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.

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OMB No. 1545-0047 Open to Public Inspection

and ending A For the 2017 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change VITAL VOICES GLOBAL PARTNERSHIP, INC. Name change 52-2151557 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 1625 MASSACHUSETTS AVENUE, NW l3 0 0 (202)861-2625 termin-ated 16,020,800. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return WASHINGTON, DC 20036 H(a) Is this a group return Applica-F Name and address of principal officer: ALYSE NELSON Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) (4947(a)(1) or) ◀ (insert no.) If "No," attach a list. (see instructions) J Website: ► WWW.VITALVOICES.ORG **H(c)** Group exemption number ▶ **K** Form of organization: **X** Corporation Association Other > L Year of formation: 1999 M State of legal domicile: DE Part I Summary Briefly describe the organization's mission or most significant activities: VITAL VOICES INVESTS IN WOMEN Activities & Governance LEADERS GLOBALLY TO ACCELERATE PROSPERITY IN THEIR COMMUNITIES. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 29 Number of voting members of the governing body (Part VI, line 1a) <u>29</u> Number of independent voting members of the governing body (Part VI, line 1b) 70 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 100 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 6,996,915. 15,691,024.Contributions and grants (Part VIII, line 1h) Revenue 0. 0. Program service revenue (Part VIII, line 2g) 1,970. 2,848. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -494,891**.** -467,193. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,503,994. 15,226,679. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,340,848. 2,601,058. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 3,821,250. 4,496,922. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 5,000. 85,000. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 4,593,750. 4,703,588 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,870,686. 11,776,730. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -3,366,692. 3,449,949. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5,352,518. 8,996,164. 20 Total assets (Part X, line 16) 854,528. 660,831. 21 Total liabilities (Part X, line 26) 8,141,636. 4,691,687. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign ALYSE NELSON, PRESIDENT AND CEO Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature if self-employed 07/20/18 FRANK H. SMITH P00639053 Paid 52-1511275 Firm's name RAFFA, P.C. Preparer Firm's EIN ▶ Firm's address 1899 L STREET, NW, SUITE 850 Use Only Phone no. (202) 822-5000 WASHINGTON, DC 20036 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions) Form **990** (2017)

COPY

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	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?
	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?
	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 \$
	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 \$2,685,939. including grants of \$1,678,302.) (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.
	GLODAL MENTODING WALK MED ON MUE GAME DAY IN CONTENTED ACROSS MUE
	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 2017, THE 10TH ANNUAL GLOBAL MENTORING WALK WAS
	HELD ON MARCH 11 TO COINCIDE WITH THE WEEK OF INTERNATIONAL WOMEN'S
4c	(Code:) (Expenses \$ 1,944,409. INDIVIDUALIZED INVESTMENTS: 485,216.) (Revenue \$
	INDIVIDUALIZED INVESIMENTS:
	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.
	10 HELL THEN DOUBLE OF THEIR WORK MAD MONTHULE EVEN GREATER THEACT.
	GLOBAL LEADERSHIP AWARDS HONOREE PROGRAM: EACH YEAR, VITAL VOICES HOSTS
	Other program services (Describe in Schedule O.)
4 0	200 000
40	(Expenses \$ 399,900 • including grants of \$) (Revenue \$) Total program service expenses ► 10,231,038 •
-10	Form 990 (2017)
73200	SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	<u> </u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		37	
	during the tax year? If "Yes," complete Schedule C, Part II	4	<u> </u>	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
0	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		
8	Schedule D, Part III	8		х
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?		37	
	If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			***
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	37	Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	
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	ا بيرا	Х	
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Λ	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х

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Part IV Checklist of Required Schedules (continued)

			Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	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	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		37	
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
h	Schedule K. If "No", go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
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			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," complete Schedule M	29		
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
٠.	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			,,
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_ v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	00	Х	
	Note. All Form 990 filers are required to complete Schedule O	38	Δ	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V										
				Yes	No						
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 61									
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming			1						
	(gambling) winnings to prize winners?		1c	Х							
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 return	ns?	2b	X							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions))									
За	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?										
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule 0	0	3b								
4a	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 a	ccount)?	4a		Х						
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 Advanced in the Financi	ccounts (FBAR).									
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X						
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5с								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e 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 contribution	ons or gifts									
	were not tax deductible?		6b								
7	Organizations that may receive deductible contributions under section 170(c).										
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv		7a	Х	<u> </u>						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required									
	to file Form 8282?		7c		X						
d		7d	-								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		X						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		Х						
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		<u> </u>						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		_								
_	sponsoring organization have excess business holdings at any time during the year?		8								
9	Sponsoring organizations maintaining donor advised funds.										
а			9a		 						
			9b								
10	Section 501(c)(7) organizations. Enter:	ا ءه			1						
a		10a 10b									
b	, , , , ,	ן מטו									
11	Section 501(c)(12) organizations. Enter:	11a									
a b	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	ııa									
D		11h									
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b 10412	12a								
		12b	ıza								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120									
	Is the organization licensed to issue qualified health plans in more than one state?		13a								
а	Note. See the instructions for additional information the organization must report on Schedule O.		isa								
h	Enter the amount of reserves the organization is required to maintain by the states in which the										
D		13b									
C	Enter the amount of reserves on hand	13c									
		130	14a		Х						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b		_ 						
	1. 100, That it mod a 1 offit 120 to report these payments: If 140, provide an explanation in our educe	<u> </u>	_	990	(2017						

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 29									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		Х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	6		Х						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b	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		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
	The organization's CEO, Executive Director, or top management official	15a	Х							
b	Other officers or key employees of the organization	15b	Х							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
_	exempt status with respect to such arrangements?	16b								
<u>Sec</u>	tion 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) and 990-T (Section 501(c)(3)s only) are considered as a section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are considered as a section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are considered as a section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are considered as a section 6104 requires as a section 6104 requires as a section 6104 requires an organization of the forms 1024 requires as a section 6104 requires as a se	availab	le							
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X 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	d finan	cial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records:									
	ALYSE NELSON - (202) 861-2625									
	1625 MASSACHUSETTS AVENUE, NW, #300, WASHINGTON, DC 20036									
732004	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2017)						

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 r (A)	(B)	Ĭ	(C)					(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	⊢			1	17 11 410	100,	from	from related	other
	(list any hours for	director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	5	stee			nsate		(W-2/1099-MISC)	(** 2, 1000 111100)	organization
	organizations	trus	nal tru		oyee	ompe				and related
	below	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
/1) DEEN DROOM WARGINIAN	line) 3.00	РШ	lns	#	Ke	E E	For			
(1) BETH BROOKE-MARCINIAK	3.00	x		х				0.	0.	0.
BOARD CHAIR (2) V. SUE MOLINA	1.00	^		^				0.	0.	0.
BOARD VICE CHAIR	1.00	X		х				0.	0.	0.
(3) AMBASSADOR CRAIG JOHNSTONE	1.00	Δ		Δ			_	0.	0.	•
BOARD TREASURER	1.00	Х		х				0.	0.	0.
(4) TINA BROWN	1.00	25							0.	•
BOARD DIRECTOR	1100	x						0.	0.	0.
(5) CANDACE BROWNING	1.00									
BOARD DIRECTOR		x						0.	0.	0.
(6) ELIZABETH BUCHANAN	1.00							-		
BOARD DIRECTOR		Х						0.	0.	0.
(7) KRISTIN CAMPBELL	1.00									
BOARD DIRECTOR		Х						0.	0.	0.
(8) KAY ELLEN CONSOLVER	1.00									
BOARD DIRECTOR		Х						0.	0.	0.
(9) ASHLEY DAVIS	1.00									
BOARD DIRECTOR		Х						0.	0.	0.
(10) SUSAN ANN DAVIS	1.00									
BOARD DIRECTOR		Х						0.	0.	0.
(11) AMBASSADOR PAULA J. DOBRIANSKY	1.00							_	_	_
BOARD DIRECTOR		Х						0.	0.	0.
(12) SONNIE DOCKSER	1.00									
BOARD DIRECTOR		Х						0.	0.	0.
(13) SALLY FIELD	1.00	l								
BOARD DIRECTOR	1 00	Х						0.	0.	0.
(14) NANCY FOLGER	1.00									
BOARD DIRECTOR	1 00	X						0.	0.	0.
(15) BARONESS MARY GOUDIE	1.00	7.							_	_
BOARD DIRECTOR	1 00	Х	_			_	_	0.	0.	0.
(16) KATE JAMES	1.00								_	_
BOARD DIRECTOR	1 00	Х						0.	0.	0.
(17) DONNA LANGLEY	1.00	x						0.	0.	0.
BOARD DIRECTOR		$\Gamma_{\mathbf{V}}$						1 0.	U •	OOO (2017

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Part VII Section A. Officers, Directors, T	(B)	PiO)	ces			igne	ai U	I .			/ E\	
(A)	Average	(C) (D) (E) Position Populable Population									(F)	1
Name and title	hours per		not c	heck	more	than		Reportable compensation	Reportable compensation	I	stimate nount	
	week	offi	cer ar	nd a d	direct	or/trus	itee)	from	from related	aı	other	
	(list any	tor						the	organizations	com	npensa	
	hours for	direc				pa		organization	(W-2/1099-MISC)	l	rom th	
	related	stee o	ustee			ensat		(W-2/1099-MISC)		org	janizat	tion
	organizations	Individual trustee or director	nstitutional trustee		Key employee	Highest compensated employee				l	d relat	
	below line)	lividu	stitutio	Officer	/emp	jhest ploye	mer			org	anizati	ions
/10) CERT DINE LAWROUPIE	1.00	트	ii ii	₽	- Š	<u>₹</u> 6	요					
(18) GERALDINE LAYBOURNE	1.00	X						0.	0.			0.
BOARD DIRECTOR (19) MARLENE MALEK	1.00	^				+		0.	0.			
BOARD DIRECTOR	1.00	X						0.	0.			0.
(20) BOBBIE GREENE MCCARTHY	1.00	12			\vdash			0.	0.			
BOARD DIRECTOR (UNTIL 06/2017)	1.00	X						0.	0.			0.
(21) DONNA COCHRAN MCLARTY	1.00	122			\vdash				•			
BOARD DIRECTOR	100	\mathbf{x}						0.	0.			0.
(22) SUSAN NESS	1.00	╫						•	•			
BOARD DIRECTOR		x						0.	0.			0.
(23) NANCY PRAGER-KAMEL	1.00							-	-			
BOARD DIRECTOR		x						0.	0.			0.
(24) BOZOMA SAINT JOHN	1.00											
BOARD DIRECTOR		X						0.	0.			0.
(25) VICTORIA SANT	1.00											
BOARD DIRECTOR		Х						0.	0.			0.
(26) MEGAN SMITH	1.00											
BOARD DIRECTOR		X						0.	0.			0.
1b Sub-total							>	0.	0.			0.
c Total from continuation sheets to Par	t VII, Section A							1,443,663.	0.		9,5	
d Total (add lines 1b and 1c)							<u> </u>	1,443,663.	0.	10	9,5	55.
2 Total number of individuals (including bu	ut not limited to th	nose	liste	ed a	bov	e) w	no re	eceived more than \$100	0,000 of reportable			
compensation from the organization	•										l	12
											Yes	No
3 Did the organization list any former office			e, ke	ey er	mplo	oyee	, or l	highest compensated e	mployee on			1,,
line 1a? If "Yes," complete Schedule J fo										3		X
4 For any individual listed on line 1a, is the										_	37	
and related organizations greater than \$										4	X	
5 Did any person listed on line 1a receive										_		- V
rendered to the organization? If "Yes," or Section B. Independent Contractors	omplete Schedul	e J t	or s	uch	per	son				5		X
<u> </u>		al a :-	I					had wasainad	Φ100 000 of		£	
1 Complete this table for your five highest										ation	irom	
the organization. Report compensation	ior the calendar v	ear	endi	na v	vith	or w	ıτnır	i trie organization's tax	vear.			

(A)	(B)	(C)
Name and business address	Description of services	Compensation
HARDPIN MEDIA, LLC	FILM DIRECTING,	
648 BROADWAY, SUITE 200, NEW YORK, NY 10012	PRODUCTION	303,783.
IPSOS PUBLIC AFFAIRS, LLC, 2020 K STREET,	MONITORING, EVAL. &	
NW, SUITE 410, WASHINGTON, DC 20006	RESEARCH	215,475.

\$100,000 of compensation from the organization SEE PART VII, SECTION A CONTINUATION SHEETS

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

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	ICES GLO	B_{I}	AL_	PΡ	AR'	LNE	₹R\$	SHIP, INC.	52-215	1557
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, a	nd l	ligh	est	Compensated Employ	yees (continued)	
(A) (B) (C)								(D)	(E)	(F)
Name and title	Average			Pos	•	ı		Reportable	Reportable	Estimated
Name and title	hours	(c				app	lv)	compensation	compensation	amount of
	per	(5)			<u></u>		.,,	from	from related	other
	week					ee/		the	organizations	compensation
	(list any	ctor				old m		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ted e		(W-2/1099-MISC)		organization
	related	ste c	nstee		l	ensa				and related
	organizations	ndividual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	ividu	itutio	Officer	emp	hest (Former			
	line)	lpul	Inst	∰0	Key	Hig	Fon			
(27) ROSELYNE SWIG	1.00									
BOARD DIRECTOR		Х						0.	0.	0.
(28) DR. ROSITA VAN COEVORDEN	1.00									
BOARD DIRECTOR		х						0.	0.	0.
(29) DIANE VON FURSTENBERG	1.00									•
	1.00	х						0.	0.	0.
BOARD DIRECTOR	1 00	^						0.	0.	U •
(30) CINDY WHITEHEAD	1.00									_
BOARD DIRECTOR		Х						0.	0.	0.
(31) ALYSE NELSON	50.00									
PRESIDENT AND CEO				Х				231,836.	0.	15,555.
(32) ALVIN ALLGOOD	40.00									
CHIEF OPERATING OFFICER				х				194,402.	0.	17,973.
(33) KATHY O'HEARN	40.00							- ,		,
CHIEF DEVELOMENT AND COMMUNICATIONS	1000				x			200,257.	0.	13,710.
(34) CYNTHIA DYER	40.00							200,257	 	15,710.
	40.00				х			156 245	0.	21 102
VP, HUMAN RIGHTS	40 00				Δ			156,345.	U •	21,193.
(35) MALINI PATEL	40.00							1.45 646		- 106
VP, ECON. EMPOWERMENT & ENTREPREN.						Х		145,616.	0.	5,196.
(36) ZOE DEAN SMITH	40.00									
VP, GLOBAL LEADERSHIP PROGRAMS						Х		135,423.	0.	7,488.
(37) SARA VANDEPEUTE	40.00									
VP, FINANCE & ADMINISTRATION						Х		131,133.	0.	12,136.
(38) LAUREN WOLLACK	40.00									-
SR. DIR., INNOVATION & STRAT. INV.						х		124,997.	0.	13,074.
(39) UMA IYER	40.00							121/33/6		13,0710
	±0.00					$ _{\mathbf{x}} $		123,654.	0.	3,230.
SR. DIRECTOR, ENGAGEMENT						Λ		143,034.	0.	3,230.
		ļ								
		l								
				\vdash	<u> </u>		<u> </u>			
		1								
					<u> </u>	$ldsymbol{ld}}}}}}$				
		1								
		L	L		L					
Total to Part VII, Section A, line 1c								1,443,663.		109,555.
. 51.5.1.5.1.4.1.7.11, 55000017.11, 111.0.10								, ,	1	,

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D)** Revenue excluded Unrelated Total revenue Related or from tax under exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b 1c 2,128,849 c Fundraising events d Related organizations _{1e} 4,570,691 e Government grants (contributions) f All other contributions, gifts, grants, and | 1f | 8,991,484 similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 15691024. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f. Investment income (including dividends, interest, and 2,848. 2,848. other similar amounts) Income from investment of tax-exempt bond proceeds 1,587. 1,587. 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) **d** Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 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 Revenue including \$2,128,849. of contributions reported on line 1c). See Part IV, line 18 a 144,042 Other b Less: direct expenses b 794,121. 650,079. -650,079 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses 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 **c** Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 133,396. 11 a SUBLEASE INCOME 900099 133,396. **b** CURRENCY TRANSLATION 900099 47,793. 47,793. c REIMBURSEMENTS 900099 110.110. d All other revenue 181,299.

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15226679.

e Total. Add lines 11a-11d

Total revenue. See instructions.

Part IX | Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respor		-		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	502,800.	502,800.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	42,718.	42,718.		
3	Grants and other assistance to foreign	12,7100	12,7200		
Ū	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,055,540.	2,055,540.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	851,271.	292,738.	420,183.	138,350
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	3,038,735.	2,259,458.	451,042.	328,235
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,945.	32,092.	8,678.	
9	Other employee benefits	291,070.	206,452.	49,480.	4,175 35,138
10	Payroll taxes	270,901.	178,754.	59,745.	32,402
11	Fees for services (non-employees):				
а	Management				
b	Legal	10,120.		10,120.	
С	Accounting	59,687.		59,687.	
	Lobbying	05.000			05 000
	Professional fundraising services. See Part IV, line 17	85,000.			85,000
f	Investment management fees				
g	, ,	1,312,332.	1,265,979.	22,697.	23,656
40	column (A) amount, list line 11g expenses on Sch 0.)	1,312,332.	1,203,313.	22,097.	23,030
12 13	Advertising and promotion Office expenses	210,380.	63,495.	146,137.	748
14	Information technology	153,670.	93,950.	40,555.	19,165
15	Royalties		227223	20,000	
16	Occupancy	708,769.		708,769.	
17	Travel	1,513,370.	1,382,122.	106,765.	24,483
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	536,734.	533,169.		3,565
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	32,673.	6,944.	25,729.	
23	Insurance	46,015.		46,015.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	BAD DEBT EXPENSE	10,000.	1 214 007	10,000.	106 272
b	G&A ALLOCATION	0.	1,314,827.	-1,421,199.	106,372
C C					
d	All other eveness				
е 25	All other expenses	11,776,730.	10,231,038.	744,403.	801,289
26	Joint costs. Complete this line only if the organization	11,770,750.	10,231,030.	711,103.	001,205
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

2017.04000 VITAL VOICES GLOBAL PARTNER VVGP

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,992,815.	1	2,962,585.
	2	Savings and temporary cash investments		1,401,684.	2	1,432,323.	
	3	Pledges and grants receivable, net		1,437,847.	3	4,137,110.	
	4	Accounts receivable, net		· · · · · ·	4		
	5	Loans and other receivables from current and for					
	-	trustees, key employees, and highest compensa					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali			_		
ম		section 4958(f)(1)), persons described in section	-	· ·			
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net		F		7	
¥	8	Inventories for sale or use			13,407.	8	20,337.
	9				325,687.	9	20,337. 215,115.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	412,510.			
	b	Less: accumulated depreciation	10b	324,521.	87,093.	10c	87,989.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line		70,733.	12	70,733.	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	23,252.	15	69,972.		
	16	Total assets. Add lines 1 through 15 (must equ	5,352,518.	16	8,996,164.		
	17	Accounts payable and accrued expenses	291,385.	17	540,089.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV c	of Schedule D	1,157.	21	2,730.
es	22	Loans and other payables to current and former					
≣		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa		ı			
		parties, and other liabilities not included on lines	s 17-24).	Complete Part X of	368,289.		311,709.
		Schedule D			660,831.	25	854,528.
	26	Total liabilities. Add lines 17 through 25			000,031.	26	034,320.
		Organizations that follow SFAS 117 (ASC 958		k nere 🚩 🔼 and			
ĕ	07	complete lines 27 through 29, and lines 33 and			1,619,620.	27	1,736,276.
lan	27	Unrestricted net assets			3,072,067.	28	6,405,360.
B	28 29	Temporarily restricted net assets Permanently restricted net assets			3,012,001.	29	0,403,300.
Fund Balances	29	Organizations that do not follow SFAS 117 (A	SC 058) check here		23	
Ē		and complete lines 30 through 34.	30 930	, check here			
ts c	30	Capital stock or trust principal, or current funds				30	
SSe	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or	32	Retained earnings, endowment, accumulated in				32	
Se	33	Total net assets or fund balances			4,691,687.	33	8,141,636.
	34	Total liabilities and net assets/fund balances		ı	5,352,518.	34	8,996,164.
	<u>, , , , , , , , , , , , , , , , , , , </u>				.,,	9 T	. , ,

Form **990** (2017)

Form	990 (2017) VIIAL VOICES GLOBAL PARINERSHIP, INC.	27-71	11337	Pag	je 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		L5,220		
2	Total expenses (must equal Part IX, column (A), line 25)		L1,770		
3	Revenue less expenses. Subtract line 2 from line 1	3	3,449		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,693	L,68	<u> 37.</u>
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	8,141	L,63	<u> 36.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	-			
	Act and OMB Circular A-133?		3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X	
			Form	9 90 (2	2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization VITAL VOICES GLOBAL PARTNERSHIP, 52-2151557 TNC 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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. 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. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

2017.04000 VITAL VOICES GLOBAL PARTN

Total

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

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

Sec	ction A. Public Support			,			
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	13060167.	9582541.	12862692.	6996915.	15691024.	58193339.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	13060167.	9582541.	12862692.	6996915.	15691024.	58193339.
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)						16673109.
	Public support. Subtract line 5 from line 4.						41520230.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►		(b) 2014	(c) 2015	(d) 2016	(e) 2017 15691024.	(f) Total
7	Amounts from line 4	13060167.	9582541.	12862692.	6996915.	15691024.	28133339
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	41 202	100 000	107 000	122 207	127 021	F 6 2 4 4 F
	and income from similar sources	41,323.	123,966.	127,028.	133,297.	137,831.	563,445.
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	7 406	2 772	394.			10 652
	assets (Explain in Part VI.)	7,486.	2,773.	394.			10,653. 58767437.
	Total support. Add lines 7 through 10		`				581,111.
12	Gross receipts from related activities	, ,	,			12 501(-)(0)	301,111.
13	•	-			•		► □
Sec	organization, check this box and stoction C. Computation of Pub					• • • • • • • • • • • • • • • • • • • •	
	Public support percentage for 2017 (column (f))		14	70.65 %
15						15	68.82 %
16a	33 1/3% support test - 2017. If the						ox and
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the						
	and stop here. The organization qua	lifies as a publicly s	supported organiz	ation			>
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check t	his box and stop h	ere. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	he "facts-and-circu	mstances" test, c	heck this box and	stop here. Explair	n in Part VI how the	e
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a publi	cly supported org	anization	▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	and see instruction	ıs ▶Ш

Schedule A (Form 990 or 990-EZ) 2017

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

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

Se	ction A. Public Support	clow, picase com	piete i art ii.)				
	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and	, ,	` ,	<u> </u>	<u> </u>	, ,	,,
	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						
Ū	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ-						
7	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7:	A Amounts included on lines 1, 2, and 3 received from disqualified persons						
I	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ı	unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi:	zation,
	check this box and stop here						<u></u> ▶∟⊥
	ction C. Computation of Publ					 	
	Public support percentage for 2017 (I			column (f))			%
	Public support percentage from 2016					16	%
	ction D. Computation of Inves					14-1	
	Investment income percentage for 20						%
	Investment income percentage from 2						%
19	a 33 1/3% support tests - 2017. If the						
ı	more than 33 1/3%, check this box at 33 1/3% support tests - 2016. If the						
	line 18 is not more than 33 1/3%, che	ck this box and s f	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14 19	a or 19h check t	his hox and see in	nstructions	

732023 10-06-17

Schedule A (Form 990 or 990-EZ) 2017

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

Section A. All Supporting Organizations

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

		Yes	No
	_		
+	1		
	2		
H	За		
	3b		
	_		
H	3c		
	4a		
-	4b		
	4c		
	5a		
F	5b 5c		
H	50		
	6		
+	6		
	7		
-	8		
	9a		
-	9b		
	9с		
-	10a		
	10b		
1 99	0 or 99	0-EZ	2017

Pa	rt IV Supporting Organizations (continued)			
	, e e (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	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		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			•
	<u> </u>		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			•
	, , , , , , , , , , , , , , , , , , ,		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struction	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? 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		<u></u>

Schedule A (Form 990 or 990-EZ) 2017

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	J
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ated Type III supporting ord	ganization (see

Schedule A (Form 990 or 990-EZ) 2017

instructions).

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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	on D - Distributions	(), () 	(continuca)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
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	ne organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
d	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

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.)

SCHE	DULE	Α,	PART	II,	LINE	10,	EXPLA	NATION	FOR	OTHER	INCOME:
MISC	ELLAI	JEOU	JS								
2013	AMO	JNT :	: \$	7,48	36.						
2014	AMO	JNT :	: \$	2,7	73.						
2015	AMO	JNT :	: \$	394	•						
2016	AMO	JNT :	: \$	0.							
2017	AMO	JNT :	: \$	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.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

Employer identification number

VITAL VOICES GLOBAL PARTNERSHIP, INC.

52-2151557

Organization type (check o	ne):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
• •	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 or, 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; line 1. Complete Parts I and II.
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.
year, contributions is checked, enter h purpose. Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., mplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year \bigsim \frac{\bigsim}{\bigsim} \big
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 he 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) (2017)

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	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>4,548,132</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,225,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,213,091.	Person X Payroll
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$1,037,241.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>1,024,932</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>1,000,000</u> .	Person X Payroll

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	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$850,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 750,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$341,993.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

VITAL VOICES GLOBAL PARTNERSHIP, INC.

52-2151557

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	000 F7 000 PF) (0017)

Employer identification number

Name of organization

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Use duplicate copies of Part III if additional space is needed. (c) Use of gift (d) Description of how gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transfer of gift (b) Purpose of gift (c) Use of gift (d) Description of how gift or transferor to transfer of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transfer of gift (b) Purpose of gift (c) Use of gift (d) Description of how gift or transferor to transfer of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transfer or gift (e) Transfer of gift (f) Description of how gift or transferor to transfer or gift (g) Transfer of gift (h) Purpose of gift (h) Purpose of gift (c) Use of gift (d) Description of how gift or transferor to	than \$1,000 f	e entry. For organizations	olumns (a) through (e) and the following	the year from any one contributor. Complete co	irt III
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No. om art I (b) Purpose of gift (c) Use of gift (d) Description of how gift	eree	telationship of transferor to transfere		Transferee's name, address, and	
art I		•		, ,	-
art I	ft is held	(d) Description of how gift i	(c) Use of gift	(b) Purpose of gift	No.
(e) Transfer of gift					# L 1 -
			(e) Transfer of gift		-
Transferee's name, address, and ZIP + 4 Relationship of transferor to transfer	eree	lelationship of transferor to transfere		Transferee's name, address, and	
					-

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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.

Open to

2017
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Tax) (see separate instructions), then				
 Section 501(c)(4), (5), or (6) organizate 	tions: Complete Part III.			
Name of organization			Em	ployer identification number
	OICES GLOBAL PART			52-2151557
Part I-A Complete if the org	janization is exempt unde	r section 501(c) o	or is a section 527	organization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures		>	\$
Part I-B Complete if the org	janization is exempt unde	r section 501(c)(3	B).	
1 Enter the amount of any excise tax	incurred by the organization unde	r section 4955	>	\$
2 Enter the amount of any excise tax			>	\$
3 If the organization incurred a sectio	n 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a Was a correction made?				
b If "Yes," describe in Part IV.				
Part I-C Complete if the org	janization is exempt unde	r section 501(c),	except section 50	1(c)(3).
 Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organiza contributions received that were prepolitical action committee (PAC). If a contribution or the filing organization or the filing organizatio	ization's funds contributed to other. Add lines 1 and 2. Enter here and 1120-POL for this year? Inployer identification number (EIN) tion listed, enter the amount paid comptly and directly delivered to a second control co	or organizations for second on Form 1120-POL, of all section 527 polition the filing organizate political orga	tical organizations to whation's funds. Also enter	\$ Yes No nich the filing organization the amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017 Part II-A Complete if the organization of the complete if the organization of the complete in the organization of the complete in the complete in the organization of the complete in					
section 501(h)).	yanızanon is e)	empt under Sectio	in 30 n(c)(3) and th	ieu Fuiii 3/00 (ei	lection under
A Check ► if the filing organiza	ation belongs to an	affiliated group (and list in	n Part IV each affiliated	I group member's nam	ne, address, EIN,
	re of excess lobbying	- · ·			
B Check ► if the filing organiza	ation checked box A	and "limited control" pro	ovisions apply.		
Limi	its on Lobbying Ex ditures" means an	penditures ounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinic	n (grass roots lobbying)		2,150.	
b Total lobbying expenditures to infl				8,599.	
c Total lobbying expenditures (add I				10,749.	
d Other exempt purpose expenditur				11,680,981.	
e Total exempt purpose expenditure				11,691,730.	
f Lobbying nontaxable amount. Ent				734,587.	
If the amount on line 1e, column (a)		obbying nontaxable am			
Not over \$500,000		of the amount on line 1e			
Over \$500,000 but not over \$1,00	-	,000 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		,000 plus 10% of the exc			
Over \$1,500,000 but not over \$17		,000 plus 5% of the exce			
Over \$17,000,000	<i>,</i> , , , , , , , , , , , , , , , , , ,	0,000.			
	1 4.,50				
g Grassroots nontaxable amount (er	nter 25% of line 1f)			183,647.	
h Subtract line 1g from line 1a. If zer	ro or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	o or less, enter -0-			0.	
j If there is an amount other than ze					
reporting section 4911 tax for this	year?			[Yes N
(Some organizations t	hat made a section	Averaging Period Under n 501(h) election do not arate instructions for li	have to complete all	of the five columns b	elow.
	Lobbying Ex	penditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	665,769	670,692.	643,284.	734,587.	2,714,332
b Lobbying ceiling amount (150% of line 2a, column(e))					4,071,498
c Total lobbying expenditures	7,649	7,660.	7,456.	10,749.	33,514
d Grassroots nontaxable amount	166,442	167,673.	160,821.	183,647.	678,583
e Grassroots ceiling amount					1 017 975

Schedule C (Form 990 or 990-EZ) 2017

9,002.

2,150.

4,596.

765.

f Grassroots lobbying expenditures

1,491.

Schedule C (Form 990 or 990-EZ) 2017 VITAL VOICES GLOBAL PARTNERSHIP, INC. 52-215155 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
of the	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)((5), or se		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3_	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OF	R (b) Par		ne 3, is
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)		1		
	expenses for which the section 527(f) tax was paid).				
	Current year				
b	Carryover from last year		2b		
	Total				
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 exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying and process the organization agree to carryover to the reasonable estimate of nondeductible lobbying agreement of the organization ag				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.	list); Part II	-A, lines 1 a	and 2 (see	

Schedule C (Form 990 or 990-EZ) 2017

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP

Employer identification number 52-2151557

Par		Funds or Other Similar Funds	s or Accounts. Complete if the
. u.	organization answered "Yes" on Form 990, Part IV, line 6.		or recountercomplete in the
	organization answered res on rollingso, raitiv, interes	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) z errer da rreca ramae	(a) i amae ama estrer accessine
2			
	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year Did the organization inform all donors and donor advisors in writing		
5	-	- -	
_	are the organization's property, subject to the organization's exc	-	
6	Did the organization inform all grantees, donors, and donor advis		
	for charitable purposes and not for the benefit of the donor or do		
Do			
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (·	
	Preservation of land for public use (e.g., recreation or educ	· —	orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structu	ure included in (a)	2c
d	Number of conservation easements included in (c) acquired afte	r 7/25/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation easem	nent is located >	
5	Does the organization have a written policy regarding the period	ic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it ho	lds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, har	ndling of violations, and enforcing con	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing conserva	ation easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above sa	atisfy 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 e		
	include, if applicable, the text of the footnote to the organization	's financial statements that describes	the organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections of A		ther Similar Assets.
	Complete if the organization answered "Yes" on Form 99	0, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 9	958), not to report in its revenue stater	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibit	ion, education, or research in furthera	nce 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 9	958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education	ation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:	·	-
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
			L A
2	If the organization received or held works of art, historical treasu		
	the following amounts required to be reported under SFAS 116 (
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		

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Schedule D (Form 990) 2017

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		t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	reasures,	or Other	Similar As	ssets(co	ntinue	ed)
a Public axhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations 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? b if "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance c Beginning balance d Additions during the year 1 te	3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	at are a sig	nificant use of	its collec	tion i	tems
b Scholarly research e Other c Preservation for future generations 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 sollection? Yes No Part IV Secrow 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? 1b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1c Amount 1d Description of property 1d Description of property 1d Description of property 1d Description of property 1d Description of the organization of the property of the organization has been provided on Part XIII. Part V Endowment Funds. Complete if the organization has been provided on Part XIII. Yes No 1a Beginning of year balance 1b Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance 1b Contributions 1c Nat investment earnings, gains, and losses 1d Grants or scholarships 1d Administrative expenses 2 End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 2 Board designated or quasi-endowment P % 3 Permanent endowment P % 5 Permanent endowment P % 6 Temporarily restricted endowment P % 7 Permorarily restricted endowment P % 8 Permanent endowment P % 96 The percentages on lines 2a, 2a, and 2c should equal 1000%. 1a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 1b If "Yes" on line 3a(i), are the related organizations listed as req		(check all that apply):									
c	а	Public exhibition	c		Loan or exc	change progr	ams				
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?	b	Scholarly research	е		Other						
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? 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, which the arrangement in Part XIII and complete the following table: □ Escription because the arrangement in Part XIII and complete the following table: □ Estributions during the year □ Estributions during the year □ Ending balance □ It finding balan	С	Preservation for future generations									
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? 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, which the arrangement in Part XIII and complete the following table: Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability X Yes No	4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	the organizat	ion's exem	pt purpose in	Part XIII.		
Describe sold to raise funds rather than to be maintained as part of the organization's collection?	5										
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 X No No If "Yes," explain the arrangement in Part XIII and complete the following table: Armount									Yes	•	No No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Yes	Pai								: IV, line 9	, or	
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount		reported an amount on Form 990, Par	t X, line 21.								
b If "Yes," explain the arrangement in Part XIII and complete the following table: Comparison of Part XIII and complete the following table: Amount Ital	1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contributio	ns or other as	ssets not ir	ncluded			
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c		on Form 990, Part X?							Yes	•	X No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Z Yes No 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. Part V Endowment Funds. Complete if the organization answered *Yes* on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered *Yes* on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered *Yes* on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered *Yes* on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered *Yes* on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered *Yes* on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization in Part XIII. Check here if the explanation has been provided on Part XIII. The reverse back (e) Four years back (d) Three years back (e) Four yea	b										
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f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? X Yes											
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	_										
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 (e) Four years back (d) Three years back (e) Four ye	2a								X Yes	;	☐ No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanatio	on has beer	n provided on	Part XIII				X
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 ▶	Pai	t V Endowment Funds. Complete it	f the organization ar	swered	"Yes" on F	orm 990, Par	t IV, line 10).			
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 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶			(a) Current year	(b) P	rior year	(c) Two yea	rs back (c	d) Three years b	ack (e) F	our ye	ears back
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 ▶	1a	Beginning of year balance									
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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 ▶		Г									
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 ▶		·									
g End of year balance	f										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶											
a Board designated or quasi-endowment ▶			ent vear end haland	re (line 1	a column (a)) held as:					
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			one your one balanc	-	g, colaitii (a)) Hold do.					
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 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) Description of property (d) Book value 1a Land	_	- · · · · · · · · · · · · · · · · · · ·	0/6								
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 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 (b) Cost or other (c) Accumulated depreciation 1a Land (d) Book value											
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 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 (other) (b) Cost or other basis (other) (d) Book value	·										
by: (i) unrelated organizations (ii) related organizations 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	32			ation the	at are hold o	and administr	arad for the	organization			
(i) unrelated organizations (ii) related organizations 5 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) 1a Land (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value	Ja		SSION OF THE ORGANIZ	alion in	at are rielu a	and administ	ered for the	Gorganization		V	oo No
(ii) related organizations 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 (b) Cost or other (c) Accumulated depreciation 1a Land (d) Book value		-							20	_	es NO
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 (other) (b) Cost or other basis (other) (d) Book value 1a Land										`	-
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) basis (other) (b) Cost or other depreciation (d) Book value		(ii) related organizations			کی جاریات مات				Sa(_	_
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 1a Land						·			31	<u>, </u>	
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) Description of property (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	<u> </u>			Jwmem	iurius.						
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value	ı aı			0 Part I\	/ line 11a 9	Soo Earm 00) Dort V li	no 10			
basis (investment) basis (other) depreciation 1a Land									(a) D	ook v	·olus
1a Land		Description of property							(u) b	OOK V	raiue
		Land	<u> </u>		22310	·/	2301				
p Buildings		Buildings									
c Leasehold improvements 175,174. 113,811. 61,363.					17	75,174.	1	13,811.		61	,363.
d Equipment 108,451. 108,451. 0.						•					0.
e Other 128,885. 102,259. 26,626.										26	,626.
		. Add lines 1a through 1e. (Column (d) must e		X, colur							,989.
Total Add lines to through to (Column (d) must equal Form 000 Part V column (D) line 100 \	iota	. Add lines Ta through Te. (Column (d) must e	yuai ruiiii 990, Part	A, COIUI	ııı (D), III le	100.)				<i>J</i> /	, , , , , ,

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 VITAL VOICES GLOBAL	PARTNERSHIP, I	NC. 52-2151557 Page 3
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes" on Form 990, Pa		·
(a) Description of security or category (including name of security) (b) Book va	alue (c) Method of v	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, Pa		
(a) Description of investment (b) Book va	alue (c) Method of V	valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Total (Col. (b) must agual Form 000, Part V. col. (P) line 12 \		
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, Pa	rt IV line 11d See Form 900	Part Y line 15
(a) Description	it iv, line i id. dee i diili 330,	(b) Book value
(1)		(2) 2001. 12.00
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		b
Part X Other Liabilities.		
Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 11e or 11f. See Forr	n 990, Part X, line 25.
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) DEFERRED RENT AND LEASE BENEFIT	301,509.	
(3) SECURITY DEPOSIT	10,200.	
(4)		
(5)		
(6)		
(7)		
(8)		

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 X

Schedule D (Form 990) 2017

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

311,709.

Pai	rt XI Reconciliation of Revenue per Audited Financial	Statements With	Revenue per R	eturi	ո.
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 12a.			
1	Total revenue, gains, and other support per audited financial statements	3		1	16,533,459.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	646,055.		
С					
d	Other (Describe in Part XIII.)	2d	794,121.		
е	Add lines 2a through 2d			2e	1,440,176.
3	Subtract line 2e from line 1			3	15,093,283.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	133,396.		
С	Add lines 4a and 4b			4c	133,396.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	15,226,679.
Pa	rt XII Reconciliation of Expenses per Audited Financia	I Statements With	n Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 12a.			
1	Complete if the organization answered "Yes" on Form 990, Part I Total expenses and losses per audited financial statements			1	13,083,510.
1 2	· · · · · · · · · · · · · · · · · · ·			1	13,083,510.
-	Total expenses and losses per audited financial statements		646,055.	1	13,083,510.
2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a		1	13,083,510.
2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b	646,055.	1	13,083,510.
2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c		1	
a b c	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	646,055. 794,121.	1 2e	1,440,176.
a b c	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	794,121.		
2 a b c d	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	794,121.	2e	1,440,176.
2 a b c d e 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	794,121.	2e	1,440,176.
2 a b c d e 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	794,121.	2e	1,440,176. 11,643,334.
2 a b c d e 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	794,121.	2e	1,440,176.

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 2017 VITAL VOICES HELD \$2,730 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, 2017, 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.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017	VITAL VOICES	GLOBAL	PARTNERSHIP,	INC.	52-2151557	Page 5
Part XIII Supplemental Inf	ormation (continued)					
PART XI, LINE 2D -	OTHER ADJUSTM	ENTS:				
SPECIAL EVENT EXPE	NSES				794	,121.
	OTHER ADJUSTM	ENTS:				
SUBLEASE EXPENSES					122	,396.
DODDEADE EXTENDED					133	, 550 •
PART XII, LINE 2D	- OTHER ADJUST	MENTS:				
SPECIAL EVENT EXPE	INSES				794	,121.
PART XII, LINE 4B	- OTHER ADJUST	MENTS:				
SUBLEASE EXPENSES					133	,396.
						<u> </u>

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

2017
Open to Public Inspection

Name of the organization

Employer identification number

VITAL	VOICES GLOBAL	PARTNERSHIP,	INC.	52-2151557					
Part I	General Information	on Activities Outsi	de the United States. Complete if the organ	ization answered "Yes" on					
	Form 990, Part IV, line 14b).							
1 For g	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? ____ X 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.

United States.				1. 1.	
3 Activities per Region. (T	(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,	(f) Total expenditures for and investments in the region
				BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING,	
SUB-SAHARAN AFRICA	0	3	PROGRAM SERVICES	AND MENTORING FOR WOMEN	693,996.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		1,093,736.
				HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN	
SOUTH ASIA	0	1	PROGRAM SERVICES	AND HUMAN TRAFFICKING;	301,074.
SOUTH ASIA	0	0	GRANTMAKING		40,848.
				BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING,	
SOUTH AMERICA	0	2		AND MENTORING FOR WOMEN	238,533.
RUSSIA AND				NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS;	
NEIGHBORING STATES	0	0	PROGRAM SERVICES	HUMAN RIGHTS PROGRAMMING	25,644.
RUSSIA AND					
NEIGHBORING STATES	0	0	GRANTMAKING	BUSINESS AND LEADERSHIP	32,101.
				TRAINING, TECHNICAL ASSISTANCE, NETWORKING,	
NORTH AMERICA	0	2		AND MENTORING FOR WOMEN	112,625.
3 a Sub-total	0	8			2,538,557.
b Total from continuation	0	9			1 706 064
sheets to Part I c Totals (add lines 3a	-	9			1,796,964.
and 3b)	0	17			4,335,521.

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2017



Schedule F (Form 990)				10. 52-215155	/ Page 1
Part I Continuatio	n of Activitie	es per Regio	n.(Schedule F (Form 990), Part I, line 3	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	GRANTMAKING		2,000.
				BUSINESS AND LEADERSHIP	,
				TRAINING, TECHNICAL	
MIDDLE EAST AND				ASSISTANCE, NETWORKING,	
NORTH AFRICA	0	5	PROGRAM SERVICES	AND MENTORING FOR WOMEN	410,506.
MIDDLE EAST AND					
NORTH AFRICA	0	0	GRANTMAKING		789,569.
				HUMAN RIGHTS PROGRAMMING	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				TO ADDRESS THE ISSUES OF	
EUROPE (INCLUDING				VIOLENCE AGAINST WOMEN	
ICELAND & GREENLAND)	0	2	PROGRAM SERVICES	AND HUMAN TRAFFICKING;	194,612.
				HUMAN RIGHTS PROGRAMMING	
				TO ADDRESS THE ISSUE OF	
EAST ASIA AND THE				VIOLENCE AGAINST WOMEN	
PACIFIC	0	0	PROGRAM SERVICES	AND HUMAN TRAFFICKING;	108,392.
EAST ASIA AND THE					
PACIFIC	0	0	GRANTMAKING		10,000.
				BUSINESS AND LEADERSHIP	
				TRAINING, TECHNICAL	
CENTRAL AMERICA AND				ASSISTANCE, NETWORKING,	010 566
THE CARIBBEAN	0	2	PROGRAM SERVICES	AND MENTORING FOR WOMEN	210,566.
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	GRANTMAKING		71,319.
Totals		9			1,796,964.

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)
			GRANT TO ADDRESS THE					
		MIDDLE EAST AND	ISSUE OF GENDER-BASED					
		NORTH AFRICA	VIOLENCE.	388,565.	WIRE TRANSFER	0.		
			ORGANIZE CONVENING IN					
			INDIA ON WOMEN'S					
			EMPOWERMENT AND					
		SOUTH ASIA	GENDER EQUALITY.	35,000.	WIRE TRANSFER	0.		
			GRANT TO HELP					
			CO-ORGANIZE A					
		SUB-SAHARAN	CONVENING ON THE					
		AFRICA	ISSUE OF FEMALE	7,788.	СНЕСК	0.		
			GRANT TO ADDRESS THE					
		CENTRAL AMERICA	ISSUE OF HUMAN					
		AND THE CARIBBEAN	TRAFFICKING.	7,000.	WIRE TRANSFER	0.		
		L						
			GRANT TO ADDRESS THE					
		ICELAND &	ISSUE OF HUMAN					
		GREENLAND)	TRAFFICKING.	9,000.	WIRE TRANSFER	0.		
			GRANT TO ADDRESS THE					
		SUB-SAHARAN	ISSUE OF HUMAN					
		AFRICA	TRAFFICKING.	9 000	WIRE TRANSFER	0.		
		AFRICA	TRAFFICKING.	3,000.	WIKE IKANSPEK	0.		
			GRANT TO ADDRESS THE					
		SUB-SAHARAN	ISSUE OF HUMAN					
		AFRICA	TRAFFICKING.	9 000.	WIRE TRANSFER	0.		
			•	1,130.		- •		
			GRANT TO ADDRESS THE					
		MIDDLE EAST AND	ISSUE OF HUMAN					
		NORTH AFRICA	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

3 Enter total number of other organizations or entities

10

Part II Continuation	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			GRANT TO SUPPORT					
			TRAINING AND					
		CENTRAL AMERICA	PROFESSIONAL					
		AND THE CARIBBEAN	DEVELOPMENT	50,000.	WIRE TRANSFER	0.		
			GRANT TO DELIVER FREE					
			PRIMARY EDUCATION TO					
		SUB-SAHARAN	GIRLS AND BOYS IN					
		AFRICA	SOMALIA.	6,150.	WIRE TRANSFER	0.		
			GRANT TO SUPPORT 6	·				
			MONTH TRAINING					
		CENTRAL AMERICA	PROGRAM IN COMPUTING					
			SKILLS FOR AT RISK	10,000.	WIRE TRANSFER	0.		
			GRANT TO TRAIN	, , , , , , , , , , , , , , , , , , ,				
			EGYPTIAN WOMEN TO					
		MIDDLE EAST AND	TELL THEIR STORIES					
		NORTH AFRICA	PUBLICLY AS A FORM OF	25,000.	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.

Part III can be duplicated if (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	(g) Description of noncash assistance	(h) Method of valuation
			-		assistance		(book, FMV, appraisal, other)
	CENTRAL AMERICA						
	AND THE CARIBBEAN						
GENDER BASED VIOLENCE	- ANTIGUA &						
EMERGENCY ASSISTANCE FUND	BARBUDA, ARUBA,	2	3,319.	WIRE TRANSFER	0.		
	EUROPE (INCLUDING						
	ICELAND &						
GENDER BASED VIOLENCE	GREENLAND) -						
EMERGENCY ASSISTANCE FUND	ALBANIA, ANDORRA,	1	1,966.	WIRE TRANSFER	0.		
	MIDDLE EAST AND						
	NORTH AFRICA -						
GENDER BASED VIOLENCE	ALGERIA, BAHRAIN,						
EMERGENCY ASSISTANCE FUND	DJIBOUTI, EGYPT,	106	367,004.	WIRE TRANSFER	0.		
	RUSSIA AND						
	NEIGHBORING						
GENDER BASED VIOLENCE	STATES - ARMENIA,						
EMERGENCY ASSISTANCE FUND	AZERBIJAN,	15	31,267.	WIRE TRANSFER	0.		
	SOUTH ASIA -						
	AFGHANISTAN,						
GENDER BASED VIOLENCE	BANGLADESH,						
EMERGENCY ASSISTANCE FUND	BHUTAN, INDIA,	2	5,348.	WIRE TRANSFER	0.		
	SUB-SAHARAN						
	AFRICA - ANGOLA,						
GENDER BASED VIOLENCE	BENIN, BOTSWANA,						
EMERGENCY ASSISTANCE FUND	BURKINA FASO,	257	1055849.	WIRE TRANSFER	0.		
GRANT TO ADDRESS THE ISSUE OF	EAST ASIA AND THE						
HUMAN TRAFFICKING	PACIFIC	1	9,000.	WIRE TRANSFER	0.		

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

Schedule F (Form 990) 2017

Schedule F (Form 990) 2017 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.

Schedule F (Form 990) 2017 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: BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN ENTREPRENEURS WHO ARE GROWING THEIR SMALL AND MEDIUM SIZED BUSINESSES OR ORGANIZATIONS; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN AND HUMAN TRAFFICKING; NETWORKING, CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.
- (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 PROGRAMS.
- (E) SPECIFIC TYPES OF SERVICES IN REGION: BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN ENTREPRENEURS WHO ARE GROWING THEIR SMALL AND MEDIUM SIZED BUSINESSES OR ORGANIZATIONS; 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 PROGRAMS; 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, NETWORKING, AND MENTORING FOR WOMEN ENTREPRENEURS WHO ARE GROWING THEIR SMALL AND MEDIUM SIZED BUSINESSES OR

Schedule F (Form 990) 2017 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.

ORGANIZATIONS; 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 TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN ENTREPRENEURS WHO ARE GROWING THEIR SMALL AND MEDIUM SIZED BUSINESSES OR ORGANIZATIONS; 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 PROGRAMS.
- (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 PROGRAMS.
- (E) SPECIFIC TYPES OF SERVICES IN REGION: BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN ENTREPRENEURS WHO ARE GROWING THEIR SMALL AND MEDIUM SIZED BUSINESSES OR ORGANIZATIONS; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN.

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: GRANT TO HELP CO-ORGANIZE A CONVENING ON THE ISSUE 732075 10-06-17 Schedule F (Form 990) 2017

52-2151557 VITAL VOICES GLOBAL PARTNERSHIP, INC. Schedule F (Form 990) 2017 Page 5 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. OF FEMALE GENITAL MUTILATION/CUTTING. REGION: CENTRAL AMERICA AND THE CARIBBEAN (D) PURPOSE OF GRANT: GRANT TO SUPPORT TRAINING AND PROFESSIONAL DEVELOPMENT FELLOWSHIP FOR JOURNALISTS. REGION: CENTRAL AMERICA AND THE CARIBBEAN (D) PURPOSE OF GRANT: GRANT TO SUPPORT 6 MONTH TRAINING PROGRAM IN COMPUTING SKILLS FOR AT RISK YOUTH EMPLOYEES. REGION: MIDDLE EAST AND NORTH AFRICA (D) PURPOSE OF GRANT: GRANT TO TRAIN EGYPTIAN WOMEN TO TELL THEIR STORIES PUBLICLY AS A FORM OF EMPOWERMENT AND KNOWLEDGE SHARING.

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number 52-2151557

V I I I I I	CICED CEODINE IIM(II)			,	100 0101	<i>33</i> ,
Part I Fundraising Activities required to complete this pa	Complete if the organization answert.	ered "Y	es" or	n Form 990, Part IV,	ine 17. Form 990-E2	filers are not
 Indicate whether the organization rate a	e Solicita f Solicita g Special or oral agreement with any individual Part VII) or entity in connection with prividuals or entities (fundraisers) pursuit	tion of tion of fundra I (includerofess	non-g gover ising o ding o ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees, or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundre have cu or con contribu	aiser ustody trol of	(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
RAISING CHANGE, INC 98	PROFESSIONAL FUNDRAISING	Yes	No			
ORNINGSIDE DRIVE, FLORENCE,	COUNSEL		Х	0.	25,000.	-25,000.
COMMUNITY COUNSELLING SERVICES CO., LLC - 1730	PROFESSIONAL FUNDRAISING COUNSEL		х	0.	60,000.	-60,000.
Total 3 List all states in which the organizati	on is registered or licensed to solicit		Lutions	or has been notified	85,000.	-85,000.
or licensing. AR, CA, CT, CO, DC, GA, HI,	-				·	
VA,WV						

732081 09-13-17

ARTNER VVGP___1

Schedule G (Form 990 or 990-EZ) 2017

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

SEE PART IV FOR CONTINUATIONS

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 gro				ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				VOICES OF		(add col. (a) through
			LEADERSHIP A	SOLIDARITY	2	col. (c))
Ф			(event type)	(event type)	(total number)	001. (0))
nue						
Revenue	1	Gross receipts	1,581,010.	294,715.	397,166.	2,272,891.
ш						
	2	Less: Contributions	1,512,470.	278,215.	338,164.	2,128,849.
			60 540	16 500	F0 000	144 040
	3	Gross income (line 1 minus line 2)	68,540.	16,500.	59,002.	144,042.
	4	Cash prizes				
	_				26,422.	26,422.
S	5	Noncash prizes			20,422.	20,422.
nse	6	Pont/facility costs	78,754.	28,338.	52,804.	159,896.
xbe	О	Rent/facility costs	70,754.	20,330.	32,004.	133,030.
Direct Expenses	7	Food and beverages	122,941.	42,780.	37,701.	203,422.
)ire	′	1 ood and beverages		1277000	37,7020	200,1220
	8	Entertainment	163,419.	34,120.	8,731.	206,270.
	9	Other direct expenses	102,591.		61,475.	198,111.
	10		n 9 in column (d)		•	794,121.
	11	Net income summary. Subtract line 10 from li				-650,079.
Pa	rt l	Gaming. Complete if the organization a	answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
<u>e</u>			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			., ,	bingo/progressive bingo	., .	col. (a) through col. (c))
Rev						
	1	Gross revenue				
	_	Cook wines				
ses		Cash prizes				
oen	2	Noncash prizes				
Direct Expenses		Noncash prizes				
rect	4	Rent/facility costs				
⊡	-					
	5	Other direct expenses				
			Yes %	Yes%	Yes%	
	6	Volunteer labor	☐ No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<u></u>	
_		4 44 4 - 4 - 7 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				
		ter the state(s) in which the organization condu	· · · · —	-1-10		Yes No
		the organization licensed to conduct gaming a				Yes No
Ü	11	No," explain:				
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	erminated during the tax	year?	Yes No
		Yes," explain:	•	_	•	

Schedule G (Form 990 or 990-EZ) 2017

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Sch	edule G (Form 990 or 990-EZ) 2017 VITAL VOICES GLOBAL PARTNERSHIP, INC. 52-2	2151557	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No 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:		
а	The organization's facility	13a	%
	An outside facility	13b	<u>%</u>
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 ▶ \$		
	Carming manager compensation		
	Description of services provided		
	<u> </u>		
	Director/officer Employee Independent contractor		
	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	□ No
h	retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	res	NO
	organization's own exempt activities during the tax year > \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, line	ines 9, 9b, 1	0b. 15b.
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, ,	, ,
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISEF	₹S:	
(Т) NAME OF FUNDRAISER: RAISING CHANGE, INC.		
` -	, mail of fondiniplic. Integrito chance, inc.		
(I) ADDRESS OF FUNDRAISER: 98 MORNINGSIDE DRIVE, FLORENCE, MA 0	1062	
-	,		
 (I) NAME OF FUNDRAISER: COMMUNITY COUNSELLING SERVICES CO., LLC		
<u>(I</u>			
17	30 RHODE ISLAND AVENUE, NW, SUITE 406, WASHINGTON, DC 20036		

Schedule G	G (Form 990 or 990-EZ)	VITAL VOI	CES GLOBAL	PARTNERSHIP,	INC.	52-2151557	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Info	rmation (continued	d)				
	••	,	,				

SCHEDULE I (Form 990)

Department of the Treasury

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

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

➤ Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public**

Internal Revenue Service Inspection **Employer identification number** Name of the organization 52-2151557 VITAL VOICES GLOBAL PARTNERSHIP, INC. Part I **General Information on Grants and Assistance** 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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) PROMUNDO- U.S. GENDER BASED VIOLENCE 1367 CONNECTICUT AVENUE, NW, # 310 EMERGENCY RESPONSE AND WASHINGTON, DC 20036 26-1931968 501(C)(3) 103,810. 0 PROTECTION INITIATIVE. INTERNATIONAL ORGANIZATION FOR MIGRATION - 17, ROUTE DES GENDER BASED VIOLENCE EMERGENCY RESPONSE AND MORILLONS - GENEVA, SWITZERLAND PROTECTION INITIATIVE. CH-1211 53-6003423 12,425. 0 GENDER BASED VIOLENCE GLOBAL FUND FOR WOMEN, INC. 800 MARKET STREET, SEVENTH FLOOR EMERGENCY RESPONSE AND SAN FRANCISCO, CA 94102 77-0155782 501(C)(3) 386,565, 0 PROTECTION INITIATIVE. 2

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

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

Schedule I (Form 990) (2017)

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUPPORT FOR PROJECTS LED BY YOUNG WOMEN LEADERS IN THEIR COMMUNITIES.	50	42,718.	0.		
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
PART I, LINE 2:					
VITAL VOICES USES SOUND MONITORING	AND EVA	LUATION PR	OCEDURES A	ND TOOLS FOR	
AWARDED GRANTS. FOR INSTANCE, ALL	GRANT RE	CIPIENTS A	RE REQUIRE	D TO ENTER	
INTO A GRANT AWARD AGREEMENT WITH	VITAL VO	ICES, WHIC	H REQUIRES	THEM TO	
PROVIDE NARRATIVE AND FINANCIAL RE	PORTING	ON ALL FUN	DS AWARDED	. AS PART OF	
THE GRANT AGREEMENT, VITAL VOICES	ALSO RES	ERVES THE	RIGHT TO A	UDIT,	
EXAMINE, AND MAKE OR REQUEST COPIE	S OF ALL	ACCOUNTS,	RECORDS,	AND	
CORRESPONDENCE RELATED TO THE GRAN	T AS WEL	L AS REQUI	RES THE GR	ANT RECIPIENT	
TO MAINTAIN GRANT RECORDS FOR AT L	EAST 36	MONTHS AFT	ER THE AGR	EED UPON END	
732102 11-01-17		50			Schedule I (Form 990) (2017)

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.
PROCEDURES AND RESERVES THE RIGHT TO MAKE SITE VISITS.

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

VITAL VOICES GLOBAL PARTNERSHIP, INC. **Employer identification number** 52-2151557

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

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

Schedule J (Form 990) 2017

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) ALYSE NELSON	(i)	231,836.	0.	0.	4,593.	10,962.	247,391.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ALVIN ALLGOOD	(i)	194,402.	0.	0.	0.	17,973.		0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KATHY O'HEARN	(i)	200,257.	0.	0.	4,060.	9,650.	213,967.	0.
CHIEF DEVELOMENT AND COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CYNTHIA DYER	(i)	156,345.	0.	0.	3,241.	17,952.	177,538.	0.
VP, HUMAN RIGHTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MALINI PATEL	(i)	145,616.	0.	0.	2,927.	2,269.	150,812.	0.
VP, ECON. EMPOWERMENT & ENTREPREN.	(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)							
	(i)							
	(ii)							

Schedule J (Form 990) 2017

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.

SCHEDULE 0

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 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 2017, VITAL VOICES ORGANIZED THE PROGRAM IN 3 CITIES IN THE UNITED STATES: CHARLOTTE, NC; CHICAGO, IL; AND LOS ANGELES, CA. EACH PROGRAM ENGAGED ELEVEN TO TWELVE 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 GLOBAL FORUMS TO PROVIDE VISIBILITY ON CRITICAL ISSUES IMPEDING WOMEN'S ECONOMIC ADVANCEMENT. TRAININGS RANGED FROM COMMUNICATIONS TO STRATEGIC PLANNING, AND FROM FINANCIAL MANAGEMENT AND FUNDRAISING TO HUMAN RESOURCES MANAGEMENT AND WORK/LIFE BALANCE.

CENTERED ON THE THEME OF "WOMEN IN THE ECONOMY", THE GLOBAL AMBASSADORS PROGRAM HELD IN CHARLOTTE, NORTH CAROLINA IN MAY 2017 ADDRESSED THE ONGOING NEEDS AND CHALLENGES FACING WOMEN LEADERS OF NGOS AS WELL AS WOMEN IN BUSINESS AND SOCIAL ENTERPRISE FROM SPECIFIC COUNTIES IN NORTH AND SOUTH CAROLINA IN THE UNITED STATES, AS WELL FROM NEPAL, CAMBODIA, LEBANON, NIGERIA, MEXICO, INDIA, JAMAICA AND ZIMBABWE.

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization

Employer identification number

VITAL VOICES GLOBAL PARTNERSHIP, INC. 52-2151557 CENTERED ON THE THEME OF "WOMEN DRIVING SOCIAL AND ECONOMIC PROGRESS", THE PROGRAM HELD IN CHICAGO, ILLINOIS WAS A WEEK OF TRANSFORMATIONAL CHANGE THAT BROUGHT TOGETHER 11 MENTEES ENGAGED IN BUSINESS AND SOCIAL ENTERPRISE FROM THE CHICAGO AREA OF THE UNITED STATES, AUSTRALIA, SOUTH AFRICA, BANGLADESH, ITALY, PHILIPPINES, TURKEY AND MEXICO REPRESENTING CIVIL SOCIETY, GREEN ENERGY DESIGN AND PUBLIC RELATIONS ORGANIZATIONS, TO JOIN 11 SENIOR WOMEN EXECUTIVES, THE GLOBAL AMBASSADORS, FROM BACKGROUNDS IN BANKING, FINANCE, MEDIA AND LAW.

THE LOS ANGELES PROGRAM CONVENED 11 WOMEN LEADERS FROM THE GREATER LOS ANGELES AREA OF THE UNITED STATES AS WELL AS WOMEN FROM LATIN AMERICA AND THE CARIBBEAN REPRESENTING ARGENTINA, ECUADOR, EL SALVADOR, GUATEMALA, MEXICO, PANAMA, SURINAME AND URUGUAY, FROM A RANGE OF INDUSTRIES AND SECTORS INCLUDING DESIGN, MARKETING AND COMMUNICATIONS, CONSUMER GOODS, INDUSTRIAL EQUIPMENT, TECHNOLOGY, EDUCATION AND HEALTHCARE. THESE MENTEES WERE PAIRED WITH AN IMPRESSIVE COHORT OF GLOBAL AMBASSADORS FROM THE US, MEXICO AND THE UNITED ARAB EMIRATES, INTEGRATING LOCALLY-BASED ENTREPRENEURS AND NON-PROFIT ORGANIZATIONAL LEADERS INTO THIS COHORT FOR A TRULY ENRICHING CROSS-CULTURAL EXPERIENCE.

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 21 PARTICIPANTS FROM 15 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 732212 09-07-17 Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization **Employer identification number** VITAL VOICES GLOBAL PARTNERSHIP, INC. 52-2151557 AMERICAN WOMEN LEADERS ABOUT THEIR PERSONAL AND PROFESSIONAL JOURNEYS AND NETWORKING EVENTS. IN JUNE, THE INTERNATIONAL ALUMNAE COMPONENT OF THE PROGRAM WAS HELD IN KATHMANDU, NEPAL. THE PROGRAM ENGAGED 11 PARTICIPANTS FROM TWO COUNTRIES ACROSS SOUTH AND CENTRAL ASIA. THE PROGRAM WAS TAILORED TO FIT PARTICIPANTS' NEEDS AS BUSINESSWOMEN AND LEADERS AND INCLUDED NETWORKING EVENTS, SITE VISITS, LEADERSHIP DISCUSSIONS AND OTHER SUBJECT-SPECIFIC PROFESSIONAL TRAININGS. IN NOVEMBER, A SECOND INTERNATIONAL ALUMNAE COMPONENT WAS HELD IN ACCRA, GHANA. THE PROGRAM ENGAGED 22 PARTICIPANTS FROM SIX COUNTRIES ACROSS AFRICA. THE PROGRAM WAS TAILORED TO FIT THE PARTICIPANTS' NEEDS AND INCLUDED CUSTOMIZED BUSINESS AND LEADERSHIP TRAININGS AND DISCUSSIONS, NETWORKING EVENTS, A SITE VISIT TO A SUCCESSFUL WOMEN-OWNED BUSINESS AND THE OPPORTUNITY TO MEET WITH REPRESENTATIVES OF THE US EMBASSY. 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 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

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

COMMUNITIES TO ULTIMATELY CREATE JOBS, STIMULATE LONG-TERM ECONOMIC GROWTH AND PRODUCE WIDER SOCIAL BENEFITS.

IN 2017 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. THROUGH THE FINAL SIX MONTHS OF THE 2016-2017 VV GROW FELLOWSHIP IN 2017, VITAL VOICES STAFF CONNECTED FELLOWS TO RESOURCES AND SUPPORT TO MEET THEIR UNIQUE NEEDS AND ACHIEVE THEIR BUSINESS GROWTH GOALS. A TOTAL OF 65 FELLOWS FROM 34 COUNTRIES IN COHORT 4: 2016-2017 VVGROW FELLOWSHIP GRADUATED FROM THE PROGRAM IN JUNE 2017. VITAL VOICES AND A TEAM OF CONSULTANTS AND EXTERNAL EXPERTS FURTHER REFINED A GLOBAL TRAINING CURRICULUM DEVELOPED IN 2013 FOR THE COHORT 5: 2018 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 PREPARATION FOR THE 2018 FELLOWSHIP INVOLVED AN INTENSIVE PARTICIPANT RECRUITMENT AND SELECTION PROCESS COMPLETED BETWEEN JULY AND DECEMBER 2017. FOR THE RECRUITMENT AND SELECTION PROCESS HELD IN 2017, THE VV GROW FELLOWSHIP EXPANDED ELIGIBILITY TO INCLUDE WOMEN BUSINESS OWNERS FROM ALL REGIONS AROUND THE WORLD.

VVLEAD: THE VVLEAD FELLOWSHIP BRINGS TOGETHER GLOBAL WOMEN LEADERS OF SOCIAL CHANGE TO ADVANCE AND AMPLIFY THEIR WORK THROUGH COLLABORATION, VISIBILITY AND TRAINING. THE 21-MONTH PROGRAM IS A DISTINCTIVE

PARTNERSHIP BETWEEN VITAL VOICES AND POND'S WITH A MISSION TO SUPPORT A

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

GLOBAL NETWORK OF WOMEN LEADERS WHO PROVIDE INNOVATIVE AND SUSTAINABLE

SOLUTIONS TO DIVERSE AND PRESSING SOCIAL, ENVIRONMENTAL AND HUMAN

RIGHTS ISSUES. THROUGH THE VVLEAD COMMUNITY, FELLOWS ALSO BUILD

POWERFUL PROFESSIONAL RELATIONSHIPS AND COLLABORATIONS WITH

LIKE-MINDED, VISIONARY WOMEN AROUND THE WORLD.

OUR FIRST COHORT LAUNCHED IN JUNE 2017 AT THE GLOBAL KICKOFF SUMMIT IN

JOHANNESBURG, SOUTH AFRICA, GATHERING OUR 50 FELLOWS, 6 AMBASSADORS,

AND THE VITAL VOICES AND POND'S TEAM FOR A WEEK OF CORE TRAININGS AND

COMMUNITY BUILDING. OUR 50 FELLOWS HAVE SINCE PARTICIPATED IN A SUITE

OF TECHNICAL ONLINE TRAINING COURSES. WE DESIGN AND CURATE CUSTOMIZED

COURSES ON A RANGE OF LEADERSHIP, ORGANIZATIONAL MANAGEMENT AND SOCIAL

IMPACT TOPICS FROM THE ESSENTIALS TO THE CUTTING EDGE, BASED ON

COMPREHENSIVE ASSESSMENT AND OUR 20 YEARS OF CAPACITY-BUILDING WORK

WITH WOMEN AROUND THE WORLD. OUR PARTICIPANTS HAVE MAINTAINED AN ACTIVE

VIRTUAL COMMUNITY FOR PEER SUPPORT AND NETWORKING, AND ARE ACTIVELY

COLLABORATING ACROSS SECTORS AND COUNTRIES TO INNOVATE SOCIAL IMPACT

PROJECTS AND EXPAND THEIR REACH.

HERLEAD: VITAL VOICES, IN PARTNERSHIP WITH ANN INC., INVESTS IN 50

YOUNG WOMEN EACH YEAR THROUGH TRAININGS TO ADVANCE THEIR LEADERSHIP AND

COMMUNICATIONS SKILLS.

IN APRIL, WE SELECTED 20 PAST HERLEAD FELLOWS FROM ACROSS THE US,

CANADA AND PUERTO RICO TO PARTICIPATE IN A FOUR-DAY FORUM IN

WASHINGTON, DC TO FURTHER DEVELOP THEIR TECHNICAL CAPACITY IN THE AREAS

OF STRATEGIC PLANNING, MARKETING AND PUBLIC RELATIONS, MONITORING AND

EVALUATION, BUDGETING AND FINANCE. PARTICIPANTS ALSO HAVE THE

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Deportunity to network with their peers, consult with ann inc.

Representatives, vital voices leadership and other experts. Vital

Voices managed the recruitment and application process, implemented the

Leadership training curriculum and encouraged ongoing mentorship

Relations and peer connections amongst the group. These participants

Gained the skills, tools and insights to further the impact on their

Communities and serve as an inspiration to other young women in the

Herlead fellowship.

IN JUNE, WE SELECTED 30 NEW HERLEAD FELLOWS FROM ACROSS THE US TO PARTICIPATE IN A FOUR-DAY, TRAINING AND MENTORSHIP FORUM HELD IN NEW YORK CITY. SELECTED PARTICIPANTS, WHO ARE RISING SOPHOMORES AND JUNIORS 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. FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE: AFTER UNDERGOING LEADERSHIP TRAINING, PARTICIPANTS WERE INVITED TO APPLY FOR SMALL GRANTS TO IMPLEMENT PROJECTS THAT POSITIVELY IMPACT THEIR COMMUNITIES. THE 2017 HERLEAD 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 GRANTEES REQUIRING FURTHER GUIDANCE WITH GRANT PROPOSALS. THROUGHOUT THE GRANT PERIOD, VITAL VOICES MENTORED THE GRANTEES TO

Schedule O (Form 990 or 990-EZ) (2017)

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

ENSURE SUCCESSFUL IMPLEMENTATION OF PROJECT GRANTS.

GLOBAL FREEDOM EXCHANGE: THE FIFTH ANNUAL GLOBAL FREEDOM EXCHANGE (GFE), A VITAL VOICES AND HILTON PARTNERSHIP WITH ADDITIONAL SUPPORT FROM HEINEKEN, PROVIDED A DYNAMIC EDUCATIONAL AND MENTORING OPPORTUNITY FOR EMERGING AND ESTABLISHED WOMEN LEADERS ON THE FOREFRONT OF GLOBAL EFFORTS TO PREVENT AND RESPOND TO HUMAN TRAFFICKING. THE GLOBAL FREEDOM EXCHANGE CONVENED A SELECT GROUP OF 22 WOMEN LEADERS FROM 18 COUNTRIES AROUND THE WORLD TO PARTICIPATE IN A TWO-WEEK FELLOWSHIP PROGRAM. THE PROGRAM TOOK PLACE IN SEPTEMBER AND OCTOBER, SPANNING THREE U.S. METROPOLITAN AREAS: WASHINGTON, DC; DALLAS, TEXAS; AND CHICAGO, ILLINOIS. ACTIVITIES INCLUDED OPPORTUNITIES TO MEET WITH GOVERNMENT OFFICIALS, DISCUSS BEST PRACTICES WITH NGO LEADERS, AND STRATEGIZE ABOUT PREVENTING AND ADDRESSING TRAFFICKING WITH ALLIED PROFESSIONALS INCLUDING JUDGES, PROSECUTORS, LAW ENFORCEMENT OFFICIALS AND DIRECT SERVICE PROVIDERS. THE PROGRAM ALSO PROVIDED A PLATFORM FOR GFE FELLOWS TO INTERFACE WITH CORPORATE SECTOR REPRESENTATIVES AND DONORS, ALLOWING THEM THE OPPORTUNITY TO SHARE KNOWLEDGE ABOUT FUNDING NEEDS AND EFFECTIVE MECHANISMS FOR SUPPORT. THE PROGRAM PROVIDED PARTICIPANTS WITH SPECIFIC KNOWLEDGE, SKILLS AND RELATIONSHIPS THAT BENEFITTED THEIR PROFESSIONAL DEVELOPMENT, THEIR RESPECTIVE NGOS AND THE COMMUNITIES THEY SERVE. THE PROGRAM ALSO PROVIDED SEVERAL SUB-GRANTS TO SUPPORT THE WORK OF FELLOWS IN THEIR HOME COUNTRIES.

JUSTICE INSTITUTES: SINCE 2010, VITAL VOICES HAS INVESTED 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

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

50 PARTICIPANTS IN EACH LOCATION.

Name of the organization

Employer identification number

WITAL VOICES GLOBAL PARTNERSHIP, INC. 52-2151557

MULTI-DISCIPLINARY TRAININGS IN THEIR HOME COUNTRIES. THIS INNOVATIVE

AND INTERACTIVE TRAINING MODEL FOCUSES ON THE INVESTIGATION AND

PROSECUTION OF CRIMES OF VIOLENCE AGAINST WOMEN AND FACILITATES THE

CREATION OF A HOLISTIC RESPONSE TO SUCH CRIMES THAT IS FOCUSED ON

VICTIM SAFETY AND OFFENDER ACCOUNTABILITY. IT IS A COMPREHENSIVE

RESOURCE THAT VITAL VOICES IS ABLE TO OFFER TO LEADERS IN OUR NETWORK

WHO ARE TACKLING A SPECTRUM OF GENDER-BASED VIOLENCE CRIMES IN THEIR

HOME COMMUNITIES. IN 2017 VITAL VOICES IMPLEMENTED THE JUSTICE

INSTITUTE MODEL IN MEXICO, CHILE, COLOMBIA, ROMANIA AND BRAZIL. IN ALL

OF THESE INSTITUTES, VITAL VOICES STAFF WORKED ALONGSIDE LOCAL TRAINERS

TO CARRY OUT A THREE-DAY MULTI-DISCIPLINARY TRAINING FOR APPROXIMATELY

ON EARLY AND FORCED MARRIAGE IN JORDAN, LEBANON AND TURKEY. THIS

PROGRAMMING ENGAGED MULTI-DISCIPLINARY ACTORS TO ADDRESS LEGAL REFORM

AS WELL AS THE COMPLEX SOCIAL ISSUES THAT MAY CONTRIBUTE TO EARLY AND

FORCED MARRIAGE IN THIS REGION. SIMILAR PROGRAMMING WAS ALSO

IMPLEMENTED TO ADDRESS FEMALE GENITAL MUTILATION AND CUTTING IN WEST

AFRICA WITH A SIGNIFICANT FOCUS ON ADDRESSING SOCIAL AND CULTURAL NORMS

THAT CONTRIBUTE TO THIS HARMFUL PRACTICE.

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

DAY. GLOBAL LEADERSHIP NETWORK MEMBERS LED OVER 126 WALKS IN 60

COUNTRIES AROUND THE WORLD WITH ESTIMATED NUMBER OF PARTICIPANTS AROUND

13,000.

VOICES AGAINST VIOLENCE: THE GENDER BASED VIOLENCE GLOBAL INITIATIVE:

Name of the organization

Employer identification number

VITAL VOICES GLOBAL PARTNERSHIP, INC. 52-2151557 THE VOICES AGAINST VIOLENCE: THE GENDER BASED VIOLENCE INITIATIVE IS DESIGNED TO ENSURE THAT VICTIMS AND SURVIVORS OF GENDER-BASED VIOLENCE (GBV) AND HARMFUL TRADITIONAL PRACTICES AROUND THE WORLD HAVE BETTER ACCESS TO SERVICES, PROTECTION AND THE JUSTICE THEY DESERVE. THE INITIATIVE IMPLEMENTS COMPREHENSIVE ACTIVITIES TO ADDRESS THE FOLLOWING OBJECTIVES: VICTIMS/SURVIVORS OF EXTREME FORMS OF GBV HAVE INCREASED ACCESS TO GLOBAL RESOURCES THAT ALLOW THEM TO ADDRESS THEIR URGENT NEEDS IN THE AFTERMATH OF VIOLENCE OR THE THREAT OF VIOLENCE; SURVIVORS OF GBV HAVE IMPROVED PROTECTIONS AND ACCESS TO JUSTICE, AND CIVIL SOCIETY ORGANIZATIONS (CSOS) HAVE ACCESS TO RESOURCES TO ADVOCATE ON BEHALF OF SURVIVORS; AND AN INTERNATIONAL NETWORK IS ESTABLISHED TO SERVE AS A FOCAL POINT AND COORDINATE EFFORTS AROUND GBV. IN AN EFFORT TO SUPPORT INCREASED ACCESS TO RESOURCES FOR SURVIVORS, THE INITIATIVE PROVIDES URGENT ASSISTANCE TO SUPPORT SURVIVORS OF EXTREME FORMS OF GBV AND HARMFUL TRADITIONAL PRACTICES. SURVIVORS MAY RECEIVE SHORT-TERM ASSISTANCE TO SUPPORT IMMEDIATE, SHORT-TERM NEEDS IN THE AFTERMATH OF VIOLENCE. THE VOICES AGAINST VIOLENCE CONSORTIUM ALSO SERVES AS A GLOBAL FOCAL POINT FOR COORDINATING URGENT RESPONSES TO SURVIVORS. IN 2017, VITAL VOICES PROVIDED URGENT ASSISTANCE TO SUPPORT MORE THAN 350 SURVIVORS OF GBV WORLDWIDE. THE CONSORTIUM BRINGS STAKEHOLDERS TOGETHER THROUGH REGIONAL CONVENING MEETINGS TO INITIATE DIALOGUE AND FURTHER COLLABORATION AND INNOVATION IN ADDRESSING THE GLOBAL ISSUE OF GBV. IN 2017, VITAL VOICES HELD CONVENING MEETINGS FOR STAKEHOLDERS IN THE EUROPE AND EURASIA AND SUB-SAHARAN AFRICA REGIONS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: THE GLOBAL LEADERSHIP AWARDS, HONORING UNSUNG HEROES AND COURAGEOUS LEADERS WORKING TO STRENGTHEN DEMOCRACY, INCREASE ECONOMIC OPPORTUNITY Name of the organization

Employer identification number

VITAL VOICES GLOBAL PARTNERSHIP, INC. 52-2151557 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 2017, 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 A CONTINUING PARTNERSHIPS WITH SKDKNICKERBOCKER, VITAL VOICES WAS ABLE TO PROVIDE TARGETED MEDIA OUTREACH AND TRAINING. 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 VOICES PROVIDES SUPPORT TO THE HONOREES AND MANAGES A GRANT AWARD THAT ENABLES THE HONOREES TO IMPLEMENT CRITICAL PROGRAMMING. IN 2017, THE HONOREES WERE YOANI SANCHEZ AND BALJEET SANDHU. YOANI IS FOUNDER AND DIRECTOR OF 14YMEDIO, THE FIRST AND ONLY INDEPENDENT DIGITAL NEWS OUTLET IN CUBA. BALJEET IS THE FOUNDING DIRECTOR OF THE MIGRANT AND REFUGEE CHILDREN'S LEGAL UNIT (MICLU), A SPECIALIST LEGAL, POLICY AND EDUCATION HUB PROTECTING AND PROMOTING THE RIGHTS OF YOUNG PEOPLE DISPLACED BY WAR, FLEEING ABUSE AND VIOLENCE AND TRAFFICKED FOR THE

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization VITAL VOICES GLOBAL PARTNERSHIP, INC.

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PURPOSES OF EXPLOITATION AND SLAVERY.

VV100 INITIATIVE: IN 2016, VITAL 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.

BUILDING ON THE OUTCOMES OF THE VV100 STRATEGIC GATHERING, VITAL VOICES IN PARTNERSHIP WITH JOHNSON & JOHNSON DESIGNED THE VV100 INITIATIVE, AN ONGOING AN ONGOING INITIATIVE TO DEVELOP TAILORED SUPPORT TO ENABLE THE VV100 WOMEN TO ACHIEVE THEIR BOLD AND INNOVATIVE VISIONS FOR CHANGING THEIR COMMUNITIES AND COUNTRIES. IN 2017 VITAL VOICES BROUGHT 10 VV100 WOMEN LEADERS TOGETHER WITH LOCAL JOHNSON & JOHNSON EXECUTIVES IN CAPE TOWN, SOUTH AFRICA. THIS VV100 "COHORT" WAS COMPRISED OF THREE GROUPS WHO EACH HAD AN IDEA FOR LEVERAGING THEIR COLLECTIVE KNOWLEDGE, SKILLS AND EXPERIENCE TO LAUNCH A BOLD, SHARED INITIATIVE. THROUGH FACILITATED DISCUSSIONS, GROUP BRAINSTORMS AND TECHNICAL CAPACITY BUILDING, EACH GROUP BEGAN TO DEVELOP A PLAN FOR BRINGING THEIR INITIATIVE TO LIFE. THROUGHOUT THE PROGRAM, TOP JOHNSON & JOHNSON EXECUTIVES BASED IN CAPE TOWN, ALONG WITH LEADERS FROM THEIR NETWORK OF LOCAL PARTNERS, PROVIDED TAILORED TECHNICAL SUPPORT AROUND THE ADVOCACY, TECHNOLOGY AND COMMUNICATIONS NEEDS OF EACH GROUP. THE JOHNSON & JOHNSON EXECUTIVES AND LOCAL EXPERTS ALSO SERVED AS THOUGHT PARTNERS, CHALLENGING EACH

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization **Employer identification number** VITAL VOICES GLOBAL PARTNERSHIP, INC. 52-2151557 GROUP TO CRITICALLY ANALYZE THEIR STRATEGY FOR LAUNCHING THESE INITIATIVES AND OFFERING IDEAS FOR STRENGTHENING THEIR APPROACH. FOLLOWING THE GATHERING, VITAL VOICES HAS WORKED CLOSELY WITH EACH GROUP TO PROVIDE INDIVIDUALIZED SUPPORT TO IMPLEMENT THE GOALS THEY SET DURING THE GATHERING.

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 VERIFY HOW AND WHY OUR MODEL OF MAKING DEEP, INDIVIDUALIZED 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 2017, VITAL VOICES AND IPSOS DEVELOPED FRAMEWORKS, DESIGNED INSTRUMENTS AND PILOTED THESE TOOLS WITH SELECT VV100 NETWORK LEADERS TO MEASURE THE IMPACT OF THESE WOMEN'S WORK AND IDENTIFY VITAL VOICES' ATTRIBUTION. BECAUSE OF THE PARTNERSHIP WITH IPSOS PUBLIC AFFAIRS, IMPACT EVALUATION DATA WAS COLLECTED THROUGH A THIRD PARTY FOR THE FIRST TIME. ADDITIONALLY, REGIONAL FOCUS GROUP GATHERINGS AND IN-DEPTH INTERVIEWS WERE CONDUCTED WITH SELECT PARTICIPANTS FROM THE VV100 NETWORK, FURTHER TESTING M&E TOOLS AND PROVIDING EVEN MORE ENRICHED DATA TO THE PROJECT.

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

Name of the organization VITAL VOICES GLOBAL PARTNERSHIP, INC.

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ENHANCE THE COMPREHENSIVE SERVICES AVAILABLE TO SURVIVORS OF GENDER

BASED VIOLENCE IN IRAQI KURDISTAN.

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

GLOBAL ENGAGEMENT AND PUBLIC AWARENESS

EXPENSES \$ 399,900. INCLUDING GRANTS OF \$ 0. 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 MUST FILE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ON AN ANNUAL BASIS WITH THE BOARD RECORD HOLDER INDICATING WHETHER THERE ARE ANY POTENTIAL CONFLICTS OF INTEREST THAT MIGHT BE EXPECTED TO OCCUR WITHIN THE FOLLOWING YEAR. BOARD MEMBERS MUST FILE AN ADDITIONAL CONFLICT OF INTEREST DISCLOSURE STATEMENT AT THE TIME AN ACTUAL OR POTENTIAL CONFLICT OF

INTEREST ARISES. ANY SUCH POTENTIAL CONFLICTS ARE THEN REPORTED TO THE

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BOARD OF DIRECTORS. THE DISINTERESTED BOARD DIRECTORS ARE RESPONSIBLE FOR REVIEWING THE MATTER AND DETERMINING AN APPROPRIATE ORGANIZATIONAL RESPONSE TO PROTECT THE INTERESTS OF THE ORGANIZATION.

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

VITAL VOICES ENGAGED A THIRD PARTY COMPENSATION CONSULTANT 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

Name of the organization VITAL VOICES GLOBAL PARTNERSHIP, INC.	Employer identification number 52-2151557
STATEMENTS AVAILABLE ON ITS WEBSITE. OUR FEDERAL FORM 102	3, GOVERNING
DOCUMENTS, AND CONFLICT OF INTEREST POLICY ARE MADE AVAIL	ABLE UPON REQUEST.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
TECHNICAL SUPPORT AND TRAINING FEES:	
PROGRAM SERVICE EXPENSES	721,560.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	721,560.
OTHER CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	544,419.
MANAGEMENT AND GENERAL EXPENSES	22,697.
FUNDRAISING EXPENSES	23,656.
TOTAL EXPENSES	590,772.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,312,332.