

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

- ▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization VITAL VOICES GLOBAL PARTNERSHIP, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1625 MASSACHUSETTS AVENUE, NW 300 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036 F Name and address of principal officer: ALYSE NELSON SAME AS C ABOVE	D Employer identification number 52-2151557 E Telephone number (202) 861-2625 G Gross receipts \$ 7,250,582. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: ▶ WWW.VITALVOICES.ORG K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ L Year of formation: 1999 M State of legal domicile: DE		

Part I Summary

1	Briefly describe the organization's mission or most significant activities: VITAL VOICES INVESTS IN WOMEN LEADERS GLOBALLY TO ACCELERATE PROSPERITY IN THEIR COMMUNITIES.		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	29
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	28
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	70
6	Total number of volunteers (estimate if necessary)	6	150
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8	Contributions and grants (Part VIII, line 1h)	8	12,862,692.
9	Program service revenue (Part VIII, line 2g)	9	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	0.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	-477,642.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	12,385,050.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	1,680,095.
14	Benefits paid to or for members (Part IX, column (A), line 4)	14	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	4,397,906.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 772,594.	b	5,000.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17	4,368,818.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	10,446,819.
19	Revenue less expenses. Subtract line 18 from line 12	19	1,938,231.
20	Total assets (Part X, line 16)	20	8,909,276.
21	Total liabilities (Part X, line 26)	21	850,897.
22	Net assets or fund balances. Subtract line 21 from line 20	22	8,058,379.

Part II Signature Block

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

Sign Here	Signature of officer ALYSE NELSON, PRESIDENT AND CEO Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name FRANK H. SMITH Preparer's signature <i>Frank H. Smith</i> Date 07/16/17 Check <input type="checkbox"/> if self-employed PTIN P00639053 Firm's name ▶ RAFFA, P.C. Firm's EIN ▶ 52-1511275 Firm's address ▶ 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036 Phone no. (202) 822-5000	

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

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

VITAL VOICES GLOBAL PARTNERSHIP, INC. (VITAL VOICES) IDENTIFIES A WOMAN LEADER WITH A DARING VISION, AND THEN PARTNERS WITH HER TO MAKE THAT VISION A REALITY. THROUGH LONG-TERM INVESTMENTS THAT EXPAND HER SKILLS, CONNECTIONS AND VISIBILITY, WE ACCELERATE HER EFFORTS.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 4,329,784. including grants of \$ 280,079.) (Revenue \$)
SIGNATURE PROGRAMS:

SIGNATURE PROGRAMS AT VITAL VOICES ARE STRUCTURED INITIATIVES THAT BUILD WOMEN LEADERS' CAPACITY THROUGH GROUP TRAINING, MENTORING AND TARGETED FOLLOW-ON SUPPORT AND PEER-TO-PEER EXCHANGES AND NETWORKING. WE WORK WITH LEADERS IN THREE KEY AREAS: HUMAN RIGHTS, ECONOMIC OPPORTUNITY, AND POLITICAL AND PUBLIC LEADERSHIP. OUR PROGRAMS OFFER PRACTICAL SKILLS AND SERVICES; WE HELP LEADERS DEVELOP STRATEGIC PLANS, TELL THEIR STORIES AND REACH NEW MARKETS. WE CONNECT THEM WITH EXPERT ADVISERS FOR MENTORING AND COLLABORATION. WE SHARE THEIR PERSPECTIVES AND THEIR WORK WITH THE AUDIENCES THEY NEED TO REACH, AND WE MOBILIZE COMMUNITIES ONLINE AND OFFLINE TO TAKE ACTION ON CRITICAL ISSUES.

4b (Code:) (Expenses \$ 2,782,162. including grants of \$ 637,488.) (Revenue \$)
INDIVIDUALIZED INVESTMENTS:

VITAL VOICES IS CHARTING A NEW COURSE IN WOMEN'S LEADERSHIP, MAKING INVESTMENTS THROUGH TARGETED TECHNICAL TRAININGS, CATALYZING THE VISION OF A SELECT GROUP OF WOMEN LEADERS AND CURATING A SYSTEM OF SUPPORT FOR THEM AROUND THE WORLD. THROUGH THIS AREA OF PRACTICE, WE PARTNER WITH WOMEN TO OFFER TAILORED AND AD HOC INDIVIDUALIZED SUPPORT AS NEEDED. WE ARE COMMITTED TO INCREASING THEIR VISIBILITY, RAISING AWARENESS FOR THE ISSUES THEY ARE TACKLING, AND FACILITATING CONNECTIONS AND PARTNERSHIPS TO HELP THEM SCALE UP THEIR WORK AND ACHIEVE EVEN GREATER IMPACT.

GLOBAL LEADERSHIP AWARDS HONOREE PROGRAM: EACH YEAR, VITAL VOICES HOSTS

4c (Code:) (Expenses \$ 967,544. including grants of \$ 420,698.) (Revenue \$)
NETWORK ACTIVATION:

THE PROGRAMS THAT ACTIVATE THE VITAL VOICES NETWORK FACILITATE ONGOING ENGAGEMENT WITH THE WOMEN LEADERS WITH WHOM VITAL VOICES PARTNERS AND SUPPORT THEIR DEEP-ROOTED COMMITMENT TO "PAYING IT FORWARD." THESE PROGRAMS PROMOTE ADVOCACY, FOSTER AN ENABLING ENVIRONMENT FOR WOMEN'S LEADERSHIP AND IGNITE AND ORGANIZE TOP LEADERS AROUND KEY ISSUES.

GLOBAL MENTORING WALK: HELD ON THE SAME DAY IN COUNTRIES ACROSS THE WORLD, THE VITAL VOICES GLOBAL MENTORING WALK UNIFIES THE GLOBAL LEADERSHIP NETWORK. IN 2016, THE 10TH ANNUAL GLOBAL MENTORING WALK WAS HELD ON MARCH 8 TO COINCIDE WITH INTERNATIONAL WOMEN'S DAY. GLOBAL

4d Other program services (Describe in Schedule O.)

(Expenses \$ 298,096. including grants of \$ 2,583.) (Revenue \$)

4e Total program service expenses **8,377,586.**

Form 990 (2016)

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9 X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X

Form 990 (2016)

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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	X	
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	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	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
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		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		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		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule OForm **990** (2016)

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 73		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 70		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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**

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	29			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b Enter the number of voting members included in line 1a, above, who are independent		28		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	X

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

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

Section C. Disclosure

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

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.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **ALYSE NELSON - (202) 861-2625**
1625 MASSACHUSETTS AVENUE, NW, #300, WASHINGTON, DC 20036

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BETH BROOKE-MARCINIAK BOARD CHAIR (AS OF 09/2016)	3.00	X		X				0.	0.	0.
(2) V. SUE MOLINA BOARD VICE CHAIR	1.00	X		X				0.	0.	0.
(3) AMBASSADOR CRAIG JOHNSTONE BOARD TREASURER	1.00	X		X				0.	0.	0.
(4) TINA BROWN BOARD DIRECTOR	1.00	X						0.	0.	0.
(5) CANDACE BROWNING BOARD DIRECTOR	1.00	X						0.	0.	0.
(6) KRISTIN CAMPBELL BOARD DIRECTOR	1.00	X						0.	0.	0.
(7) KAY ELLEN CONSOLVER BOARD DIRECTOR	1.00	X						0.	0.	0.
(8) SUSAN ANN DAVIS BOARD DIRECTOR	8.00	X						0.	0.	0.
(9) AMBASSADOR PAULA J. DOBRIANSKY BOARD DIRECTOR	1.00	X						0.	0.	0.
(10) SONNIE DOCKSER BOARD DIRECTOR	1.00	X						0.	0.	0.
(11) SAMIA FAROUKI BOARD DIRECTOR	1.00	X						0.	0.	0.
(12) SALLY FIELD BOARD DIRECTOR	1.00	X						0.	0.	0.
(13) NANCY FOLGER BOARD DIRECTOR	1.00	X						0.	0.	0.
(14) BARONESS MARY GOUDIE BOARD DIRECTOR	1.00	X						0.	0.	0.
(15) DR. KAREN OTAZO HOFMEISTER BOARD DIRECTOR	1.00	X						0.	0.	0.
(16) KATE JAMES BOARD DIRECTOR	1.00	X						0.	0.	0.
(17) DONNA LANGLEY BOARD DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) GERALDINE LAYBOURNE BOARD DIRECTOR	1.00	X						0.	0.	0.
(19) MARLENE MALEK BOARD DIRECTOR	1.00	X						0.	0.	0.
(20) BOBBIE GREENE MCCARTHY BOARD DIRECTOR	1.00	X						13,703.	0.	0.
(21) DONNA COCHRAN MCLARTY BOARD DIRECTOR	1.00	X						0.	0.	0.
(22) SUSAN NESS BOARD DIRECTOR	1.00	X						0.	0.	0.
(23) NANCY PRAGER-KAMEL BOARD DIRECTOR	1.00	X						0.	0.	0.
(24) VICTORIA SANT BOARD DIRECTOR	1.00	X						0.	0.	0.
(25) ROSELYNE SWIG BOARD DIRECTOR	1.00	X						0.	0.	0.
(26) KATHLEEN VAUGHAN BOARD DIRECTOR	1.00	X						0.	0.	0.
1b Sub-total								13,703.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,196,203.	0.	93,088.
d Total (add lines 1b and 1c)								1,209,906.	0.	93,088.

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

10

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
THE RITZ-CARLTON, ONE MIRAMONTES POINT ROAD, HALF MOON BAY, CA 94019	LODGING, CONFERENCE FACILITIES	396,187.
STILL MOTION, LLC 524 BURNSIDE STREET, PORTLAND, OR 97214	FILM DIRECTING, PRODUCTION	195,260.
HARDPIN MEDIA, LLC 648 BROADWAY, SUITE 200, NEW YORK, NY 10012	FILM DIRECTING, PRODUCTION	174,740.
IPSOS PUBLIC AFFAIRS, LLC, 2020 K STREET, NW, SUITE 410, WASHINGTON, DC 20006	MONITORING, EVAL. & RESEARCH	120,390.
RESTAURANT ASSOCIATES 2700 F STREET, NW, WASHINGTON, DC 20566	CATERING SERVICES	108,963.

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

6

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2016)

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	1,775,456.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,726,995.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,494,464.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			6,996,915.			
Program Service Revenue	2 a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,970.			1,970.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			2,730.			2,730.
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ 1,775,456. of contributions reported on line 1c). See Part IV, line 18	a		110,816.			
	b Less: direct expenses	b		746,588.			
	c Net income or (loss) from fundraising events			-635,772.			-635,772.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a SUBLEASE INCOME		900099	128,597.			128,597.	
b REFUNDS		900099	9,554.			9,554.	
c							
d All other revenue							
e Total. Add lines 11a-11d			138,151.				
12 Total revenue. See instructions.			6,503,994.	0.	0.	-492,921.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	216,448.	216,448.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	39,299.	39,299.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,085,101.	1,085,101.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	613,314.	182,897.	416,714.	13,703.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,699,640.	1,824,426.	439,513.	435,701.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	37,216.	23,897.	7,119.	6,200.
9 Other employee benefits	236,879.	154,606.	43,574.	38,699.
10 Payroll taxes	234,201.	142,711.	59,320.	32,170.
11 Fees for services (non-employees):				
a Management				
b Legal	22,875.	16,034.	6,841.	
c Accounting	62,107.		62,107.	
d Lobbying	89.	89.		
e Professional fundraising services. See Part IV, line 17	5,000.			5,000.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	1,191,287.	1,135,688.	29,397.	26,202.
12 Advertising and promotion				
13 Office expenses	236,020.	67,666.	140,879.	27,475.
14 Information technology	116,880.	67,366.	29,357.	20,157.
15 Royalties				
16 Occupancy	708,986.		708,986.	
17 Travel	1,619,226.	1,527,929.	52,118.	39,179.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	631,571.	620,757.		10,814.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,582.		24,582.	
23 Insurance	45,600.		45,600.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BAD DEBT EXPENSE	44,365.	35,000.	9,365.	
b G&A ALLOCATION	0.	1,237,672.	-1,354,966.	117,294.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	9,870,686.	8,377,586.	720,506.	772,594.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	4,170,892.	1	1,992,815.
	2 Savings and temporary cash investments	46,204.	2	1,401,684.
	3 Pledges and grants receivable, net	4,183,661.	3	1,437,847.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	19,631.	8	13,407.
	9 Prepaid expenses and deferred charges	294,494.	9	325,687.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 378,940.		
	b Less: accumulated depreciation	10b 291,847.	10c	87,093.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	70,733.	12	70,733.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	11,987.	15	23,252.
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,909,276.	16	5,352,518.	
Liabilities	17 Accounts payable and accrued expenses	441,228.	17	291,385.
	18 Grants payable		18	
	19 Deferred revenue	6,975.	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	983.	21	1,157.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	401,711.	25	368,289.
	26 Total liabilities. Add lines 17 through 25	850,897.	26	660,831.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,485,276.	27	1,619,620.
	28 Temporarily restricted net assets	6,573,103.	28	3,072,067.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	8,058,379.	33	4,691,687.
	34 Total liabilities and net assets/fund balances	8,909,276.	34	5,352,518.

Form 990 (2016)

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,503,994.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,870,686.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,366,692.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,058,379.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain 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	4,691,687.

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

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

Form 990 (2016)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

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

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

- 1 ☐ A church, convention, of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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.")	10050432.	13060167.	9582541.	12862692.	6996915.	52552747.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	10050432.	13060167.	9582541.	12862692.	6996915.	52552747.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						16068268.
6 Public support. Subtract line 5 from line 4.						36484479.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	10050432.	13060167.	9582541.	12862692.	6996915.	52552747.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	22,029.	41,323.	123,966.	127,028.	133,297.	447,643.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	4,828.	7,486.	2,773.	394.		15,481.
11 Total support. Add lines 7 through 10						53015871.
12 Gross receipts from related activities, etc. (see instructions)					12	508,549.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	68.82 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	68.82 %
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		<input checked="" type="checkbox"/>
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 and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 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.)

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐**b 33 1/3% support tests - 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2016

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

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions		
7	Total annual distributions. Add lines 1 through 6		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions		
9	Distributable amount for 2016 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
e	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**MISCELLANEOUS**

2012 AMOUNT: \$ 4,828.

2013 AMOUNT: \$ 7,486.

2014 AMOUNT: \$ 2,773.

2015 AMOUNT: \$ 394.

2016 AMOUNT: \$ 0.

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.

OMB No. 1545-0047

2016

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

Name of organization	Employer identification number
VITAL VOICES GLOBAL PARTNERSHIP, INC.	52-2151557

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 1,585,379.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 800,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 555,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 424,256.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 305,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
VITAL VOICES GLOBAL PARTNERSHIP, INC.	52-2151557

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 141,616.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

52-2151557

Part II

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 	 	\$ 	

COPY

Name of organization	Employer identification number
VITAL VOICES GLOBAL PARTNERSHIP, INC.	52-2151557

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

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

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

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.**

OMB No. 1545-0047

2016

**Open to Public
Inspection**

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) organizations: Complete Part III.

Name of organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

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

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

2 Political campaign activity expenditures ▶ \$

3 Volunteer hours for political campaign activities ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(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

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		1,491.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		5,965.													
c Total lobbying expenditures (add lines 1a and 1b)		7,456.													
d Other exempt purpose expenditures		9,858,230.													
e Total exempt purpose expenditures (add lines 1c and 1d)		9,865,686.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		643,284.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		160,821.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	688,210.	665,769.	670,692.	643,284.	2,667,955.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,001,933.
c Total lobbying expenditures	9,250.	7,649.	7,660.	7,456.	32,015.
d Grassroots nontaxable amount	172,053.	166,442.	167,673.	160,821.	666,989.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,000,484.
f Grassroots lobbying expenditures	6,475.	765.	4,596.	1,491.	13,327.

Schedule C (Form 990 or 990-EZ) 2016

(a)		(b)
Yes	No	Amount

- [illegible]

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		
		4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

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

2016

Open to Public Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

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

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

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

☐ Yes ☐ No

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

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

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

☐ Yes ☐ No

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X

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

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

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2016

632051 08-29-16

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☒ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☒

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Temporarily restricted endowment ☐ %

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

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

- (i) unrelated organizations
 (ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		175,174.	94,432.	80,742.
d Equipment		108,451.	102,100.	6,351.
e Other		95,315.	95,315.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				87,093.

Schedule D (Form 990) 2016

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) DEFERRED RENT AND LEASE BENEFIT	358,089.	
(3) SECURITY DEPOSIT	10,200.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	368,289.	

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	7,488,375.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	366,390.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	746,588.
e	Add lines 2a through 2d	2e	1,112,978.
3	Subtract line 2e from line 1	3	6,375,397.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	128,597.
c	Add lines 4a and 4b	4c	128,597.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	6,503,994.

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

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

1	Total expenses and losses per audited financial statements	1	10,855,067.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	366,390.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	746,588.
e	Add lines 2a through 2d	2e	1,112,978.
3	Subtract line 2e from line 1	3	9,742,089.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	128,597.
c	Add lines 4a and 4b	4c	128,597.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	9,870,686.

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 IV, LINE 2B:

AS OF DECEMBER 31 2016 VITAL VOICES HELD \$1,157 ON BEHALF OF OTHERS. THIS BALANCE IS REPORTED IN PART X, LINE 21. THE ESCROW FUNDS REPRESENT ROYALTY FUNDS FOR THE THEATRICAL PLAY, SEVEN. THESE FUNDS ARE COLLECTED AND DISTRIBUTED TO THE SEVEN VITAL VOICES NETWORK WOMEN PORTRAYED IN THE PLAY.

PART X, LINE 2:

VITAL VOICES PERFORMED AN EVALUATION OF ITS UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED DECEMBER 31, 2016, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

Part XIII Supplemental Information *(continued)*

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES	746,588.
------------------------	----------

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SUBLEASE EXPENSES	128,597.
-------------------	----------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES	746,588.
------------------------	----------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SUBLEASE EXPENSES	128,597.
-------------------	----------

**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.

OMB No. 1545-0047

2016**Open to Public
Inspection**

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SUB-SAHARAN AFRICA	0	6	PROGRAM SERVICES	HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING;	543,180.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		236,622.
SOUTH ASIA	0	2	PROGRAM SERVICES	HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING;	364,516.
SOUTH ASIA	0	0	GRANTMAKING		104,790.
SOUTH AMERICA	0	3	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR SMALL	216,219.
SOUTH AMERICA	0	0	GRANTMAKING		25,220.
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAM; HUMAN RIGHTS PROGRAMMING	64,998.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING		26,540.
3 a Sub-total	0	11			1,582,085.
b Total from continuation sheets to Part I	0	9			2,311,862.
c Totals (add lines 3a and 3b)	0	20			3,893,947.

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

Schedule F (Form 990) 2016

SEE PART V FOR COLUMN (E) DESCRIPTIONS

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	1	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, AND NETWORKING FOR SMALL AND	108,829.
NORTH AMERICA	0	0	GRANTMAKING		5,000.
MIDDLE EAST AND NORTH AFRICA	0	4	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, AND NETWORKING FOR SMALL AND	607,068.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		438,717.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUES OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING;	110,825.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		24,192.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	FUNDRAISING		16,476.
EAST ASIA AND THE PACIFIC	0	2	PROGRAM SERVICES	HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING AND VIOLENCE AGAINST WOMEN;	522,264.
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		49,636.
CENTRAL AMERICA AND THE CARIBBEAN	0	2	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR SMALL	254,471.
Totals					

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		174,384.
Totals		9			2,311,862.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	MENTORING PROGRAM FOR SME BUSINESSWOMEN.	15,319.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MENTORING PROGRAM FOR SME BUSINESSWOMEN.	10,920.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MENTORING PROGRAM FOR SME BUSINESSWOMEN.	10,080.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	8,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CAPACITY BUILDING GRANT.	24,056.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANT TO EXPAND A PROGRAM THAT STRENGTHENS GIRLS' CONFIDENCE AND	25,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CAPACITY BUILDING GRANT TO FOCUS ON AN ORGANIZATIONAL BRANDING,	51,008.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		

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

18

3 Enter total number of other organizations or entities

11

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2016

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	GRANT TO PROVIDE FUNDING TO REBRAND AND STRENGTHEN COMMUNICATIONS	25,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	292,403.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	10,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	SUPPORT FOR THE YOUNG WOMEN LEADERS BUILDING PEACE AND PROSPERITY PROGRAM IN	17,620.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANT TO INVEST IN TECHNOLOGY TO PROVIDE ONLINE LEARNING OPPORTUNITIES TO	15,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANT TO PROVIDE LEADERSHIP TRAINING TO FEMALE PARLIAMENTARY	25,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	MENTORING PROGRAM FOR SME BUSINESSWOMEN.	11,220.	WIRE TRANSFER	0.		
		SOUTH ASIA	ORGANIZATIONAL CAPACITY BUILDING GRANT.	14,050.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO HOLD TWO DANCE MOVEMENT THERAPY COURSES TO BENEFIT SURVIVORS OF	15,006.	WIRE TRANSFER	0.		
		SOUTH ASIA	CAPACITY BUILDING GRANT TO EXPAND SOCIAL ENTERPRISE'S OPERATIONS AND REACH.	25,035.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO SUPPORT SPORTS PROGRAM FOR GIRLS.	5,500.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE PRACTICAL LEADERSHIP, RESEARCH, AND ADVOCACY SKILLS IN	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	MENTORING PROGRAM FOR SME BUSINESSWOMEN.	12,808.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO COMPLETE THE CONSTRUCTION OF A REHABILITATION CENTER FOR VICTIMS OF HUMAN	50,000.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
GENDER BASED VIOLENCE EMERGENCY ASSISTANCE FUND	CENTRAL AMERICA AND THE CARIBBEAN	2	10,000.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE EMERGENCY ASSISTANCE FUND	EUROPE (INCLUDING ICELAND & GREENLAND)	1	6,006.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE EMERGENCY ASSISTANCE FUND	MIDDLE EAST AND NORTH AFRICA	15	53,693.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE EMERGENCY ASSISTANCE FUND	RUSSIA AND NEIGHBORING STATES	8	17,540.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE EMERGENCY ASSISTANCE FUND	SOUTH ASIA	6	12,011.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE EMERGENCY ASSISTANCE FUND	SUB-SAHARAN AFRICA	28	110,075.	WIRE TRANSFER	0.		

Part IV Foreign Forms

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

Schedule F (Form 990) 2016

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:

VITAL VOICES USES SOUND MONITORING AND EVALUATION PROCEDURES AND TOOLS FOR AWARDED GRANTS. FOR INSTANCE, ALL GRANT RECIPIENTS ARE REQUIRED TO ENTER INTO GRANT AWARD AGREEMENTS WITH VITAL VOICES, WHICH REQUIRE THEM TO PROVIDE NARRATIVE AND FINANCIAL REPORTING ON ALL FUNDS AWARDED. AS PART OF THE GRANT AGREEMENT, VITAL VOICES ALSO RESERVES THE RIGHT TO AUDIT, EXAMINE, AND MAKE OR REQUEST COPIES OF ALL ACCOUNTS, RECORDS, AND CORRESPONDENCE RELATED TO THE GRANT AS WELL AS REQUIRES THE GRANT RECIPIENT TO MAINTAIN GRANT RECORDS FOR AT LEAST 36 MONTHS AFTER THE AGREED UPON END DATE OF THE GRANT PERIOD. VITAL VOICES PERIODICALLY REQUESTS DOCUMENTATION SUPPORTING GRANT RECIPIENT FINANCIAL REPORTS AS PART OF ITS DUE DILIGENCE PRACTICES AND RESERVES THE RIGHT TO MAKE SITE VISITS.

IN 2014, VITAL VOICES BEGAN TO MANAGE A FUND TO PROVIDE EMERGENCY ASSISTANCE TO INDIVIDUALS FACING EXTREME ACTS OF GENDER-BASED VIOLENCE INCLUDING HARMFUL TRADITIONAL PRACTICES. THE EMERGENCY ASSISTANCE FUND PROVIDES SMALL SHORT-TERM GRANTS FOR EXPENSES THAT INCLUDE MEDICAL EXPENSES, PSYCHOSOCIAL SUPPORT OR COUNSELING, EMERGENCY SHELTER, RELOCATION EXPENSES, AND LIVELIHOOD. DUE TO THE SENSITIVE NATURE OF THIS SUPPORT, FINAL REPORTING IS NOT REQUIRED. EACH CASE IS THOROUGHLY VETTED THROUGH A RIGOROUS REFERRAL PROCESS.

PART I, LINE 3:

IN ACCORDANCE WITH IRS INSTRUCTIONS, ALL AMOUNTS REPORTED IN PARTS I, II, AND III OF SCHEDULE F ARE REPORTED USING THE ACCRUAL BASIS OF ACCOUNTING WHICH IS THE SAME METHOD OF ACCOUNTING USED IN THE FINANCIAL STATEMENTS.

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 3, COLUMN (E):

(E) SPECIFIC TYPES OF SERVICES IN REGION: HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING; NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAM.

(E) SPECIFIC TYPES OF SERVICES IN REGION: HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING; NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAM.

(E) SPECIFIC TYPES OF SERVICES IN REGION: BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR SMALL AND MEDIUM WOMEN OWNED BUSINESSES TRYING TO GROW; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND TRAFFICKING; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

(E) SPECIFIC TYPES OF SERVICES IN REGION: NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAM; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING.

(E) SPECIFIC TYPES OF SERVICES IN REGION: BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, AND NETWORKING FOR SMALL AND MEDIUM WOMEN OWNED BUSINESSES TRYING TO GROW; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

(E) SPECIFIC TYPES OF SERVICES IN REGION: BUSINESS AND LEADERSHIP

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.

TRAINING, TECHNICAL ASSISTANCE, AND NETWORKING FOR SMALL AND MEDIUM WOMEN OWNED BUSINESSES TRYING TO GROW; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

(E) SPECIFIC TYPES OF SERVICES IN REGION: HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUES OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING; NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAM.

(E) SPECIFIC TYPES OF SERVICES IN REGION: HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING AND VIOLENCE AGAINST WOMEN; NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAM.

(E) SPECIFIC TYPES OF SERVICES IN REGION: BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR SMALL AND MEDIUM WOMEN OWNED BUSINESSES TRYING TO GROW; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING.

PART II, COLUMN (D):

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: GRANT TO EXPAND A PROGRAM THAT STRENGTHENS GIRLS' CONFIDENCE AND PRACTICAL SKILLS IN RURAL GUATEMALA.

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: CAPACITY BUILDING GRANT TO FOCUS ON AN ORGANIZATIONAL BRANDING, COMMUNICATIONS, AND FUNDRAISING STRATEGY.

Part V Supplemental Information

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

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FUNDING TO REBRAND AND STRENGTHEN COMMUNICATIONS ACTIVITIES.

REGION: MIDDLE EAST AND NORTH AFRICA

(D) PURPOSE OF GRANT: SUPPORT FOR THE YOUNG WOMEN LEADERS BUILDING PEACE AND PROSPERITY PROGRAM IN ISRAEL.

REGION: MIDDLE EAST AND NORTH AFRICA

(D) PURPOSE OF GRANT: GRANT TO INVEST IN TECHNOLOGY TO PROVIDE ONLINE LEARNING OPPORTUNITIES TO WOMEN.

REGION: MIDDLE EAST AND NORTH AFRICA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE LEADERSHIP TRAINING TO FEMALE PARLIAMENTARY CANDIDATES.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO HOLD TWO DANCE MOVEMENT THERAPY COURSES TO BENEFIT SURVIVORS OF HUMAN TRAFFICKING AND SEXUAL VIOLENCE.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE PRACTICAL LEADERSHIP, RESEARCH, AND ADVOCACY SKILLS IN HIGHER EDUCATION ENVIRONMENT TO WOMEN LEADERS.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: GRANT TO COMPLETE THE CONSTRUCTION OF A

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

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?

☐ Yes☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(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
		Yes	No			
Total						

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.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 ANNUAL AWARDS GALA	(b) Event #2 SEATTLE DINNER	(c) Other events 4	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	1,086,713.	279,075.	520,484.	1,886,272.
	2 Less: Contributions	1,041,983.	262,750.	470,723.	1,775,456.
	3 Gross income (line 1 minus line 2)	44,730.	16,325.	49,761.	110,816.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes			21,351.	21,351.
	6 Rent/facility costs	91,054.	12,306.	44,491.	147,851.
	7 Food and beverages	120,538.	34,338.	81,784.	236,660.
	8 Entertainment	132,415.	1,500.	45,467.	179,382.
	9 Other direct expenses	103,611.	16,935.	40,798.	161,344.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				746,588.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-635,772.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

- 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 ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

- 16** Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

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, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

Part IV	Supplemental Information <i>(continued)</i>
----------------	--

[illegible]

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.**

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
PROMUNDO- U.S. 1367 CONNECTICUT AVENUE, NW, # 310 WASHINGTON, DC 20036	26-1931968	501(C)(3)	87,985.	0.			GENDER BASED VIOLENCE EMERGENCY RESPONSE AND PROTECTION INITIATIVE.
INTERNATIONAL ORGANIZATION FOR MIGRATION - 17, ROUTE DES MORILLONS - GENEVA, SWITZERLAND CH-1211	53-6003423		71,722.	0.			GENDER BASED VIOLENCE EMERGENCY RESPONSE AND PROTECTION INITIATIVE.
GLOBAL FUND FOR WOMEN, INC. 800 MARKET STREET, SEVENTH FLOOR SAN FRANCISCO, CA 94102	77-0155782	501(C)(3)	47,741.	0.			GENDER BASED VIOLENCE EMERGENCY RESPONSE AND PROTECTION INITIATIVE.
THE ORGANIZATION FOR PROSTITUTE SURVIVORS - 1609 19TH AVENUE - SEATTLE, WA 98122	45-5153408	501(C)(3)	9,000.	0.			GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **4.**

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

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

Schedule I (Form 990) (2016)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUPPORT FOR PROJECTS LED BY YOUNG WOMEN LEADERS IN THEIR COMMUNITIES.	51	39,299.	0.		

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

PART I, LINE 2:

VITAL VOICES USES SOUND MONITORING AND EVALUATION PROCEDURES AND TOOLS FOR GRANTS MADE TO ENTITIES OUTSIDE THE UNITED STATES. FOR INSTANCE, ALL GRANT RECIPIENTS ARE REQUIRED TO ENTER INTO A GRANT AWARD AGREEMENT WITH VITAL VOICES, WHICH REQUIRES THEM TO PROVIDE NARRATIVE AND FINANCIAL REPORTING ON ALL FUNDS AWARDED. AS PART OF THE GRANT AGREEMENT, VITAL VOICES ALSO RESERVES THE RIGHT TO AUDIT, EXAMINE, AND MAKE OR REQUEST COPIES OF ALL ACCOUNTS, RECORDS, AND CORRESPONDENCE RELATED TO THE GRANT AS WELL AS REQUIRES THE GRANT RECIPIENT TO MAINTAIN GRANT RECORDS FOR AT LEAST 36

Part IV Supplemental Information

MONTHS AFTER THE AGREED UPON END DATE OF THE GRANT PERIOD. VITAL VOICES PERIODICALLY REQUESTS DOCUMENTATION SUPPORTING GRANT RECIPIENT FINANCIAL REPORTS AS PART OF ITS DUE DILIGENCE PROCEDURES AND RESERVES THE RIGHT TO MAKE SITE VISITS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b		
2		
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ALYSE NELSON	(i)	204,750.	0.	0.	4,517.	11,545.	220,812.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ALVIN ALLGOOD	(i)	189,088.	0.	0.	0.	16,601.	205,689.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CYNTHIA DYER	(i)	152,996.	0.	0.	3,405.	16,709.	173,110.	0.
VP, HUMAN RIGHTS	(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:

BOBBIE GREENE MCCARTHY, VP DEVELOPMENT & ENGAGEMENT UNTIL AUGUST 2015,
RECEIVED A SEVERANCE PAYMENT OF \$13,703 DURING THE YEAR ENDED DECEMBER 31,
2016.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number
52-2151557

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

GLOBAL AMBASSADORS PROGRAM: THE GLOBAL AMBASSADORS PROGRAM (GAP) IS A
MULTI-YEAR PARTNERSHIP WITH BANK OF AMERICA, IN WHICH WOMEN LEADERS WHO
ARE AT A TIPPING POINT IN THEIR PROFESSIONAL, BUSINESS AND LEADERSHIP
PATHS (MENTEES) RECEIVE MENTORSHIP, TRAINING AND OPPORTUNITIES FOR
VISIBILITY FROM GLOBAL AMBASSADORS (MENTORS) WHO ARE GLOBAL LEADERS IN
THE BUSINESS, NONPROFIT, GOVERNMENT AND SOCIAL ENTERPRISE SECTORS.

IN 2016, VITAL VOICES ORGANIZED THE PROGRAM IN ENGLAND AND AUSTRALIA.
EACH PROGRAM ENGAGED TEN TO ELEVEN MENTEES WHO RECEIVED STRATEGIC
SUPPORT AND GUIDANCE FROM THEIR GLOBAL AMBASSADOR MENTORS TO IDENTIFY
ACTION STEPS AND ACHIEVE PROFESSIONAL GOALS. THESE WEEK-LONG PROGRAMS
INCLUDED ONE-ON-ONE AND GROUP MENTORING SESSIONS AND PUBLIC FORUMS TO
PROVIDE VISIBILITY ON CRITICAL ISSUES IMPEDING WOMEN'S ECONOMIC
ADVANCEMENT. TRAININGS RANGED FROM COMMUNICATIONS TO STRATEGIC
PLANNING, AND FROM FINANCIAL MANAGEMENT AND FUND-RAISING TO HUMAN
RESOURCES MANAGEMENT AND WORK/LIFE BALANCE.

THE GLOBAL AMBASSADORS PROGRAM HELD IN LONDON, ENGLAND, IN FEBRUARY
FOCUSED ON BUILDING THE CAPACITY OF WOMEN LEADERS OF NGO'S AS WELL AS
WOMEN IN BUSINESS AND SOCIAL ENTERPRISE ENGAGED IN THE MOST URGENT
ISSUES OF OUR TIME SUCH AS HUMANITARIAN CRISES, REBUILDING FRACTURED
COMMUNITIES AND PROMOTING INCLUSIVE GROWTH; THEY WERE FROM COUNTRIES IN
THE MIDDLE EAST & NORTH AFRICA (MENA) AS WELL AS EASTERN EUROPE, SUCH
AS BOSNIA AND GEORGIA.

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

THE GLOBAL AMBASSADORS PROGRAM HELD IN SYDNEY, AUSTRALIA IN OCTOBER FOCUSED ON ADDRESSING THE ONGOING NEEDS AND CHALLENGES FACING WOMEN BUSINESS LEADERS IN THE ASIA PACIFIC REGION. IT CENTERED ON THE THEME OF "EMPOWERING WOMEN LEADERS TO ADVANCE SUSTAINABLE DEVELOPMENT," AND THE 10 MENTEES REPRESENTED AUSTRALIA, NEW ZEALAND, VIETNAM, FIJI, PAPUA NEW GUINEA, MYANMAR AND THE PHILIPPINES.

FORTUNE/U.S. STATE DEPARTMENT GLOBAL WOMEN'S MENTORING PARTNERSHIP: THROUGH A PARTNERSHIP WITH THE U.S. DEPARTMENT OF STATE AND FORTUNE'S MOST POWERFUL WOMEN, VITAL VOICES GATHERED 13 EMERGING LEADERS FROM NINE COUNTRIES ACROSS THE GLOBE TO COME TO THE UNITED STATES FOR A MONTH-LONG MENTORING PROGRAM. THE PROGRAM CONNECTED PARTICIPANTS WITH FORTUNE'S MOST POWERFUL WOMEN AND THEIR EXECUTIVE TEAMS AS MENTORS AND INCLUDED LEADERSHIP AND COMMUNICATION TRAININGS, DISCUSSIONS WITH AMERICAN WOMEN LEADERS ABOUT THEIR PERSONAL AND PROFESSIONAL JOURNEYS AND NETWORKING EVENTS.

VV GROW FELLOWSHIP: THE VITAL VOICES GROW FELLOWSHIP (VV GROW FELLOWSHIP) IS A HIGHLY COMPETITIVE ONE-YEAR ACCELERATOR PROGRAM FOR WOMEN OWNERS OF SMALL- AND MEDIUM-SIZED BUSINESSES. THE PROGRAM INCLUDES CUSTOMIZED BUSINESS SKILLS TRAINING, TECHNICAL ASSISTANCE, LEADERSHIP DEVELOPMENT, AND ACCESS TO NETWORKS TO GROW THEIR BUSINESS AND INCREASE THEIR LEADERSHIP IMPACT. THROUGH GLOBAL AND REGIONAL ONLINE AND IN-PERSON INTERVENTIONS, FELLOWS FOCUS ON STRATEGY AND LONG-TERM BUSINESS VALUE PAIRED WITH ACTION-ORIENTED PLANS. THEY AMPLIFY THEIR ROLE AS LEADERS IN THEIR BUSINESSES AND THEIR COMMUNITIES TO ULTIMATELY CREATE JOBS, STIMULATE LONG-TERM ECONOMIC GROWTH AND PRODUCE WIDER SOCIAL BENEFITS.

Name of the organization	Employer identification number
VITAL VOICES GLOBAL PARTNERSHIP, INC.	52-2151557

IN 2016 VITAL VOICES PARTNERED WITH WOMEN WHO OWN SMALL- AND MEDIUM-SIZED BUSINESSES THROUGH THE VV GROW FELLOWSHIP TO HELP THEM ACHIEVE THEIR BUSINESS GROWTH GOALS. A TOTAL OF 61 FELLOWS FROM 32 COUNTRIES IN COHORT 3: 2015-2016 VVGROW FELLOWSHIP GRADUATED FROM THE PROGRAM IN JUNE 2016. VITAL VOICES AND A TEAM OF CONSULTANTS AND EXTERNAL EXPERTS FURTHER REFINED A GLOBAL TRAINING CURRICULUM DEVELOPED IN 2013 FOR THE COHORT 4: 2016-2017 VV GROW FELLOWSHIP, WHICH WAS THEN TAILORED TO ACHIEVE LEARNING OBJECTIVES BASED ON THE DIVERSE NEEDS ACROSS REGIONS. THE CURRICULUM INCLUDED MODULES ON FINANCIAL MANAGEMENT FOR EXECUTIVES, VISIONARY LEADERSHIP, STRATEGIC NETWORKING, PLANNING FOR GROWTH AND MOBILIZING MARKETS.

THE 2016-2017 FELLOWSHIP INVOLVED AN INTENSIVE PARTICIPANT RECRUITMENT AND SELECTION PROCESS; ONLINE TRAINING; THREE REGIONAL, IN-PERSON TRAININGS AND INDIVIDUALIZED GROWTH SERVICES AND SUPPORT TO ADDRESS THE UNIQUE NEEDS OF EACH FELLOW'S BUSINESS. IN OCTOBER 2016, THREE FOUR-DAY REGIONAL, IN-PERSON TRAININGS WERE HELD IN MEXICO CITY, MEXICO; AMMAN, JORDAN; AND CAPE TOWN, SOUTH AFRICA; WHERE 20-23 FELLOWS PER REGION WORKED WITH EXPERT TRAINERS AND VITAL VOICES STAFF TO BUILD THEIR KNOWLEDGE, SKILLS, AND NETWORKS AND MAKE PROGRESS TOWARD THEIR GROWTH GOALS. WITH THE SUPPORT OF VITAL VOICES STAFF AND TRAINERS, FELLOWS ESTABLISHED ONE- TO THREE-YEAR BUSINESS GROWTH GOALS AND ACTION PLANS TO ACHIEVE THEM. THROUGH THE FINAL SIX MONTHS OF THE FELLOWSHIP IN 2017, VITAL VOICES STAFF WILL CONNECT FELLOWS TO RESOURCES AND SUPPORT TO MEET THEIR UNIQUE NEEDS AND ACHIEVE THEIR BUSINESS GROWTH GOALS.

VV GROW MENTORING: THE VITAL VOICES GROW MENTORING PROGRAM PAIRS WOMEN

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

OWNERS OF SMALL- AND MEDIUM-SIZED BUSINESSES WITH CORPORATE EXECUTIVE MENTORS. FOR SIX MONTHS, MENTORS AND MENTEES WORK TOGETHER TO DEFINE AND MAKE PROGRESS TOWARD SHORT-TERM BUSINESS GROWTH GOALS. THE PROGRAM INCORPORATES MENTORING BEST PRACTICES FROM PARTNER ORGANIZATIONS IN 10 COUNTRIES AND FACILITATES INDIVIDUALIZED BUSINESS ADVICE, CONFIDENCE BUILDING AND NETWORKING OPPORTUNITIES. THROUGH THE PROGRAM, THE MENTEES AMPLIFY THEIR ROLE AS LEADERS IN THEIR BUSINESSES AND COMMUNITIES TO ULTIMATELY CREATE JOBS, STIMULATE LONG-TERM ECONOMIC GROWTH AND PRODUCE WIDER SOCIAL BENEFITS.

IN 2016, CITI FOUNDATION FUNDED THE COMPLETION OF A THIRD ROUND OF PILOT PROGRAMS THAT BEGAN IN 2015, REACHING A TOTAL OF 76 MENTEES IN FIVE COUNTRIES: ARGENTINA, COSTA RICA, EL SALVADOR, HONDURAS, AND SOUTH AFRICA.

ANNPOWER INITIATIVE: VITAL VOICES, IN PARTNERSHIP WITH ANN INC., SELECTED 50 YOUNG WOMEN FROM ACROSS THE US TO PARTICIPATE IN A TRAINING AND MENTORSHIP PROGRAM HELD IN NEW YORK CITY, FOR THREE DAYS. SELECTED PARTICIPANTS, WHO ARE RISING JUNIORS AND SENIORS IN HIGH SCHOOL, WORKED TOGETHER TO DEVELOP COMMUNITY PROJECTS AND WERE ADVISED BY ESTABLISHED WOMEN LEADERS FROM ACROSS THE WORLD. VITAL VOICES MANAGED THE RECRUITMENT AND APPLICATION PROCESS, IMPLEMENTED THE LEADERSHIP TRAINING CURRICULUM AND ENCOURAGED ONGOING MENTORING RELATIONSHIPS AND PEER CONNECTIONS AMONGST THE GROUP. AFTER UNDERGOING LEADERSHIP TRAINING, PARTICIPANTS WERE INVITED TO APPLY FOR SMALL GRANTS TO IMPLEMENT PROJECTS THAT POSITIVELY IMPACT THEIR COMMUNITIES.

IN 2016, SMALL GRANTS WERE AWARDED TO PARTICIPANT PROJECTS. THE 2016

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

ANNPOWER PROJECTS INCLUDED EFFORTS TO EDUCATE YOUNG WOMEN ABOUT CAREER OPPORTUNITIES, INCREASE LITERACY RATES AND BUILD THE LEADERSHIP SKILLS FOR LOW-INCOME YOUTH IN THE LOS ANGELES AREA, PROMOTE SELF-ESTEEM AMONG DISABLED YOUTH, AND PROVIDE HYGIENE PRODUCTS TO YOUTH LIVING IN POVERTY. VITAL VOICES MANAGED THE GRANT APPLICATION AND REVIEW PROCESS, INCLUDING ADDITIONAL WORK WITH PROSPECTIVE GRANTEEES REQUIRING FURTHER GUIDANCE WITH GRANT PROPOSALS. THROUGHOUT THE GRANT PERIOD, VITAL VOICES MENTORS THE GRANTEEES TO ENSURE SUCCESSFUL IMPLEMENTATION OF PROJECT GRANTS.

IN OCTOBER, VITAL VOICES SELECTED SIX ANNPOWER FELLOWS TO PARTICIPATE IN A TRIP TO HALF MOON BAY CALIFORNIA TO PARTICIPATE IN THE VV100 STRATEGIC GATHERING. THE ANNPOWER GLOBAL DELEGATES WERE FULL PARTICIPANTS IN THE CONFERENCE, HEARING FROM TOP EXPERTS AND LEADERS WHO ARE MAKING REAL IMPACT IN EVERY CORNER OF THE WORLD. THE RETREAT INCLUDED KEYNOTE ADDRESSES FROM HIGH-PROFILE SPEAKERS, STORIES FROM PEOPLE WORKING ON CRITICAL GLOBAL ISSUES EVERY DAY, AND ACTION GROUPS WHERE ALL PARTICIPANTS WERE A PART OF DESIGNING SOLUTIONS TO THESE CHALLENGES. IN ADDITION TO ATTENDING THE CONFERENCE, DELEGATES PARTICIPATED IN LEADERSHIP AND COMMUNICATIONS TRAINING TO HELP THEM GROW AS LEADERS AND MAKE THE MOST OUT OF THEIR EXPERIENCE.

GLOBAL FREEDOM EXCHANGE: THE FOURTH ANNUAL GLOBAL FREEDOM EXCHANGE, A VITAL VOICES AND HILTON WORLDWIDE PARTNERSHIP, PROVIDED A DYNAMIC EDUCATIONAL AND MENTORING OPPORTUNITY FOR EMERGING AND ESTABLISHED WOMEN LEADERS WHO ARE ON THE FOREFRONT OF GLOBAL EFFORTS TO PREVENT AND RESPOND TO CHILD TRAFFICKING. THE GLOBAL FREEDOM EXCHANGE BROUGHT TOGETHER A SELECT GROUP OF 22 WOMEN NGO LEADERS FROM COUNTRIES AROUND

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

THE WORLD TO PARTICIPATE IN A TWO-WEEK FELLOWSHIP PROGRAM. THE PROGRAM TOOK PLACE IN NOVEMBER AND SPANNED THREE US METROPOLITAN AREAS:

WASHINGTON, DC; NEW YORK CITY, NEW YORK; AND DALLAS, TEXAS. ACTIVITIES INCLUDED OPPORTUNITIES TO MEET WITH GOVERNMENT OFFICIALS, TO DISCUSS BEST PRACTICES WITH NGO LEADERS, TO PROVIDE DONORS WITH KNOWLEDGE ABOUT FUNDING NEEDS AND THE BEST MECHANISMS FOR SUPPORT AND TO LEARN ABOUT COLLABORATIVE APPROACHES TO WORKING WITH LOCAL LAW ENFORCEMENT. THIS PROGRAM PROVIDED PARTICIPANTS WITH SPECIFIC KNOWLEDGE, SKILLS AND RELATIONSHIPS THAT BENEFITTED THEIR PROFESSIONAL DEVELOPMENT, THEIR RESPECTIVE NGOS AND THE COMMUNITIES THEY SERVE. VITAL VOICES ALSO PROVIDED GRANTS TO SUPPORT THE WORK OF THE FELLOWS IN THEIR HOME COUNTRIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

JUSTICE INSTITUTES: SINCE 2010, VITAL VOICES HAS BEEN INVESTING IN HUMAN RIGHTS LEADERS BY CO-IMPLEMENTING THE INSTITUTE MODEL, WHICH BRINGS TOGETHER JUDGES, PROSECUTORS, POLICE OFFICERS AND REPRESENTATIVES OF BOTH GOVERNMENTAL AND NON-GOVERNMENTAL VICTIM SERVICES PROVIDERS FOR MULTI-DISCIPLINARY TRAININGS IN THEIR HOME COUNTRIES. THE INNOVATIVE AND INTERACTIVE TRAINING MODEL FOCUSES ON THE INVESTIGATION AND PROSECUTION OF CRIMES OF VIOLENCE AGAINST WOMEN AND FACILITATES THE CREATION OF A HOLISTIC AND VICTIM-CENTERED RESPONSE TO SUCH CRIMES. IT IS ONE COMPREHENSIVE RESOURCE THAT VITAL VOICES IS ABLE TO OFFER TO WOMEN IN OUR NETWORK WHO ARE TACKLING SEXUAL VIOLENCE AND HUMAN TRAFFICKING IN THEIR HOME COMMUNITIES. IN 2016, AS PART OF THE GENDER-BASED VIOLENCE EMERGENCY RESPONSE AND PROTECTION INITIATIVE, VITAL VOICES WITH SUPPORT FROM THE AVON FOUNDATION FOR WOMEN IMPLEMENTED THE INSTITUTE MODEL IN PARTNERSHIP WITH NETWORK MEMBERS IN THE PHILIPPINES, COLOMBIA, INDIA, ARGENTINA, AND SOUTH AFRICA. A

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

US-BASED DELEGATION WORKED ALONGSIDE FIVE LOCAL TRAINERS TO CARRY OUT THE FOUR-DAY MULTI-DISCIPLINARY TRAINING FOR 50-60 PARTICIPANTS IN EACH LOCATION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THE GLOBAL LEADERSHIP AWARDS, HONORING UNSUNG HEROES AND COURAGEOUS LEADERS WORKING TO STRENGTHEN DEMOCRACY, INCREASE ECONOMIC OPPORTUNITY AND PROTECT HUMAN RIGHTS IN COMMUNITIES AROUND THE WORLD. THE GLOBAL LEADERSHIP AWARDS HONOREE PROGRAM PROVIDES CUSTOMIZED AND TAILORED SUPPORT THAT INCLUDES NETWORKING OPPORTUNITIES, CAPACITY BUILDING AND HIGH PROFILE THOUGHT-LEADERSHIP EVENTS TO GIVE GREATER CREDIBILITY AND VISIBILITY TO THE HONOREES FOR THE EIGHT DAYS THEY ARE IN WASHINGTON, DC. IN 2016, VITAL VOICES HONORED FOUR LEADERS WHO HAD BOLD VISIONS TO MAKE LASTING CHANGES IN THEIR COUNTRIES, AT AN EVENING PROGRAM ATTENDED BY OVER 1,000 GUESTS. IN ADDITION TO RECOGNIZING THESE LEADERS AT THE EVENT, VITAL VOICES HOSTED A WEEK-LONG HONOREE PROGRAM IN WASHINGTON, DC, THAT INCLUDED CAPACITY-BUILDING TRAINING, THOUGHT LEADERSHIP EVENTS AND ACCESS TO DECISION MAKERS THROUGH MEETINGS AND NETWORKING OPPORTUNITIES. THROUGH CONTINUING PARTNERSHIPS WITH SKDKNICKERBOCKER AND JOHNSON & JOHNSON'S HUMAN PERFORMANCE INSTITUTE, VITAL VOICES WAS ABLE TO PROVIDE TARGETED MEDIA OUTREACH AND TRAINING FOR EACH HONOREE TO ENABLE THEM TO BETTER USE THEIR TIME AND ENERGY AS LEADERS. FINALLY, THE WORK OF EACH HONOREE WAS FEATURED USING FILM, PHOTOGRAPHY AND SOCIAL MEDIA PLATFORMS TO RAISE THEIR RESPECTIVE PUBLIC PROFILES AND BUILD AWARENESS AND VISIBILITY FOR THE LEADERS AND THEIR WORK.

DVF AWARDS: VITAL VOICES PARTNERS WITH THE DILLER VON FURSTENBERG FAMILY FOUNDATION TO HONOR EXTRAORDINARY WOMEN IN THE VITAL VOICES NETWORK WHO ARE INITIATING POSITIVE CHANGES IN THEIR COMMUNITIES. VITAL

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

VOICES PROVIDES SUPPORT TO THE HONOREES AND MANAGES A GRANT AWARD THAT ENABLES THE HONOREES TO IMPLEMENT CRITICAL PROGRAMMING. IN 2016, THE HONOREES WERE AGNES AGOYE AND MARIA PACHECO. AGNES HAS DEDICATED THE PAST 16 YEARS OF HER LIFE TO BETTERING THE LIVES OF WOMEN AND GIRLS IN LIBERIA. SHE WAS HONORED FOR HER UNWAVERING DEDICATION TO THIS CAUSE; AND TO SUPPORT HER AS SHE BUILDS THE DREAM RETRIEVAL CENTER, A COMPREHENSIVE CARE CENTER FOR SURVIVORS OF HUMAN TRAFFICKING. MARIA IS THE CO-FOUNDER AND PRESIDENT OF WAKAMI, A GROUP DEDICATED TO LINKING RURAL COMMUNITIES TO MARKETS AS A WAY TO GENERATE A PROSPERITY THAT STARTS IN REMOTE COMMUNITIES OF GUATEMALA. WAKAMI IS CURRENTLY EXPORTING FASHION ACCESSORIES TO 24 COUNTRIES, AND ITS PRODUCTS PROVIDE A SOURCE OF INCOME TO OVER 500 RURAL PEOPLE, 92% OF WHOM ARE WOMEN. MARIA WAS HONORED FOR THE INCREDIBLE IMPACT SHE HAS ALREADY ACHIEVED AND FOR THE VISION SHE HAS TO SCALE HER WORK TO AN EVEN GREATER LEVEL.

INNOVATION PARTNERSHIPS STRATEGIC PLANNING RETREAT: IN JUNE, VITAL VOICES ORGANIZED A STRATEGIC PLANNING RETREAT FOR THREE MEMBERS OF OUR GLOBAL LEADERSHIP NETWORK SAMAR MINALLAH, KAH WALLA, AND YIN MYO SU WHICH BROUGHT TOGETHER LEADING STRATEGIC THINKERS, THOUGHT LEADERS AND ISSUE AREA EXPERTS TO SERVE AS EXPERT ADVISORS TO EACH WOMAN LEADER. THESE ADVISORS CHALLENGED EACH WOMAN TO CRITICALLY ANALYZE HER WORK, ESTABLISH REALISTIC GOALS, AND BEGIN CREATING A LONG-TERM, STRATEGIC PLAN FOR ACHIEVING HER VISION FOR HER COMMUNITY. FOLLOWING THE RETREAT, SAMAR, MISUU AND KAH HAD THE OPPORTUNITY TO RECEIVE FINANCIAL SUPPORT TO IMMEDIATELY IMPLEMENT THE GOALS AND OBJECTIVES SET OUT IN THEIR STRATEGIC PLAN.

VV100 STRATEGIC GATHERING: FOR THE FIRST TIME IN ITS HISTORY, VITAL

Name of the organization	Employer identification number
VITAL VOICES GLOBAL PARTNERSHIP, INC.	52-2151557

VOICES CONVENED THE MOST EXCEPTIONAL 100 WOMEN IN THE VITAL VOICES GLOBAL LEADERSHIP NETWORK THROUGH A STRATEGIC PARTNERSHIP WITH JOHNSON & JOHNSON. FOR THE VV100 STRATEGIC GATHERING, PARTICIPANTS CAME TOGETHER IN HALF MOON BAY, CALIFORNIA, FOR A FOUR-DAY PROGRAM OF INDIVIDUALIZED CAPACITY BUILDING, INCLUDING JOHNSON & JOHNSON'S HUMAN PERFORMANCE INSTITUTE; SHARING OF BEST PRACTICES ACROSS THE NETWORK AND PROBLEM-SOLVING AMONG NETWORK PEERS; AND PARTNERING WITH VITAL VOICES TO GALVANIZE THE LARGER GLOBAL LEADERSHIP NETWORK.

INNOVATION PARTNERSHIPS MONITORING & EVALUATION: IN 2016, VITAL VOICES LAUNCHED A NEW PARTNERSHIP WITH THE GATES FOUNDATION TO PILOT AN INNOVATIVE RESEARCH METHODOLOGY THAT SCALES THE VITAL VOICES MONITORING AND EVALUATION (M&E) AND RESEARCH METHODOLOGY. THE PROJECT AIMS TO PROVE HOW AND WHY OUR MODEL OF MAKING INVESTMENTS IN A SMALL GROUP OF PROVEN WOMEN LEADERS WILL ACHIEVE LARGE SCALE AND SUSTAINABLE IMPACT IN THEIR COMMUNITIES AND AROUND THE WORLD. IPSOS PUBLIC AFFAIRS WAS SELECTED AS THE RESEARCH PARTNER FOR THIS PROJECT. IN 2016, VITAL VOICES AND IPSOS CONDUCTED EXPLORATORY RESEARCH, SUCH AS ORGANIZATIONAL INTERVIEWS, LITERATURE REVIEWS, AND CASE STUDIES; SELECTED PARTICIPANTS FOR THE PROJECT; AND DESIGNED THE INSTRUMENTS AND PILOT EVALUATIONS FOR EACH PARTICIPANT.

PROTECTION AND EMPOWERMENT OF WOMEN AND GIRLS IN IRAQI KURDISTAN: SINCE 2015 VITAL VOICES HAS OPERATED A PROGRAM FOCUSED ON INVESTING IN, AND IMPROVING THE CAPACITY OF, ONE OF THE TOP WOMEN LEADERS IN OUR NETWORK. OUR SUPPORT OF THIS FEMALE LEADER IS ENABLING HER TO IMPROVE AND ENHANCE THE COMPREHENSIVE SERVICES AVAILABLE TO SURVIVORS OF GENDER BASED VIOLENCE IN IRAQI KURDISTAN.

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

LEADERSHIP NETWORK MEMBERS LED 86 WALKS IN 57 COUNTRIES AROUND THE WORLD.

GENDER BASED VIOLENCE EMERGENCY RESPONSE AND PROTECTION INITIATIVE:

PUBLICLY LAUNCHED IN MARCH 2014, THE GENDER BASED VIOLENCE EMERGENCY RESPONSE AND PROTECTION INITIATIVE IS DESIGNED TO ADDRESS EXTREME FORMS OF GENDER-BASED VIOLENCE AND HARMFUL TRADITIONAL PRACTICES AROUND THE WORLD. WITH SUPPORT FROM THE US DEPARTMENT OF STATE'S BUREAU OF DEMOCRACY, HUMAN RIGHTS & LABOR, THE PROGRAM AIMS TO ACHIEVE THE FOLLOWING THREE OBJECTIVES: 1) PROVIDE EMERGENCY ASSISTANCE TO THOSE FACING EXTREME ACTS OF GENDER-BASED VIOLENCE (GBV) INCLUDING HARMFUL TRADITIONAL PRACTICES; 2) PROVIDE ADVOCACY, SUPPORT, PREVENTION AND TECHNICAL ASSISTANCE TO GBV SURVIVORS AND THOSE WORKING TO ADDRESS GENDER-BASED VIOLENCE; AND 3) PROVIDE A FOCAL POINT TO IMPROVING GBV REGIONAL AND INTERNATIONAL NETWORK COORDINATION. THE EMERGENCY ASSISTANCE PROVIDES SHORT-TERM GRANTS FOR EXPENSES THAT INCLUDE MEDICAL EXPENSES, PSYCHOSOCIAL SUPPORT OR COUNSELING, EMERGENCY SHELTER, RELOCATION EXPENSES AND LIVELIHOOD. THE GBV INITIATIVE HAS PROVIDED THE EXTENSIVE NETWORK OF WOMEN LEADERS THAT VITAL VOICES SUPPORTS WITH INFORMATION ABOUT THE EMERGENCY ASSISTANCE AND HOW TO REFER SURVIVORS. IN 2016, VITAL VOICES CONTINUED TO ENGAGE MEMBERS OF THE NETWORK BY INCORPORATING THEM AND THEIR ORGANIZATIONS INTO THE ADVISORY COUNCIL FOR THE INITIATIVE, ADDING THEIR ORGANIZATIONS TO THE BROADER GLOBAL NETWORK OF GBV SERVICE PROVIDERS MAINTAINED BY VITAL VOICES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

GLOBAL ENGAGEMENT AND PUBLIC AWARENESS

EXPENSES \$ 298,096. INCLUDING GRANTS OF \$ 2,583. REVENUE \$ 0.

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

THE FEDERAL FORM 990 IS PREPARED BY VITAL VOICES' OUTSIDE TAX PREPARERS. THE OUTSIDE TAX PREPARERS SEND THE COMPLETED DRAFT FEDERAL FORM 990 TO VITAL VOICES FINANCE AND EXECUTIVE PERSONNEL. THE VICE PRESIDENT OF FINANCE AND ADMINISTRATION, THE PRESIDENT AND CEO, AND THE CHIEF OPERATING OFFICER REVIEW THE DRAFT FEDERAL FORM 990 FOR ACCURACY. THEN, THE DRAFT FEDERAL FORM 990 IS DISSEMINATED TO THE FINANCE AND AUDIT COMMITTEES. ONCE THESE COMMITTEES HAVE REVIEWED AND PROVIDED ANY COMMENTS OR EDITS, THE DRAFT FEDERAL FORM 990 IS DISSEMINATED TO THE BOARD OF DIRECTORS TO PROVIDE ANY COMMENTS. IF THERE ARE ANY RESULTING CHANGES PER THEIR REVIEW, THESE EDITS ARE MADE AND THEN A FINAL DRAFT FEDERAL FORM 990 IS RE-CIRCULATED TO THE FULL BOARD OF DIRECTORS FOR THEIR REVIEW PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

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

BOARD MEMBERS FILE A CONFLICT OF INTEREST STATEMENT ON AN ANNUAL BASIS, WHICH IS FILED WITH THE CHAIRMAN OF THE BOARD INDICATING WHETHER THERE ARE ANY POTENTIAL CONFLICTS OF INTEREST THAT MIGHT BE EXPECTED TO OCCUR WITHIN THE FOLLOWING YEAR. ANY SUCH POTENTIAL CONFLICTS WILL BE REPORTED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE SHALL DECIDE WHETHER THE BOARD MEMBER WITH SUCH POTENTIAL CONFLICT OF INTEREST SHALL BE REQUIRED EITHER TO DIVEST SUCH INTEREST OR TO RESIGN FROM THE BOARD OF DIRECTORS.

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

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

VITAL VOICES ENGAGED A THIRD PARTY COMPENSATION CONSULTANT IN 2011 TO PERFORM A SALARY SURVEY SUPPORTED BY RESEARCH OF CURRENT MARKET DATA AS WELL AS THE FORM 990 DATA OF OTHER ORGANIZATIONS FOR COMPARABLE POSITION LEVELS WITHIN THE INDUSTRY. THE CONSULTANT THEN USED THIS SURVEY TO UPDATE THE EXISTING ORGANIZATIONAL CAREER (POSITION) LEVELS AND SALARY RANGES FOR ALL LEVELS WITHIN THE ORGANIZATION INCLUDING THE PRESIDENT AND CEO.

AS PART OF VITAL VOICES' FISCAL YEAR BUDGET PROCESS, A SALARY BUDGET IS DEVELOPED BY MANAGEMENT WITH ANY REASONABLE MERIT INCREASE ASSUMPTIONS. THE FISCAL YEAR BUDGET IS PROPOSED TO THE FINANCE COMMITTEE AND THEN THE EXECUTIVE COMMITTEE AND FULL BOARD OF DIRECTORS FOR APPROVAL.

THE PRESIDENT AND CEO'S SALARY IS SET ANNUALLY BY A COMMITTEE OF THE BOARD OF DIRECTORS AS PART OF A YEARLY REVIEW PROCESS. OTHER OFFICER AND KEY EMPLOYEE INITIAL SALARIES ARE SET BY THE PRESIDENT AND CEO WITH THE APPROVAL OF BOARD OFFICERS."

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AR,CA,CT,GA,CO,GA,HI,IL,KS,KY,MA,MD,MI,MS,NH,NJ,NM,NY,OH,OK,OR,PA,SC,TN,UT
VA,WV

FORM 990, PART VI, SECTION C, LINE 19:
VITAL VOICES MAKES ITS FEDERAL FORM 990 AND ITS AUDITED FINANCIAL STATEMENTS AVAILABLE ON ITS WEBSITE. OUR FEDERAL FORM 1023, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

TECHNICAL SUPPORT AND TRAINING FEES:

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

PROGRAM SERVICE EXPENSES 637,942.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 637,942.

OTHER CONSULTING FEES:

PROGRAM SERVICE EXPENSES 497,746.

MANAGEMENT AND GENERAL EXPENSES 29,397.

FUNDRAISING EXPENSES 26,202.

TOTAL EXPENSES 553,345.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 1,191,287.