m	nembership fees received. (Do not						
merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	in	nclude any "unusual grants.")						
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14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,								<u> </u>
· · · · · · · · · · · · · · · · · · ·			-			-		
Section C. Computation of Public Support Percentage								<u></u>
					al (f)\		45	
15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage for 2015 Cabactula A Part III line 15								<u>%</u>
16 Public support percentage from 2015 Schedule A, Part III, line 15							16	%
		•			20 12 column (fl)		17	
, , , , , , , , , , , , , , , , , , , ,								<u>%</u> %
18 Investment income percentage from 2015 Schedule A, Part III, line 17								
								\
more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization • 33 1/3% support tests = 2015. If the organization did not check a box on line 14 or line 193 and line 16 is more than 33 1/3% and								
b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 (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.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
_		
4c		
-		
5a		
- Eh		
5b 5c		
30		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		<u> </u>

	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 in (b) and (c)	11a		
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	stion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
4	Did the exemination provide to each of its supported exeminations, but he lest day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b c	The organization is the parent of each of its supported organizations. Complete line 3 below.			
2	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructional contents). Activities Test. Answer (a) and (b) below.	uctions).	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	140
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
b	trustees of each of the supported organizations? <i>Provide details in Part VI</i> . Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
IJ	of its supported organizations? If "Ves." describe in Part VI, the role played by the organization in this regard	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete Sec	tions 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	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-functiona	lly integrated	d Type III supporting orga	nization (see
	instructions).	-		

Schedule A (Form 990 or 990-EZ) 2016

Par	t V	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)		
Secti	on D -	Distributions		· · · · · · · · · · · · · · · · · · ·	Current Year	
1	Amou	nts paid to supported organizations to accomplish exer	mpt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported					
	organi	izations, in excess of income from activity				
3	Admir	nistrative expenses paid to accomplish exempt purpose	s of supported organizations	3		
4	Amou	nts paid to acquire exempt-use assets				
5	Qualif	ied set-aside amounts (prior IRS approval required)				
6	Other	distributions (describe in Part VI). See instructions				
7	Total	annual distributions. Add lines 1 through 6				
8	Distrib	outions to attentive supported organizations to which th	ne organization is responsive			
	(provi	de details in Part VI). See instructions				
9	Distrib	outable amount for 2016 from Section C, line 6				
10	Line 8	amount divided by Line 9 amount		.		
Secti	on E -	Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016	
1	Distrib	outable amount for 2016 from Section C, line 6				
2		rdistributions, if any, for years prior to 2016 (reason-				
		ause required- explain in Part VI). See instructions				
3	Exces	s distributions carryover, if any, to 2016:				
а						
b						
С	From	2013				
d	From	2014				
е	From	2015				
f	Total	of lines 3a through e				
g	Applie	ed to underdistributions of prior years				
h	Applie	ed to 2016 distributable amount				
<u>i</u>	Carry	over from 2011 not applied (see instructions)				
j	Rema	inder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distrib	outions for 2016 from Section D,				
	line 7:	\$				
а	Applie	ed to underdistributions of prior years				
b	Applie	ed to 2016 distributable amount				
С	Rema	inder. Subtract lines 4a and 4b from 4				
5		ining underdistributions for years prior to 2016, if				
	any. S	Subtract lines 3g and 4a from line 2. For result greater				
		zero, explain in Part VI. See instructions				
6		ining underdistributions for 2016. Subtract lines 3h				
	and 4	b from line 1. For result greater than zero, explain in				
		/I. See instructions				
7		ss distributions carryover to 2017. Add lines 3j				
	and 4					
8	Break	down of line 7:				
a	F	- fram 0010				
		ss from 2013				
		ss from 2014				
		ss from 2015				
е	Exces	s from 2016				

Schedule A (Form 990 or 990-EZ) 2016

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

2016

OMB No. 1545-0047

Name of the organization

Employer identification number

THE GLOBAL FUND FOR WOMEN INC. 77-0155782

Organization type (check one):

Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Check if your organization is covered by the General Rule or a Special Rule . Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule						
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules						
sections 509(a)(1) a any one contributo	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
year, total contribu	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, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

THE GLOBAL FUND FOR WOMEN INC.

77-0155782

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,562,715</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$	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		\$ <u>436,500</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$677,565.	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_		\$ 602,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 2,300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

THE GLOBAL FUND FOR WOMEN INC.

77-0155782

Part I	Contributors (See instructions). Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	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
8		\$ 2,400,000.	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Nume, address, and Zir + 4	\$	Person Payroll Ocomplete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

THE GLOBAL FUND FOR WOMEN INC.

77-0155782

(a) No. (b) Description of noncash property given S. (c) FMV (or estimate) (See instructions) (a) No. (b) Part I (a) No. (c) (c) FMV (or estimate) (See instructions) (b) FMV (or estimate) (See instructions) (c) Date received (d) Date received (e) FMV (or estimate) (See instructions) (d) Date received (e) FMV (or estimate) (See instructions) (f) Date received (g) FMV (or estimate) (See instructions) (g) Date received (g) FMV (or estimate) (See instructions) (g) Date received	Part II	Noncash Property (See instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (d) Date received (e) No. No. Tom Description of noncash property given (a) No. Tom Description of noncash property given (b) Date received (c) FMV (or estimate) (See instructions) (d) Date received (d) Date received (d) Date received (see instructions) (d) Date received (d) Date received (e) FMV (or estimate) (See instructions) (f) Date received (g) Date received (g) FMV (or estimate) (See instructions) (g) Date received	No. from		FMV (or estimate)	
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No. from Part I (b) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) Date received (a) (b) FMV (or estimate) (See instructions) (b) FMV (or estimate) (See instructions) (d) Date received			\$	
(a) No. from Part I (b) (c) FMV (or estimate) (See instructions) Date received	No. from		FMV (or estimate)	
No. from Description of noncash property given (See instructions) Cool FMV (or estimate) Date received			\$	
	No. from		FMV (or estimate)	
			\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization Employer identification number THE GLOBAL FUND FOR WOMEN INC. 77-0155782 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III 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 C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (see separate instructions), then				
•	Section 501(c)(4), (5), or (6) organization	tions: Complete Part III.			
Nan	ne of organization	·		Empl	oyer identification number
	THE GLO	BAL FUND FOR WOM	EN INC.		77-0155782
Pa	art I-A Complete if the org	janization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organize Political campaign activity expendite Volunteer hours for political campa	tures			
Pa	art I-B Complete if the org	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	 \$	
	Enter the amount of any excise tax				
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
_ k	If "Yes." describe in Part IV.				
Pa	art I-C∣ Complete if the org	ganization is exempt und	er section 501(c),	except section 501(c	<u>)(3).</u>
1	Enter the amount directly expended	d by the filing organization for se	ction 527 exempt funct	tion activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to ot	her organizations for se	ection 527	
	exempt function activities			 ▶ \$	
3				,	
	line 17b			> \$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en	• • •	•	•	• •
	made payments. For each organiza		0 0		·
	contributions received that were pr			•	e segregated fund or a
	political action committee (PAC). If	additional space is needed, prov T	ride information in Part	IV.	T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Schedule C (Form 990 or 990-EZ) 2016

851,979.

1,277,969.

224,169.

198,255.

244,738.

c Total lobbying expenditures

d Grassroots nontaxable amounte Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

184,817.

Schedule C (Form 990 or 990-EZ) 2016 THE GLOBAL FUND FOR WOMEN INC. 77-01557 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line answered "Yes."	ing the year, did the filing organization attempt to influence foreign, national, state or al legislation, including any attempt to influence public opinion on a legislative matter eferendum, through the use of: unteers? did a dstaff or management (include compensation in expenses reported on lines 1c through 1i)? did advertisements? lilings to members, legislators, or the public? lolications, or published or broadcast statements? lilings to members, legislators, or the public? lolications, or published or broadcast statements? lilings to members, legislators, their staffs, government officials, or a legislative body? lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? les demonstrations, seminars, conventions, speeches, lectures, or any similar means? les demonstrations, seminars, conventions, speeches, lectures, or any similar means? les demonstrations in line 1 cause the organization to be not described in section 501(c)(3)? les, demonstrations in line 1 cause the organization to be not described in section 501(c)(3)? les, demonstrations in line 1 cause the organization managers under section 4912 les filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Sol1(c)(6). Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Sol (c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Longe of the section 527(f) tax was paid). Tent year The properties of the section 527(f) tax was paid). Tent year The properties of the section 527(f) tax was paid).	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Pald staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Raillies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1 c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did if tile Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 1 Uher organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 In notices were sent and the a			1)	(I	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, lines answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	al legislation, including any attempt to influence public opinion on a legislative matter eferendum, through the use of: uniteers? d staff or management (include compensation in expenses reported on lines 1c through 1i)? dia advertisements? lings to members, legislators, or the public? oblications, or published or broadcast statements? mits to other organizations for lobbying purposes? oct contact with legislators, their staffs, government officials, or a legislative body? lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? lere activities? al. Add lines 1c through 1i the activities in line 1 cause the organization to be not described in section 501(c)(3)? fees," enter the amount of any tax incurred under section 4912 fees," enter the amount of any tax incurred under section 4912 fees," enter the amount of any tax incurred under section 4912 fees," enter the amount of any tax incurred under section 4912 fees," enter the amount of any tax incurred under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes Tomplete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes The organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 2a, assessments and similar amounts from members 1 enesses for which the section 527(f) tax was paid). rent year ryover from last year	local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(8)? b If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, did If lile Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization make only in-house lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditure expenditure set year 2a b Carryover from last year c Total 3 Aggregate amount reported in section 603			Yes	No	Amo	ount
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		c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Total Supplemental Information Ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	501(c)(6). Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 3 art III-B Complete if the 501(c)(6) and if answered "Yes 1 Dues, assessments and siming 2 Section 162(e) nondeductible	nly in-house lobbying expenditures of \$2,000 or less? carry over lobbying and political campaign activity expenditures from e organization is exempt under section 501(c)(4), sectienther (a) BOTH Part III-A, lines 1 and 2, are answere s." lar amounts from members e lobbying and political expenditures (do not include amounts of po	the prior year? ion 501(c)(5 d "No," OR	2 3), or sec (b) Part	etion	
b Carryover from last year 2b	al	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	501(c)(6). 1 Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 2 art III-B Complete if the 501(c)(6) and if answered "Yes 1 Dues, assessments and similar 2 Section 162(e) nondeductible expenses for which the sec a Current year	nly in-house lobbying expenditures of \$2,000 or less? be carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section to a section is exempt under section 501(c)(4), section to a section is exempt under section 501(c)(4), section to a section 501(c)(4), section 501(the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
		If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	501(c)(6). Were substantially all (90% of 2) Did the organization make of 3 Did the organization agree to 2 art III-B Complete if the 501(c)(6) and if answered "Yes 1 Dues, assessments and similar 2 Section 162(e) nondeductible expenses for which the sec a Current year	nly in-house lobbying expenditures of \$2,000 or less? be carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section to a section is exempt under section 501(c)(4), section to a section is exempt under section 501(c)(4), section to a section 501(c)(4), section 501(the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
	gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	501(c)(6). Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 3 Did the organization agree to 3 Did the organization agree to 4 Till-B Complete if the 501(c)(6) and if 4 answered "Yes 1 Dues, assessments and simi 2 Section 162(e) nondeductible expenses for which the sec a Current year b Carryover from last year c Total	nly in-house lobbying expenditures of \$2,000 or less? o carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section to the control of the control	the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
		expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	501(c)(6). 1 Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 2 Dart III-B Complete if the 501(c)(6) and if answered "Yest 1 Dues, assessments and simi 2 Section 162(e) nondeductible expenses for which the section 162(e) and 162(e) nondeductible expenses for which the section 162(e) and 162(e) nondeductible expenses for which the section 162(e) and 162(e) nondeductible expenses for which the section 162(e) and 162(e) nondeductible expenses for which the section 162(e) and 162(e	nly in-house lobbying expenditures of \$2,000 or less? c carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the either (a) BOTH Part III-A, lines 1 and 2, are answere so." lar amounts from members to lobbying and political expenditures (do not include amounts of position 527(f) tax was paid). in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
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expenditure next year?	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess es the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year?	ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	501(c)(6). Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 3 Did the organization agree to 4 TIII-B Complete if the 501(c)(6) and if answered "Yes 1 Dues, assessments and simi 2 Section 162(e) nondeductible expenses for which the sec a Current year b Carryover from last year c Total Aggregate amount reported 1 If notices were sent and the does the organization agree expenditure next year?	nly in-house lobbying expenditures of \$2,000 or less? c carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the first that the control of	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3), or sec (b) Part	etion	
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does the organization agree to carryover to the reasonable estimate of pendeductible labbying and political		Taxable amount of lobbying and political expenditures (see instructions) To it IV Supplemental Information Supplemental Information Find the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	Were substantially all (90% of Did the organization make of Did the organization agree to the substantially all (90% of Did the organization agree to the substantial that is answered "Yes Dues, assessments and simit Section 162(e) nondeductible expenses for which the second Current year Carryover from last year Total Aggregate amount reported	nly in-house lobbying expenditures of \$2,000 or less? c carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the either (a) BOTH Part III-A, lines 1 and 2, are answere so." lar amounts from members to lobbying and political expenditures (do not include amounts of position 527(f) tax was paid). in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	Solic)(6). Were substantially all (90% of Did the organization make of Did the organization agree to Cart III-B Complete if the Solic)(6) and if answered "Yest Dues, assessments and similar Section 162(e) nondeductible expenses for which the section 162(e) represents the Carryover from last year to Carryover from last year to Total Aggregate amount reported If notices were sent and the	nly in-house lobbying expenditures of \$2,000 or less? c carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the case of	the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess es the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	Were substantially all (90% of Did the organization make of Did the organization agree to art III-B Complete if the 501(c)(6) and if answered "Yes Dues, assessments and similar Section 162(e) nondeductible expenses for which the sec a Current year b Carryover from last year c Total Aggregate amount reported If notices were sent and the does the organization agree	nly in-house lobbying expenditures of \$2,000 or less? be carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 101(c)(4), sect	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3), or sec (b) Part	etion	
expenditure next year?	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess es the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year?		Were substantially all (90% of Did the organization make of Did the organization agree to art III-B Complete if the 501(c)(6) and if answered "Yes Dues, assessments and similar Section 162(e) nondeductible expenses for which the sec a Current year b Carryover from last year c Total Aggregate amount reported If notices were sent and the does the organization agree expenditure next year?	nly in-house lobbying expenditures of \$2,000 or less? c carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the first that the control of	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3), or sec (b) Part	etion	
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expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	ortices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess set the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year? A Supplemental Information		501(c)(6). 1 Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 2 Total 2 Section 162(e) nondeductible expenses for which the s	nly in-house lobbying expenditures of \$2,000 or less? o carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 101(c)(4), secti	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3 5), or sec (b) Part 2 2 2 2 2 3 3 4 5 5	tion III-A, line	
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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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE GLOBAL FUND FOR WOMEN INC.

Employer identification number 77-0155782

Part	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in	•	
	are the organization's property, subject to the organization's		
	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
Par	impermissible private benefit? t II Conservation Easements. Complete if the org		
	Purpose(s) of conservation easements held by the organization		Tarry, mic r.
•	Preservation of land for public use (e.g., recreation or e	`	storically important land area
	Protection of natural habitat	. —	rtified historic structure
	Preservation of open space	r reconvacion or a co	Timed moterno est detare
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	-		•
С	Number of conservation easements on a certified historic stru		
	Number of conservation easements included in (c) acquired a		
	listed in the National Register		2d
	Number of conservation easements modified, transferred, rel		
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	_
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserve	ation easements during the year
	> \$		
	Does each conservation easement reported on line 2(d) abov	•	
	In Part XIII, describe how the organization reports conservation	·	·
	include, if applicable, the text of the footnote to the organizationservation easements.	tion's illiancial statements that describes	the organization's accounting for
Parl		f Art. Historical Treasures. or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public ext	"	,
	the text of the footnote to its financial statements that descri		,
	If the organization elected, as permitted under SFAS 116 (AS		at and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	• •	
	relating to these items:	•	71
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
			L 4
	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1		
	Revenue included on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·	> \$
			. .

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

	t III Organizations Maintaining C	ollections of Art			er Simi		Contin		age Z
	Using the organization's acquisition, accession								
•	(check all that apply):	in, and other records	, or containy or the h	onowing that are a	oigi iiii oai	11 400 01 110 0	Ollootion	101110	,
а	Public exhibition	d	I oan or excl	nange programs					
b	Scholarly research	e	Other	iange pregrame					
c	Preservation for future generations	J							
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's ex	empt pui	nose in Part	XIII.		
5	During the year, did the organization solicit or						,		
•	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang								
	reported an amount on Form 990, Par		3			,	,		
1a	Is the organization an agent, trustee, custodia	an or other intermedia	ary for contributions	or other assets no	t include	d			
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a								
		•	· ·				Amount	:	
С	Beginning balance				1	С			
d	Additions during the year					d			
	Distributions during the year					е			
f	Ending balance				1	f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for escrow or cu	stodial account liab	oility?		Yes		No
	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete in	the organization ans	swered "Yes" on Fo	rm 990, Part IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Thr	ee years back	(e) Four	years	back
1a	Beginning of year balance	11,480,114.	12,765,695.	11,609,265	. 11	.,357,206.	10,	411,	660.
b	Contributions	208,637.	-46,334.	1,190,963		210,820.		3,	846.
С	Net investment earnings, gains, and losses	1,265,408.	-241,315.	518,858	. 1	.,715,778.	1,	386,	465.
d	Grants or scholarships	215,000.	233,000.	200,000		223,000.		175,	258.
е	Other expenditures for facilities								
	and programs	113,237.	764,932.	306,286	. 1	.,407,532.		229,	706.
f	Administrative expenses	43,524.		47,105		44,007.			875.
g	End of year balance	12,582,398.	11,480,114.	12,765,695	. 11	,609,265.	11,	359,	132.
2	Provide the estimated percentage of the curr		(line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	56.00	_%						
b	Permanent endowment ► 35.00	%							
С	Temporarily restricted endowment								
	The percentages on lines 2a, 2b, and 2c shou								
За	Are there endowment funds not in the posses	ssion of the organizat	tion that are held an	d administered for	the orga	nization	Г		
	by:							Yes	No
	(i) unrelated organizations						3a(i)		X
							3a(ii)		X
	If "Yes" on line 3a(ii), are the related organization						3b		
4 Dar	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		vment funds.						
Pai			Death W. Barridge O	F 000 D1	/ l' 40				
	Complete if the organization answered								
	Description of property	(a) Cost or ot basis (investm			Accumu lepreciat		(d) Book	k valu	е
	Land	,	Dasis (Outlet)	icpi ecial	1011			
	Land								
	Buildings		2	0,898.	5	044.	1 [5 Ω	54.
	Leasehold improvements			7,089.		596.			93.
d	Equipment			4,275.		123.			52.
	Other		•	•	4 4 ,	143.	176	5 <u>4</u>	99.

Schedule D (Form 990) 2016 THE GLOBAL	FUND FOR WOMEN	I INC.	77-0155782	Page
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line	12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Co	ost or end-of-year market v	alue
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line	13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Co	ost or end-of-year market v	alue
(4)				

	Complete if the organization answered fres	on Form 990, Part IV, line	rrc. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Tetel (0.1 (1) 1.5 (200 D 1) (1 (D)); 45)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	DEFERRED RENT	112,737.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	112,737.	

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

Sche	edule D (Form 990) 201	6 THE	GLOBAL	FUND	FOR	WOMEN	INC.		77-	0155782	Page 4
Pai	rt XI Reconcilia	tion of Reve	nue per Au	dited Fi	nancia	al Statemo	ents With	Revenue per Re	turn.		
	Complete if th	e organization a	nswered "Yes	on Form	990, Pa	rt IV, line 12	a.				
1	Total revenue, gains,	and other suppo	ort per audited	financial	stateme	nts			1	16,705	,803.
2	Amounts included or	line 1 but not or	n Form 990, P	art VIII, lin	e 12:						
а	Net unrealized gains	(losses) on inves	tments				2a	670,388.			
b	Donated services and	use of facilities					2b	22,632.			
С	Recoveries of prior ye	ear grants					2c				
d	Other (Describe in Pa	rt XIII.)					2d	6,215.			
е	Add lines 2a through	2d							2e	699	,235.
3	Subtract line 2e from	line 1							3	16,006	<u>,568.</u>
4	Amounts included or	Form 990, Part	VIII, line 12, b	ut not on I	ine 1:						
а	Investment expenses	not included on	Form 990, Pa	art VIII, line	7b		4a	52,057.			
b	Other (Describe in Pa	rt XIII.)					4b				
С	Add lines 4a and 4b								4c		<u>,057.</u>
5	Total revenue. Add lir	nes 3 and 4c. (TI	his must equal	Form 990	. Part I.	line 12.)			5	16,058	,625.
Pa	rt XII Reconcilia	tion of Expe	nses per A	udited F	inanc	ial Statem	nents With	n Expenses per F	Retur	n.	
	Complete if th	e organization a	nswered "Yes	on Form	990, Pa	rt IV, line 12	a.				
1	Total expenses and le	sses per audite	d financial sta	tements					1	16,778	<u>,831.</u>
2	Amounts included on	line 1 but not or	n Form 990 P	art IX line	25.						

Complete in the organization and voice Tee of the office of active, into 12d.					
1	Total expenses and losses per audited financial statements			1	16,778,831.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	22,632.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	6,215.		
е	Add lines 2a through 2d			2e	28,847.
3	Subtract line 2e from line 1			3	16,749,984.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	52,057.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	52,057.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	16,802,041.
Dart VIII Cumplemental Information					

| Part XIII | Supplemental Information.

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

PART V, LINE 4:

THE ORGANIZATION'S ENDOWMENT CONSISTS OF THREE FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES AND INCLUDES DONOR-RESTRICTED FUNDS. NET ASSETS ASSOCIATED WITH THIS ENDOWMENT ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS. THE ORGANIZATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PRESERVE THE PURCHASING POWER OF THE ENDOWMENT FUND AND AT THE SAME TIME PROVIDE A REGULAR AND GROWING DISTRIBUTION OF FUNDS FOR THE USE OF THE ORGANIZATION, CONSISTENT WITH THE TERMS OF THE ENDOWMENT FUND DISTRIBUTION POLICY AND THE TERMS GOVERNING EACH OF THE INDIVIDUAL ENDOWMENT FUNDS. A BALANCED APPROACH IS TO BE TAKEN BETWEEN RISK,

PRESERVATION OF CAPITAL, INCOME AND GROWTH. THE ORGANIZATION HAS A POLICY

Part XIII | Supplemental Information (continued)

OF APPROPRIATING FOR DISTRIBUTION EACH YEAR AN AMOUNT NOT TO EXCEED SIX

PERCENT OF ITS ENDOWMENT FUND'S AVERAGE ASSET FAIR MARKET VALUE. THE BOARD

OF DIRECTORS MAY REQUEST ALL, A PORTION, OR NONE OF THE APPROPRIATION BE

DISTRIBUTED IN ACCORDANCE WITH THE ENDOWMENT FUND'S PURPOSE AS DEFINED BY

THE ENDOWMENT AGREEMENT OR APPLICABLE BOARD RESOLUTION. ANY PORTION OF THE

DISTRIBUTION NOT APPROPRIATED BY THE BOARD SHALL BE KEPT IN THE ENDOWMENT

FUND, BE GOVERNED BY THE ENDOWMENT INVESTMENT POLICY, AND BE AVAILABLE FOR

FUTURE DISTRIBUTION IN ACCORDANCE WITH THE DISTRIBUTION POLICY.

PART X, LINE 2:

THE GLOBAL FUND FOR WOMEN, INC. IS A NOT-FOR-PROFIT ORGANIZATION, EXEMPT

FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE UNITED STATES

INTERNAL REVENUE CODE (THE CODE), AND CONTRIBUTIONS TO IT ARE TAX

DEDUCTIBLE AS PRESCRIBED BY THE CODE. THE ORGANIZATION IS ALSO EXEMPT FROM

CALIFORNIA INCOME TAX UNDER SECTION 23701D OF THE CALIFORNIA REVENUE AND

TAXATION CODE. THERE IS NO UNRELATED BUSINESS INCOME TAX FOR THE YEARS

ENDED JUNE 30, 2017 AND 2016; AS SUCH, NO PROVISION FOR INCOME TAXES HAS

BEEN REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS.

THE ORGANIZATION HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A

PRIVATE FOUNDATION UNDER SECTION 509(A)(1) AND HAS BEEN DESIGNATED AS A

"PUBLICLY SUPPORTED" ORGANIZATION UNDER SECTION 170(B)(1)(A)(VI) OF THE

CODE.

THE ORGANIZATION ASSESSES ITS ACCOUNTING FOR UNCERTAINTIES IN INCOME TAXES

RECOGNIZED IN ITS FINANCIAL STATEMENTS AND PRESCRIBES A THRESHOLD OF

MORELIKELYTHANNOT FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN

OR EXPECTED TO BE TAKEN IN A TAX RETURN.

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

2016
Open to Public Inspection

Name of the organization

THE GLOBAL FUND FOR WOMEN INC.

Employer identification number

77-0155782

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 Yes 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 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region (e) If activity listed in (d) (f) Total employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region independent gram services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN 0 0 GRANTMAKING 449,427. EAST ASTA AND THE PACIFIC 0 0 GRANTMAKING 1,246,190. EUROPE (INCLUDING ICELAND AND GREENLAND) 0 0 GRANTMAKING 326,420. MIDDLE EAST AND NORTH AFRICA GRANTMAKING 0 0 772,927. NORTH AMERICA GRANTMAKING (CANADA AND MEXICO) 0 0 1,720,020. RUSSIA AND THE NEWLY INDEPENDENT STATES 0 0 GRANTMAKING 375,624.

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

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GRANTMAKING

GRANTMAKING

Schedule F (Form 990) 2016

820,800.

3,060,123.

8,771,531.

1,363,391.

10,134,922.

and 3b)

SOUTH AMERICA

SOUTH ASIA

3 a Sub-total ______ **b** Total from continuation

sheets to Part I

Totals (add lines 3a

Schedule F (Form 990) Part I Continuation	chedule F (Form 990) THE GLOBAL FUND FOR WOMEN INC. 77-0155782 Page 1 Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)										
(a) Region	(b) Number of offices in the 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	GRANTMAKING		1,363,391.						
Totals					1,363,391.						

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		CENTRAL AMERICA						
		AND THE CARIBBEAN	GENERAL SUPPORT	43,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	EVENT	8,500.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
			TRAVEL	6,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	GENERAL SUPPORT	23,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
			EVENT	11,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CRISIS	15 000	WIRE TRANSFER	0.		
		NND INE CAKIBBEAN	CUIDID	15,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
2 Enter total number of		AND THE CARIBBEAN	CRISIS ecognized as charities by the		WIRE TRANSFER	0.		

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

10

Schedule F (Form 990) 2016

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)
		CENTRAL AMERICA						
		AND THE CARIBBEAN	GENERAL SUPPORT	43,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	CRISIS	15,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	EVENT	50,000.	WIRE TRANSFER	0.		
				,				
		CENTRAL AMERICA AND THE CARIBBEAN	CRISIS	25 000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GENERAL SUPPORT	43 000	WIRE TRANSFER	0.		
		IND THE CANTEDDAM	CHALIKI BOTTOKI	45,000.	WIRD TRANSPER			
		CENTRAL AMERICA AND THE CARIBBEAN	CENEDAL CUDDODE	10 000	WIRE TRANSFER	0.		
		AND THE CARIBBEAN	GENERAL SUPPORT	10,000.	WIRE TRANSPER	0.		
		CENTRAL AMERICA		06.000	L			
		AND THE CARIBBEAN	GENERAL SUPPORT	26,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	CRISIS	15,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	GENERAL SUPPORT	10,000.	WIRE TRANSFER	0.		

Part II Continuation o			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) 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						
			GENERAL SUPPORT	43,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	425,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	500,000.	WIRE TRANSFER	0.		
		ELGE 1GIL 1ND EUG						
		EAST ASIA AND THE PACIFIC	TRAVEL	5 200.	WIRE TRANSFER	0.		
				7=:::				
		EAST ASIA AND THE PACIFIC	TRAVEL	10 000	WIRE TRANSFER	0.		
				20,000.				
		EAST ASIA AND THE PACIFIC	GENERAL SUPPORT	57 000	WIRE TRANSFER	0.		
		r MOIF IC	SHABIAH BOLFORI	37,000.	MINE INAMOLEK	0.		
		EAST ASIA AND THE	EXTENIO	27 050	WIDE MDANGEER	0		
		PACIFIC	EVENT	21,059.	WIRE TRANSFER	0.		+
		EAST ASIA AND THE	GUNDAL GUDACA	40.000				
		PACIFIC	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		1

Part II Continuation o			tions or Entities Outside the	United States.	(Schedule F (Form 9	90). Part II. line 1	1)	r ago z
1 (a) Name of organization	(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)
		EAST ASIA AND THE						
		PACIFIC	EVENT	7,511.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	28,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	16,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	23,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	16,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		EUROPE	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the l	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)
		EUROPE	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		EUROPE	GENERAL SUPPORT	90,000.	WIRE TRANSFER	0.		<u> </u>
		EUROPE	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		EUROPE	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		EUROPE	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		EUROPE	EVENT	10,000.	WIRE TRANSFER	0.		
		EUROPE	GENERAL SUPPORT	66,100.	WIRE TRANSFER	0.		
		BUDODE	GENERAL GURDONE	14 000	WIDE MOANGEED			
		EUROPE	GENERAL SUPPORT	14,000.	WIRE TRANSFER	0.		
		EUROPE	CRISIS	9,360.	WIRE TRANSFER	0.		

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 age z
1 (a) Name of organization	(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)
		EUROPE	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	100,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	55,000.	WIRE TRANSFER	0.		
				,				
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	9.000.	WIRE TRANSFER	0.		
				, -		-		
		MIDDLE EAST AND NORTH AFRICA	TRAVEL	16 282.	WIRE TRANSFER	0.		
				,				
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	60 000.	WIRE TRANSFER	0.		
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	15 000	WIRE TRANSFER	0.		
			DOLLON!	13,000.	THE THEFT IN	3.		
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	50 000.	WIRE TRANSFER	0.		

Part II Co	ontinuation o	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 o	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)
			MIDDLE EAST AND						
				CRISIS	20,000.	WIRE TRANSFER	0.		
			MIDDLE EAST AND						
				GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
			MIDDLE EXCE AND						
			MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	14.685.	WIRE TRANSFER	0.		
					,				
			MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	25 000	WIRE TRANSFER	0.		
					20,000.				
			MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	15 000	WIRE TRANSFER	0.		
			NORTH AFRICA	GENERAL SUFFORT	13,000.	WIRE TRANSFER	0.		
			MIDDLE EAST AND	GENERAL GURRORE	20.000	MANAGED TO A STATE OF THE STATE	0		
			NORTH AFRICA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
			MIDDLE EAST AND				_		
			NORTH AFRICA	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		_
			MIDDLE EAST AND						
			NORTH AFRICA	GENERAL SUPPORT	50,000.	WIRE TRANSFER	0.		
			MIDDLE EAST AND						
			NORTH AFRICA	GENERAL SUPPORT	25,000.	WIRE TRANSFER	0.		

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)	
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)
		MIDDLE EAST AND						
		NORTH AFRICA	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	GENERAL SUPPORT	50,000.	WIRE TRANSFER	0.		
		(TDDI II II) 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3						
		MIDDLE EAST AND NORTH AFRICA	GENERAL SUPPORT	62 000.	WIRE TRANSFER	0.		
				,				
		MIDDLE EAST AND	CENEDAL CUIDDODM	15 000	WIRE TRANSFER	0.		
		NORTH AFRICA	GENERAL SUPPORT	15,000.	WIRE TRANSPER	0.		
		MIDDLE EAST AND				_		
		NORTH AFRICA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	23,590.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	26,000.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	23,000.	WIRE TRANSFER	0.		

Part II Continuation of	f Grants and Other		tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	r age z
1 (a) Name of organization	(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)
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	22,149.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	10,000.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	1565706.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	10,602.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	5,291.	WIRE TRANSFER	0.		
		NORTH AMERICA						
		(NOT US)	GENERAL SUPPORT	10,032.	WIRE TRANSFER	0.		
		RUSSIA AND THE						
		NEWLY INDEPENDENT STATES	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
				,				
		RUSSIA AND THE NEWLY INDEPENDENT						
		STATES	GENERAL SUPPORT	70,000.	WIRE TRANSFER	0.		

Part II Continuatio	n 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 organizatio	(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 THE						
		STATES	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	EVENT	14,218.	WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	GENERAL SUPPORT	40 000.	WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	CRISIS		WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		RUSSIA AND THE NEWLY INDEPENDENT STATES	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		

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)	
1 (a) Name of organizatio	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
				40.000				
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	CRISIS	10,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	EVENT	10,000.	WIRE TRANSFER	0.		

Part II Continuation of			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) 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)
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	TRAVEL	10,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	CRISIS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	EVENT	12,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	20 000.	WIRE TRANSFER	0.		
				20,000.		3.		
		SOUTH AMERICA	EVENT	10,000.	WIRE TRANSFER	0.		

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) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	GENERAL SUPPORT	37,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	50,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	TRAVEL	6,200.	WIRE TRANSFER	0.		+
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	42,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		

Part II Continuation o			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) 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)
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30 000	WIRE TRANSFER	0.		
		BOUTH ASIA	GENERAL SUFFORT	30,000.	WIRE TRANSFER	0.		+
		COMMU ACTA	GENERAL GURDORM	30,000	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSPER	0.		
						_		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		+
		SOUTH ASIA	TRAVEL	7,000.	WIRE TRANSFER	0.		

Part II Continuat	tion of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	
1 (a) Name of organiza	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	1130000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	25,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	8,770.	WIRE TRANSFER	0.		

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)	
1 (a) Name of organizatio	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	GENERAL SUPPORT	10,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	300,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	495,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	44,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		

Part II Continuation o			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) 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)
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GENERAL SUPPORT	30.000.	WIRE TRANSFER	0.		
		SOUTH ASIA	EVENT	10,000.	WIRE TRANSFER	0.		

Part II Conti	nuation of	Grants and Other A	Assistance to Organiza	tions or Entities Outside the l	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of orga	anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
			SOUTH ASIA	GENERAL SUPPORT	9,500.	WIRE TRANSFER	0.		
			SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
			SOUTH ASIA	GENERAL SUPPORT	29,877.	WIRE TRANSFER	0.		
			SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
			SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		+
			SOUTH ASIA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
			SOUTH ASIA	GENERAL SUPPORT	44,000.	WIRE TRANSFER	0.		
			SUB-SAHARAN		00.000				
			AFRICA	GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		<u> </u>

Part II Continuation o			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) 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)
		SUB-SAHARAN						
			GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			TRAVEL	15,200.	WIRE TRANSFER	0.		
		CIID CAHADAN						
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	10,000.	WIRE TRANSFER	0.		
				,				
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	10,000.	WIRE TRANSFER	0.		
				,				
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	40 000.	WIRE TRANSFER	0.		
				22,222				
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	20 000	WIRE TRANSFER	0.		
		THE REPORT OF THE PERSON OF TH	DENZINE BOTTON	20,000.	WIND THEMSE DIC	•		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	15 000	WIRE TRANSFER	0.		
		H. KICA	GENERAL SOFFORT	13,000.	MINE INAMOPER	0.		+
		SUB-SAHARAN AFRICA	CENEDAI CHIDDODM	20 000	WIRE TRANSFER			
		MERICA	GENERAL SUPPORT	∠∪,∪∪∪.	MIKE IKANSFER	0.		

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)
		SUB-SAHARAN						
			GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	39,338.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		GUD GAUADAN						
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
				,				
		SUB-SAHARAN						
			GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
				,				
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	16 000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	40 000	WIRE TRANSFER	0.		
		11 11 0/1	DELIGITIES DOLLOWI	=0,000.	TAL TRANSPER			+
		SUB-SAHARAN AFRICA	TRAVEL	Ω 771	WIRE TRANSFER	0.		
		FII KI CA	11/114 111	0,74.	MIND INVISED			1

Part II Continuation o			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) 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)
		SUB-SAHARAN						
			GENERAL SUPPORT	19,500.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			TRAVEL	5,500.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	22,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
				,				
		and annual						
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
				,		-		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	18 000	WIRE TRANSFER	0.		
						3.		1
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	90 000	WIRE TRANSFER	0.		
		1111111	DELICITED BOTTON	50,000.	THE TRANSPER	0.		+
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	96 119	WIRE TRANSFER	0.		
		III KICA	CHAPITAN POLLOKI	, 119.	WINE INMIDEEN	١. ٠		

Part II Continuation of	f Grants and Other		tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	r age z
1 (a) Name of organization	(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)
		SUB-SAHARAN						
			EVENT	20,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			TRAVEL	5,300.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	17,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	30,000.	WIRE TRANSFER	0.		

Part II Continuation o			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) 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)
		SUB-SAHARAN						
			GENERAL SUPPORT	21,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	18,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
				,				
		GUD GAUADAN						
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	40,000.	WIRE TRANSFER	0.		
				,				
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	20 000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	29 000.	WIRE TRANSFER	0.		
				25,555				
		SUB-SAHARAN AFRICA	TRAVEL	7 400	WIRE TRANSFER	0.		
				,,100.		3.		
		SUB-SAHARAN AFRICA	GENERAL SUPPORT	20 000	WIRE TRANSFER	0.		
			DELICITED BOLLOKI	20,000.	THE TRUMBLER	0.		+
		SUB-SAHARAN AFRICA	CRISIS	12 200	WIRE TRANSFER	0.		
		FILLICA	CKIDID	14,400.	MIKE IKANOFEK	٠.		

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) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN						
			GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			EVENT	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	20,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
			GENERAL SUPPORT	90,000.	WIRE TRANSFER	0.		

Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Region (c) Number of recipients (d) Amount of cash disbursement (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) 2016 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; do not 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)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	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; do not file with Form 990)	X Yes	☐ No

Schedule F (Form 990) 2016

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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:

ALL GRANTS AWARDED FIT BOARD-APPROVED CRITERIA, ALIGN WITH PROGRAMMATIC PRIORITIES, AND HAVE A STRONG ENDORSEMENT FROM A LOCAL ADVISOR OR SOMEONE WHO HAS HAD MEANINGFUL CONTACT WITH THE GROUP. THE FULL BOARD OR THE EXECUTIVE COMMITTEE OF THE BOARD REVIEWS RECOMMENDATIONS AND MAKES ALL FINAL DECISIONS ABOUT THE GRANT AWARDS. GRANT APPLICATIONS ARE REVIEWED TWICE A YEAR. INITIAL DECISIONS ARE MADE ABOUT THE APPROPRIATENESS OF THE REQUEST AND GROUPS WHOSE PROGRAMS DO NOT MEET GFW'S CRITERIA ARE PROMPTLY NOTIFIED SO THAT THEY CAN PURSUE OTHER SOURCES OF FUNDING. APPLICATIONS THAT MOST CLOSELY FIT GFW'S CRITERIA ARE REVIEWED MORE RIGOROUSLY AND ADDITIONAL INFORMATION MAY BE REQUESTED OF THE GROUPS. IF THE GROUP'S PROPOSAL FITS BOARD-APPROVED CRITERIA, ALIGNS WITH PROGRAMMATIC PRIORITIES, AND HAS A STRONG ENDORSEMENT FROM A LOCAL ADVISOR OR SOMEONE WHO HAS HAD MEANINGFUL CONTACT WITH THE GROUP, THE PROGRAM TEAM MAKES THE RECOMMENDATION FOR APPROVAL. GRANTEES ARE REQUIRED TO SUBMIT A FINANCIAL AND NARRATIVE REPORT AT THE END OF THE GRANT PERIOD, WHICH IS BETWEEN SIX MONTHS AND THREE YEARS, DEPENDING ON THE TYPE OF GRANT AWARDED. WHILE THE GRANTS OPERATIONS TEAM IS RESPONSIBLE FOR MONITORING REPORT DUE DATES, INFORMING PROGRAM TEAM MEMBERS ABOUT OVERDUE REPORTS, AND SENDING REMINDERS TO GRANTEES ABOUT OVERDUE REPORTS, PROGRAM TEAM MEMBERS ARE ULTIMATELY RESPONSIBLE FOR REVIEWING PROGRESS AND FINAL REPORTS. RECIPIENTS OF MULTI-YEAR GRANTS ARE REQUIRED TO SUBMIT A PROGRESS REPORT ON THE GRANT ONE YEAR FROM THE DATE THE FUNDS WERE RECEIVED. THESE REPORTS ARE REVIEWED BY THE PROGRAM TEAM PRIOR TO THE RELEASE OF THE NEXT INSTALLMENT OF THE GRANT.

PART I, LINE 3:

632075 09-21-16 Schedule F (Form 990) 2016 65

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE GLOBAL FUND FOR WOMEN INC

Employer identification number 77 – 0155782

	THE GLO.	DAL LUND	FOR WOMEN	INC.		11-0133	704		
Part I	Fundraising Activities. required to complete this part	Complete if the d	organization answe	red "Yes" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not		
1 Indicat	e whether the organization rais	ed funds through	any of the followin	g activities.	Check all that apply.				
аX	Mail solicitations		e X Solicita	tion of non-g	overnment grants				
b X	Internet and email solicitations	i	f X Solicita	tion of gover	nment grants				
с Х	Phone solicitations		g X Special	fundraising	events				
d X	In-person solicitations								
2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **No* **Description** **Des									
				(iii) Did		(v) Amount paid	(-i) Amount noid		

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
MERKLE, INC P.O. BOX		Yes	No			
64897, BALTIMORE, MD 21264	ONLINE FUNDRAISING ADVISER		Х	0.	21,263.	-21,263.
TRIPI CONSULTING ASSOCIATES,						
INC 255 PLUTARCH ROAD,	DIRECT MAIL CONSULTANT		Х	0.	16,865.	-16,865.
MARY MAGELLAN - 1000 GREEN						
STREET, APT. 201, SAN	DEVELOPMENT WRITER		Х	0.	11,868.	-11,868.
Total			>		49,996.	-49,996.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AK,AL,A	.R , CA , C'.	ľ, FЪ,G	A, HI, IL	, KS, MA	MD,MI	, MN, MS	,NH,NJ	<u>, NM,NY,</u>	OK, OR, E	A, RI, SC	, TN
UT,WI,A	Z,CO,DO	C,NC,N	D,OH,WA	, VA, ME	,WV,DE	,GU,IA	,ID,IN	,KY,LA,	MO, MT, N	IE,NV,PR	,TX
VT,WY,S	D										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2016

	edul I rt I		ne organization answered	"Yes" on Form 990, Pa	art IV, line 18, or reported	
		of fundraising event contributions and gr	(a) Event #1 RECEPTION	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
Ф			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	23,511.			23,511.
	2	Less: Contributions	12,351.			12,351.
	3	Gross income (line 1 minus line 2)	11,160.			11,160.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	1,000.			1,000.
irect E	7	Food and beverages	5,215.			5,215.
Δ	8	Entertainment				
	9	Other direct expenses				6.015
		Direct expense summary. Add lines 4 through				6,215. 4,945.
Pa	rt I	Net income summary. Subtract line 10 from I Gaming. Complete if the organization		990, Part IV, line 19, o		4,943.
		\$15,000 on Form 990-EZ, line 6a.		, , ,	·	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
es	2	Cash prizes				
rect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	yes % No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
9	Fnt	er the state(s) in which the organization condu	ucts gaming activities:			
		he organization licensed to conduct gaming a	_	states?		Yes No
b	If "	No," explain:				
	_					
10a	We	re any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax	year?	Yes No
		Yes," explain:		-		

Schedule G (Form 990 or 990-EZ) 2016

632082 09-12-16

Schedule G (Form 990 or 990-EZ) 2016 THE GLOBAL FUND FOR WOMEN INC.)155782	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	13a	%
b An outside facility	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Name		
Address >		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount		
of gaming revenue retained by the third party \$\bigs\\$		
c If "Yes," enter name and address of the third party:		
Name ▶		
Address		
16 Gaming manager information:		
Name		
Gaming manager compensation \$		
Description of complete provided		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	Yes	☐ No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, line	nes 9. 9b. 10	b. 15b.
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	,,	2, .02,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	:	
(I) NAME OF FUNDRAISER: TRIPI CONSULTING ASSOCIATES, INC.		
(-,,		
(I) ADDRESS OF FUNDRAISER: 255 PLUTARCH ROAD, HIGHLAND, NY 12528	}	
(I) NAME OF FUNDRAISER: MARY MAGELLAN		
(I) ADDRESS OF FUNDRAISER:		
1000 GREEN STREET, APT. 201, SAN FRANCISCO, CA 94133		

Schedule G	(Form 990 or 990-EZ)	THE	GLOBAL	FUND	FOR	WOMEN	INC.	77-0155782	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation	(continued)						
			•						
								<u> </u>	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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

➤ Attach to Form 990.

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

2016

OMB No. 1545-0047

Open to Public Inspection

Name of the organization THE GLOBA	Employer identification number $77-0155782$						
Part I General Information on Grants as		K WOMEN INC	•				77 0133702
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro 	o substantiate the					stance, and the selecti	₩, ,,,
Part II Grants and Other Assistance to I					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$	5,000. Part II can	be duplicated if additi	onal space is need	ed.			
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ASTRAEA LESBIAN FOUNDATION FOR JUSTICE - 116 E 16TH ST, 7TH FLR -	42 20000		10.000				
NEW YORK, NY 10003	13-2992977	501(C)(3)	10,000.	0.			GENERAL SUPPORT
JUST ASSOCIATES 2040 S ST NW, 3RD FLR WASHINGTON, DC 20009	06-1597668	E01/G)/2)	5,760.	0.			GENERAL SUPPORT
WASHINGTON, DC 20009	00-139/008	501(C)(3)	5,760.	0.			GENERAL SUPPORT
ROCKEFELLER PHILANTHROPY ADVISORS 6 W 48TH ST, 10TH FLR NEW YORK, NY 10036	13-3615533	501(C)(3)	25,000.	0.			GENERAL SUPPORT
WOMEN'S FUNDING NETWORK 156 2ND ST			·				
SAN FRANCISCO, CA 94105	41-1685134	501(C)(3)	7,500.	0.			GENERAL SUPPORT
2 Enter total number of section 501(c)(3) ar	L nd government or	L ganizations listed in the	Le line 1 table			l	• 4.
3 Enter total number of other organizations	•	•					0.
LHA For Paperwork Reduction Act Notice,	see the Instructi	ons for Form 990.					Schedule I (Form 990) (2016)

Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(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 requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
ALL GRANTS AWARDED FIT BOARD-APPROV	ED CRITE	RIA, ALIGN	WITH PROG	RAMMATIC	
PRIORITIES, AND HAVE A STRONG ENDOF	RSEMENT F	ROM A LOCA	L ADVISER	OR SOMEONE	
(a) Type of grant or assistance (b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (book, FMV, appraisal, other) (f) Description of noncash assistance (book, FMV, appraisal, other)					
EXECUTIVE COMMITTEE OF THE BOARD RE	EVIEWS RE	COMMENDATI	ONS AND MA	KES ALL	
FINAL DECISIONS ABOUT THE GRANT AWA	ARDS. GRA	NT APPLICA	TIONS ARE	REVIEWED	
TWICE A YEAR. INITIAL DECISIONS ARE	E MADE AB	OUT THE AP	PROPRIATEN	ESS OF THE	
REQUEST AND GROUPS WHOSE PROGRAMS I	OO NOT ME	ET GFW'S C	RITERIA AR	E PROMPTLY	

Part IV Supplemental Information
THAT MOST CLOSELY FIT GFW'S CRITERIA ARE REVIEWED MORE RIGOROUSLY AND
ADDITIONAL INFORMATION MAYBE REQUESTED OF THE GROUPS. IF THE GROUP'S
PROPOSAL FITS BOARD-APPROVED CRITERIA, ALIGNS WITH PROGRAMMATIC PRIORITIES,
AND HAS A STRONG ENDORSEMENT FROM A LOCAL ADVISER OR SOMEONE WHO HAS HAD
MEANINGFUL CONTACT WITH THE GROUP, THE PROGRAM TEAM MAKES THE
RECOMMENDATION FOR APPROVAL. GRANTEES ARE REQUIRED TO SUBMIT A FINANCIAL
AND NARRATIVE REPORT AT THE END OF THE GRANT PERIOD, WHICH IS BETWEEN SIX
MONTHS AND THREE YEARS, DEPENDING ON THE TYPE OF GRANT AWARDED. WHILE THE
GRANTS OPERATIONS TEAM IS RESPONSIBLE FOR MONITORING REPORT DUE DATES,
INFORMING PROGRAM TEAM MEMBERS ABOUT OVERDUE REPORTS, AND SENDING REMINDERS
TO GRANTEES ABOUT OVERDUE REPORTS, PROGRAM TEAM MEMBERS ARE ULTIMATELY
RESPONSIBLE FOR REVIEWING PROGRESS AND FINAL REPORTS. RECIPIENTS OF
MULTI-YEAR GRANTS ARE REQUIRED TO SUBMIT A PROGRESS REPORT ON THE GRANT ONE
YEAR FROM THE DATE THE FUNDS WERE RECEIVED. THESE REPORTS ARE REVIEWED BY
THE PROGRAM TEAM PRIOR TO THE RELEASE OF THE NEXT INSTALLMENT OF THE GRANT.
THE THOUSANT THE THE NEEDED OF THE NEED THE TRAINED OF THE CHIMIT

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.

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

2016

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

THE GLOBAL FUND FOR WOMEN INC.

Employer identification number 77-0155782

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees 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 1b 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 filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant 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 filing organization or a related organization: Х a Receive a severance payment or change-of-control payment? 4a Х b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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: Х a The organization? 5a X **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. 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: X a The organization? 6a X **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

632111 09-09-16

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

Schedule J (Form 990) 2016

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) Breakdown of	B) Breakdown of W-2 and/or 1099-MISC compensation		(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) MUSIMBI KANYORO	(i)	256,750.	0.	0.	12,838.	18,264.	287,852.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ELIZABETH SCHAFFER	(i)	166,563.	0.	0.	8,328.	19,549.	194,440.	0.
CFO/COO (THRU 8/17)	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CHANDRA ALEXANDRE	(i)	164,000.	0.	0.	8,200.	796.	172,996.	0.
VP OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CLARE WINTERTON	(i)	136,196.	0.	0.	6,810.	18,857.		0.
VP OF PROGRAMS AND INNOVATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CATHERINE KING	(i)	135,410.	0.	0.	6,771.	11,299.	153,480.	0.
LEAD ADVOCACY	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) AMELIA WU	(i)	135,065.	0.	0.	6,753.	22,415.	164,233.	0.
LEAD FUNDRAISING OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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 4A:
JANE SLOANE, VP OF PROGRAMS, RECEIVED A SEVERANCE PAYMENT OF \$23,625
EQUIVALENT TO 7 WEEKS OF SALARY DUE TO THE ELIMINATION OF HER POSITION.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization THE GLOBAL FUND FOR WOMEN INC. Employer identification number 77-0155782

Par	t I Types of Property					•			
	•	(a)	(b)	(c)		(0			
		Check if	Number of contributions or	Noncash contrib amounts reporte		Method of o		•	•
		applicable		Form 990, Part VIII		noncash contri	oution ar	nount	5
1	Art - Works of art			,					
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	53	297.	595.	AVERAGE HI	GH/LO	OW C	ON
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
•••	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organiz	zation during	the tay year for o	ontributions					
25	for which the organization completed Form 82				29			0	
	To which the organization completed form ozi	00,1 ait iv, i	Solice Holliowicae	Joinone	23			Yes	No
302	During the year, did the organization receive by	v contributio	n any property rep	orted in Part I lines	1 through	h 28 that it		163	140
ooa	must hold for at least three years from the date								
	•		•	•			30a		х
b									
31	Does the organization have a gift acceptance	nolicy that re	acuires the review (of any nonstandard	contribut	ions?	31	х	
	Does the organization hire or use third parties					ions?	31	-2	
JZd	-		-				32a		x
h	contributions? If "Yes," describe in Part II.						3Zd		-23
	If the organization didn't report an amount in c	olumn (a) far	r a type of property	for which column (a) is oboo	rked			
33	describe in Part II.	olullili (C) fol	a type of property	TOT WHICH COLUMN (a) is cried	neu,			
	UESCHINE III FAIL II.								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2016)

632142 08-23-16

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Open to Public** Inspection

OMB No. 1545-0047

Name of the organization

THE GLOBAL FUND FOR WOMEN INC.

Employer identification number 77-0155782

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
POWERFUL NETWORKS TO FIND, FUND, AND AMPLIFY THE COURAGEOUS WORK OF
WOMEN WHO ARE BUILDING SOCIAL MOVEMENTS AND CHALLENGING THE STATUS QUO.
WE ARE COMMITTED TO GETTING MONEY AND ATTENTION WHERE IT WILL MAKE THE
BIGGEST DIFFERENCE FOR GENDER EQUALITY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ATTENTION WHERE IT WILL MAKE THE BIGGEST DIFFERENCE FOR GENDER
EQUALITY.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
CENTRAL ASIA AND SECURING ABORTION RIGHTS IN LATIN AMERICA. WE
CONTINUED TO GIVE CRISIS SUPPORT FUNDING TO WOMEN'S GROUPS FACING
EXTREME SITUATIONS AS WELL AS PROVIDING ONGOING SUPPORT TO WOMEN'S
FUNDS TO STRENGTHEN THE WOMEN'S MOVEMENT GLOBALLY.
WE CONTINUED TO STRENGTHEN OUR ORGANIZATIONAL-WIDE LEARNING AND
EVALUATION SYSTEMS TO CAPTURE AND ANALYZE DATA FROM GRANTEES AND
STAKEHOLDERS AND TO SHARE LEARNINGS WITH INTERNAL AND EXTERNAL
AUDIENCES. BUILDING ON THE WORK BY SOCIAL MOVEMENT RESEARCHERS AND
ACTIVISTS, WE DEVELOPED THE MOVEMENT CAPACITY ASSESSMENT TOOL TO ENGAGE
MULTIPLE STAKEHOLDERS IN A COLLECTIVE ASSESSMENT OF THE CAPACITY OF
THEIR MOVEMENT. MOVEMENT ACTORS CAN USE THE RESULTS OF THE ASSESSMENT
TO SPARK DISCUSSION ON HOW TO ADDRESS CHALLENGES AND MOVE FORWARD AS A
MOVEMENT. WE CONTINUED TO REFINE OUR ONLINE GRANTMAKING SYSTEM AND
PROCEDURES WITH THE GOAL OF REDUCING STAFF AND GRANTEE TIME, WHILE

 $\label{eq:LHA} \mbox{ For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.}$

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization

THE GLOBAL FUND FOR WOMEN INC.

THE GLOBAL FUND FOR WOMEN INC.

RETAINING AN OPEN PROCESS. SINCE LAUNCHING THE NEW SYSTEM IN 2015, WE

RECEIVED CLOSE TO 4,000 ORGANIZATIONAL PROFILES FROM GRASSROOTS WOMEN'S

RIGHTS GROUPS IN MORE THAN 150 COUNTRIES THAT ARE SEEKING FINANCIAL

SUPPORT.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: GENERATED OVER 100,000 SOCIAL MEDIA ENGAGEMENTS, RAISED \$15,000 IN CROWD-SOURCED DONATIONS, AND ALMOST 2,000 MESSAGES OF SOLIDARITY. IN JANUARY 2017 WE LAUNCHED #BUILDMOVEMENTSNOTWALLS TO ADVANCE UNDERSTANDING OF THE IMPLICATIONS OF US POLICIES ON WOMEN'S RIGHTS GLOBALLY, INCORPORATING THE PERSPECTIVES OF GRASSROOTS WOMEN'S GROUPS SPEAKING TO THE IMPACT OF THE PROPOSED US TRAVEL BAN AND THE REINSTATEMENT OF THE GLOBAL GAG RULE. IN SPRING 2017, WE RELEASED #DISRUPTERS, A SERIES OF CASE STUDIES FOCUSED ON FIVE GROUPS WE SUPPORTED IN THEIR EARLY STAGES AND WHOSE BOLD IDEAS HAVE PROPELLED POWERFUL SOCIAL MOVEMENTS FOR WOMEN'S RIGHTS IN THEIR COMMUNITIES. OUR CRISIS RESPONSE INCLUDED ONLINE VISIBILITY AND FUNDRAISING TO SUPPORT WOMEN'S GROUPS RESPONDING TO THE DEVASTATION OF HURRICANE MATTHEW IN HAITI. THROUGHOUT THE YEAR OUR TOTAL AUDIENCE REACH GREW 33% TO NEARLY 1.5 MILLION ACROSS THE WEBSITE, SOCIAL MEDIA, AND EMAIL ALLOWING US TO GROW OUR BASE OF SUPPORT FOR WOMEN'S RIGHTS ISSUES. WE OBTAINED A 65% INCREASE IN MAJOR MEDIA HITS, SECURING COVERAGE OF WOMEN'S RIGHTS ISSUES IN INTERNATIONAL MEDIA FROM THE NEW YORK TIMES TO NEWSWEEK, TIME, AND MORE. THROUGH OUR BI-MONTHLY MOVEMENT NEWSLETTER WE SHARE RESOURCES AND KNOWLEDGE WITH GRANTEE PARTNERS AND WOMEN'S MOVEMENT ALLIES. WE ALSO ENGAGED A FILM TEAM AND INITIATED PRODUCTION ON FUNDAMENTAL: WOMEN'S RIGHTS IN A VOLATILE WORLD, A DOCUMENTARY FILM SERIES AND IMPACT CAMPAIGN LAUNCHING IN LATE 2018/EARLY 2019.

Name of the organization THE GLOBAL FUND FOR WOMEN INC. Employer identification number 77-0155782

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

FORM 990 IS PREPARED BY THE GLOBAL FUND FOR WOMEN'S INDEPENDENT AUDITORS,

AND REVIEWED BY GLOBAL FUND FOR WOMEN STAFF. A FINAL COPY OF THE FORM 990

IS REVIEWED BY BOTH THE AUDIT COMMITTEE AND THE FULL BOARD OF DIRECTORS

PRIOR TO FILING WITH THE IRS.

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

TRUSTEES, OFFICERS, AND EXECUTIVE STAFF MEMBERS DISCLOSE ANNUALLY ANY
ANTICIPATED OR POSSIBLE CONFLICT SITUATIONS. THIS STATEMENT INCLUDES
CURRENT PARTICIPATION, AFFILIATION, OR OTHER INVOLVEMENT WITH ANY NONPROFIT
ORGANIZATION AND WITH ANY FOR-PROFIT ORGANIZATION USED BY THE GLOBAL FUND
FOR WOMEN IN WHICH AN AFFILIATED PERSON OR AN IMMEDIATE FAMILY MEMBER MAY
HAVE AN INTEREST. IF A CONFLICT ARISES THE PERSON WITH A CONFLICT IS NOT
ALLOWED TO VOTE ON THE TRANSACTION. THERE HAVE BEEN NO INCIDENCES OF
CONFLICT DURING THE REPORTING PERIOD.

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

THE GLOBAL FUND FOR WOMEN ENDEAVORS TO ATTRACT, RECRUIT AND RETAIN THE MOST
WELL QUALIFIED OFFICERS IN THE FIELD OF INTERNATIONAL WOMEN'S RIGHTS WHO
HAVE DEMONSTRATED SIGNIFICANT CONTRIBUTIONS TO THE ADVANCEMENT OF THE
RIGHTS OF WOMEN AND GIRLS. WITH THIS GOAL IN MIND, OFFICER COMPENSATION
SUPPORTS THE OVERALL ACHIEVEMENT OF THE GLOBAL FUND'S ORGANIZATIONAL GOALS
AND ITS MISSION. DECISIONS ON LEADERSHIP COMPENSATION ARE BASED ON FACTUAL
DATA THAT INCLUDES SALARY SURVEYS AND STUDIES CONDUCTED BY INDEPENDENT
SOURCES ABOUT OFFICER POSITIONS AT SIMILAR ORGANIZATIONS AND INFORMATION
OBTAINED FROM PUBLICLY AVAILABLE REGULATORY FILINGS OF SIMILAR

ORGANIZATIONS. COMPENSATION FOR THE ORGANIZATION'S OFFICERS AND KEY

THE GLOBAL FUND FOR WOMEN INC.	77-0155782
EMPLOYEES IS REVIEWED AND APPROVED BY INDEPENDENT MEMBERS	OF BOARD OF
DIRECTORS IN A PROCESS LED BY THE CO-CHAIRS OF THE BOARD.	THE PROCESS IS
DOCUMENTED AND IS COMPLETED ANNUALLY IN ACCORDANCE WITH OR	GANIZATIONAL
POLICY.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AK, AZ, AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NH, NJ, NM, N	Y,OK,OR,PA,RI,SC
TN, UT, VA, WI, WV, AL, CO, DC, DE, IA, IN, LA, ME, MO, MT, NC, ND, NE, NV, C	H,SD,TX,VT,WY,GU,
ID, PR, WA	
FORM 990, PART VI, SECTION C, LINE 19:	
THE FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLIC	T OF INTEREST
POLICY ARE ALL AVAILABLE UPON REQUEST.	

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service Name of the organization

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

THE GLOBAL FUND FOR WOMEN INC.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

77-0155782

(a)	(b)	(c)	(d)	(e)			(f)			
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)		l l		Direct o	Direct controlling entity			
Part II Identification of Related Tax-Exempt Or organizations during the tax year.	rganizations. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34 b	ecause it had one	or more re	elated tax-exen	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	Public charity Direct contr		l l		cont	g) 512(b)(13) rolled tity?
				501(c)(3))			Yes	No		
GLOBAL FUND FOR WOMEN UK 14-18 CITY ROAD	GRANTMAKING TO WOMEN-LEAD					OBAL FUND				
CARDIFF, UNITED KINGDOM CF24 3DL	ORGANIZATIONS	UNITED KINGDOM			FOR WOM	MEN INC	Х			

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

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

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country						Yes	No

1a

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

Yes No

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

b Gift, grant, or capital contribution to related organization(s)				1b	X			
c Gift, grant, or capital contribution from related organization(s)				1c	X			
				1d	Х			
e Loans or loan guarantees by related organization(s)				1e	X			
f Dividends from related organization(s)				1f	X			
g Sale of assets to related organization(s)								
h Purchase of assets from related organization(s)				1h	X			
i Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)								
k Lease of facilities, equipment, or other assets from related organization(s)				1k	X			
I Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by rela	ted organization(s)			1m	X			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
o Sharing of paid employees with related organization(s)								
p Reimbursement paid to related organization(s) for expenses				1 p	X			
q Reimbursement paid by related organization(s) for expenses				1q	X			
				1r	<u>X</u>			
s Other transfer of cash or property from related organization(s)				1s	X			
2 If the answer to any of the above is "Yes," see the instructions for informat	tion on who must complete th	is line, including covered relati	onships and transaction thresholds.					
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount i	nvolved				
(1)								
(2)								
(3)								
(4)								
(E)								
(5)								
(6)								
(0)								
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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) Disproper tionate allocation Yes N	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) Percentage ownership