

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

**A** For the **2021** calendar year, or tax year beginning and ending

**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization

**VITAL VOICES GLOBAL PARTNERSHIP, INC.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

**1509 16TH STREET, NW**

City or town, state or province, country, and ZIP or foreign postal code

**WASHINGTON, DC 20036**

**F** Name and address of principal officer: **ALYSE NELSON**

**SAME AS C ABOVE**

**D** Employer identification number

**52-2151557**

**E** Telephone number

**(202) 861-2625**

**G** Gross receipts \$

**31,622,749.**

**H(a)** Is this a group return

for subordinates? ..... ☐ Yes ☒ No

**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

**H(c)** Group exemption number ▶

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

**J** Website: ▶ **WWW.VITALVOICES.ORG**

**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

**L** Year of formation: **1999**

**M** State of legal domicile: **DE**

**Part I Summary**

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>VITAL VOICES INVESTS IN WOMEN LEADERS GLOBALLY TO ACCELERATE PROSPERITY IN THEIR COMMUNITIES.</b>
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) <b>32</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) <b>32</b>
	<b>5</b>	Total number of individuals employed in calendar year 2021 (Part V, line 2a) <b>92</b>
	<b>6</b>	Total number of volunteers (estimate if necessary) <b>132</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 <b>0.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11 <b>0.</b>	
Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h) <b>14,387,559.</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g) <b>20,661.</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>1,154.</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>-395,174.</b>
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>14,014,200.</b>
	Expenses	<b>13</b>
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4) <b>0.</b>
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>5,551,386.</b>
<b>16a</b>		Professional fundraising fees (Part IX, column (A), line 11e) <b>0.</b>
<b>b</b>		Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>1,363,522.</b>
<b>17</b>		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>3,101,847.</b>
<b>18</b>		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>11,580,863.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12 <b>2,433,337.</b>	
Net Assets or Fund Balances	<b>20</b>	Total assets (Part X, line 16) <b>40,128,583.</b>
	<b>21</b>	Total liabilities (Part X, line 26) <b>23,326,222.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 <b>16,802,361.</b>

**Part II Signature Block**

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

Sign Here	Signature of officer		Date	
	<b>ALYSE NELSON, PRESIDENT AND CEO</b> Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	<b>FRANK H. SMITH</b>	<i>Frank H. Smith</i>	<b>11/11/22</b>	<b>P00639053</b>
	Firm's name ▶	Firm's EIN ▶		
	<b>MARCUM, LLP</b>	<b>11-1986323</b>		
	Firm's address ▶	Phone no. (202) 227-4000		
	<b>1899 L STREET, NW, SUITE 850</b>			
	<b>WASHINGTON, DC 20036</b>			

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

**Part 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'S MISSION IS TO IDENTIFY, INVEST IN AND BRING VISIBILITY TO EXTRAORDINARY WOMEN AROUND THE WORLD BY UNLEASHING THEIR LEADERSHIP POTENTIAL TO TRANSFORM LIVES AND ACCELERATE PEACE AND PROSPERITY IN THEIR COMMUNITIES.

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

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

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

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

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

**4a** (Code: ) (Expenses \$ 16,598,630. including grants of \$ 6,181,189. ) (Revenue \$ )  
GLOBAL NETWORK AND REGIONAL ENGAGEMENT

GLOBAL NETWORK AND REGIONAL ENGAGEMENT PROGRAMS ENCOMPASS REGIONAL FELLOWSHIPS AND NETWORK INITIATIVES THAT LINK THOUSANDS OF PIONEERING WOMEN LEADERS AND OUR ALLIES IN LOCAL COMMUNITIES AND ACROSS BORDERS TO CATALYZE GLOBAL CHANGE.

VOICES AGAINST VIOLENCE: THE GENDER BASED VIOLENCE GLOBAL INITIATIVE: THE VOICES AGAINST VIOLENCE: THE GENDER BASED VIOLENCE INITIATIVE IS DESIGNED TO ENSURE THAT 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

**4b** (Code: ) (Expenses \$ 1,628,672. including grants of \$ 133,081. ) (Revenue \$ 514,990. )  
LEADERSHIP AND SOCIAL IMPACT

LEADERSHIP AND SOCIAL IMPACT PROGRAMS PROVIDE FOR CAPACITY-BUILDING PROGRAMMING TO INSPIRE SOCIAL IMPACT THROUGH WOMEN'S LEADERSHIP AND ENTREPRENEURSHIP. THESE HOLISTIC LEADERSHIP BUILDING PROGRAMS MEET WOMEN LEADERS WHERE THEY ARE, PROVIDING LEADERSHIP DEVELOPMENT, MENTORING AND CAPACITY BUILDING THAT IS TAILORED TO EACH LEADER'S NEEDS.

VV GROW FELLOWSHIP: THE VITAL VOICES GROW FELLOWSHIP IS A LEADING GLOBAL ACCELERATOR PROGRAM FOR WOMEN OWNERS OF SMALL AND MEDIUM-SIZED BUSINESSES THAT ARE MAKING A SOCIAL IMPACT. THE PROGRAM PROVIDES

**4c** (Code: ) (Expenses \$ 743,601. including grants of \$ 74,234. ) (Revenue \$ )  
ISSUE ADVOCACY

ISSUE ADVOCACY PROGRAMS INCLUDE FELLOWSHIPS AND INITIATIVES THAT BRIDGE CHALLENGES ACROSS KEY ISSUE AREAS THROUGH INNOVATIVE SOLUTIONS GROUNDED IN COLLABORATIVE PARTNERSHIPS. THROUGH THESE PROGRAMS, VITAL VOICES PARTNERS WITH LEADERS COMMITTED TO STRATEGIC POLICY AND COLLABORATIVE ADVOCACY ALIGNED TO LEADING GLOBAL STANDARDS AND BENCHMARKS ACCEPTED AND EMBRACED ACROSS SECTORS, BORDERS, AND OTHER LINES THAT OFTEN DIVIDE FOREMOST AMONG THEM AT PRESENT, THE UNITED NATION'S SUSTAINABLE DEVELOPMENT GOALS (SDGS).

VV ENGAGE: VV ENGAGE IS A FELLOWSHIP THAT PROVIDES TECHNICAL SKILLS AND

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ 360,997. including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses **▶** 19,331,900.

Form 990 (2021)

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b> X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b> X	
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b>	X
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b>	X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b>	X
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b> X	
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b> X	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b> X	
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b> X	
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b> X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	<b>21</b> X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b> X	
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	<b>23</b> X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b> X	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	X
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b> X	
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b>	X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	<b>38</b> X	

Note: All Form 990 filers are required to complete Schedule O

**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
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b> 75	
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b> X	

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

	Yes	No
<b>2a</b> 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 <span style="float: right;">2a 92</span>		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	<b>2b</b> X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>	
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>	X
<b>b</b> If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>	X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b> X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b> X	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year <span style="float: right;">7d</span>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 <span style="float: right;">10a</span>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <span style="float: right;">10b</span>		
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders <span style="float: right;">11a</span>		
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) <span style="float: right;">11b</span>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year <span style="float: right;">12b</span>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans <span style="float: right;">13b</span>		
<b>c</b> Enter the amount of reserves on hand <span style="float: right;">13c</span>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>	
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X
<b>17 Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</b>	

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

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

☒**Section A. Governing Body and Management**

	1a	1b	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	32			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent		32		
<b>2</b> 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?				X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?				X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?				X
<b>6</b> Did the organization have members or stockholders?				X
<b>7a</b> 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?				X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?			X	
<b>b</b> Each committee with authority to act on behalf of the governing body?			X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O				X

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

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

**Section C. Disclosure**

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

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

**20** State the name, address, and telephone number of the person who possesses the organization's books and records **ALYSE NELSON - (202) 861-2625**  
**1509 16TH STREET NW, WASHINGTON, DC 20036**

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALYSE NELSON PRESIDENT AND CEO	50.00			X				307,715.	0.	20,163.
(2) FAIDA FULLER CHIEF OPERATING OFFICER	40.00			X				221,449.	0.	16,353.
(3) LIAM DALL CHIEF DEVELOPMENT OFFICER	40.00				X			200,292.	0.	15,983.
(4) MANIRA ALVA VP, ISSUES ADVOCACY	40.00					X		162,732.	0.	30,032.
(5) SARA VANDEPEUTE VP, FINANCE & ADMINISTRATION	40.00					X		175,411.	0.	10,381.
(6) ZOE DEAN SMITH SR VP, LEADERSHIP & SOCIAL IMPACT	40.00					X		163,436.	0.	13,851.
(7) SABA GHORI, VP, GLOBAL NETWORK & REGIONAL ENGAGEMENT	40.00					X		139,935.	0.	16,765.
(8) EUGENIA PODESTA VP, LEADERSHIP & SOCIAL IMPACT	40.00					X		131,324.	0.	20,458.
(9) KATE JAMES BOARD CHAIR	3.00	X		X				0.	0.	0.
(10) GERALDINE LAYBOURNE BOARD VICE CHAIR	1.00	X		X				0.	0.	0.
(11) AMBASSADOR CRAIG JOHNSTONE BOARD TREASURER	1.00	X		X				0.	0.	0.
(12) DONNA COCHRAN MCLARTY BOARD SECRETARY	1.00	X		X				0.	0.	0.
(13) HUMA ABEDIN BOARD DIRECTOR	1.00	X						0.	0.	0.
(14) BETH BROOKE-MARCINIAK BOARD DIRECTOR - UNTIL 12/21	1.00	X						0.	0.	0.
(15) TINA BROWN BOARD DIRECTOR	1.00	X						0.	0.	0.
(16) ELIZABETH BUCHANAN BOARD DIRECTOR	1.00	X						0.	0.	0.
(17) KRISTIN CAMPBELL BOARD DIRECTOR - UNTIL 12/21	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ASHLEY DAVIS BOARD DIRECTOR	1.00	X						0.	0.	0.
(19) SUSAN ANN DAVIS BOARD DIRECTOR - UNTIL 12/21	1.00	X						0.	0.	0.
(20) LORENA DIAZ QUIJANO BOARD DIRECTOR	1.00	X						0.	0.	0.
(21) NINA EASTON BOARD DIRECTOR	1.00	X						0.	0.	0.
(22) SALLY FIELD BOARD DIRECTOR	1.00	X						0.	0.	0.
(23) AMANDA GORMAN BOARD DIRECTOR	1.00	X						0.	0.	0.
(24) MARY GROVE BOARD DIRECTOR	1.00	X						0.	0.	0.
(25) CHANDRA JESSEE BOARD DIRECTOR	1.00	X						0.	0.	0.
(26) DONNA LANGLEY BOARD DIRECTOR	1.00	X						0.	0.	0.
<b>1b Subtotal</b>								1,502,294.	0.	143,986.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,502,294.	0.	143,986.

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

13

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

	Yes	No
3		X
4	X	
5		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
DFS CONSTRUCTION GROUP, 2200 WILSON BLVD. STE 800, ARLINGTON, VA 22201	GENERAL CONTRACTOR	5,125,063.
KAM AIR LTD, R2 - KABUL INTERNATIONAL AIRPORT, KABUL, AFGHANISTAN	CHARTERED FLIGHTS FOR REFUGEES	2,910,000.
MAYFAIR JETS DWC LLC, DUBAI WORLD CENTRAL BUILDING A3, OFFICE 214, DUBAI, UNITED A	CHARTERED FLIGHTS FOR REFUGEES	2,166,055.
STUDIOS ARCHITECTURE DCPC 1625 M STREET NW, WASHINGTON, DC 20036	ARCHITECT OF RECORD	273,176.

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

4

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2021)



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) SAGRA MACEIRA DE ROSEN BOARD DIRECTOR	1.00	X						0.	0.	0.
(28) MARLENE MALEK BOARD DIRECTOR	1.00	X						0.	0.	0.
(29) SUSAN NESS BOARD DIRECTOR	1.00	X						0.	0.	0.
(30) MARC PRITCHARD BOARD DIRECTOR	1.00	X						0.	0.	0.
(31) BOZOMA SAINT JOHN BOARD DIRECTOR	1.00	X						0.	0.	0.
(32) MEGAN SMITH BOARD DIRECTOR	1.00	X						0.	0.	0.
(33) ROSELYNE SWIG BOARD DIRECTOR	1.00	X						0.	0.	0.
(34) JENNIFER TAYLOR BOARD DIRECTOR	1.00	X						0.	0.	0.
(35) SELINA TOBACOWALA BOARD DIRECTOR	1.00	X						0.	0.	0.
(36) DR. ROSITA VAN COEVORDEN BOARD DIRECTOR	1.00	X						0.	0.	0.
(37) DIANE VON FURSTENBERG BOARD DIRECTOR	1.00	X						0.	0.	0.
(38) TASHNI-ANN DUBROY BOARD DIRECTOR	1.00	X						0.	0.	0.
(39) MARTINE ROTHBLATT BOARD DIRECTOR	1.00	X						0.	0.	0.
(40) DEBORAH RUTTER BOARD DIRECTOR	1.00	X						0.	0.	0.
(41) KAH WALLA BOARD DIRECTOR	1.00	X						0.	0.	0.
(42) SHERRIE ROLLINS WESTIN BOARD DIRECTOR	1.00	X						0.	0.	0.
(43) AMIRA YAHYAOU BOARD DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	616,412.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	8,008,449.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	22437374.				
	<b>g</b> Noncash contributions included in lines 1a-1f .....	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f .....						
<b>Program Service Revenue</b>	<b>2 a</b> <b>CONTRACT REVENUE</b>	<b>Business Code</b>	900099	482,100.	482,100.		
	<b>b</b> <b>PROGRAM FEES</b>		900099	32,890.	32,890.		
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....			514,990.			
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			93.		
<b>4</b> Income from investment of tax-exempt bond proceeds .....							
<b>5</b> Royalties .....				2,413.			2,413.
<b>6 a</b> Gross rents .....		<b>6a</b>	(i) Real	(ii) Personal			
<b>b</b> Less: rental expenses ...		<b>6b</b>					
<b>c</b> Rental income or (loss) .....		<b>6c</b>					
<b>d</b> Net rental income or (loss) .....							
<b>7 a</b> Gross amount from sales of assets other than inventory .....		<b>7a</b>	(i) Securities	(ii) Other			
<b>b</b> Less: cost or other basis and sales expenses .....		<b>7b</b>					
<b>c</b> Gain or (loss) .....		<b>7c</b>					
<b>d</b> Net gain or (loss) .....							
<b>8 a</b> Gross income from fundraising events (not including \$ 616,412. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
		39,029.					
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....			-185,189.			-185,189.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> <b>REFUND</b>	<b>Business Code</b>	900099	3,899.			3,899.
	<b>b</b> <b>MISCELLANEOUS</b>		900099	90.			90.
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			3,989.			
<b>12 Total revenue.</b> See instructions .....				31398531.	514,990.	0.	-178,694.

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	251,851.	251,851.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	27,883.	27,883.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	6,108,771.	6,108,771.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	781,955.	212,581.	147,077.	422,297.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	4,342,388.	3,905,383.	123,050.	313,955.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	56,032.	53,791.	87.	2,154.
<b>9</b> Other employee benefits	240,830.	218,648.	4,215.	17,967.
<b>10</b> Payroll taxes	404,302.	311,671.	41,076.	51,555.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	53,702.	6,179.	47,523.	
<b>c</b> Accounting	80,807.		80,807.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,003,577.	855,500.	67,304.	80,773.
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	392,326.	284,711.	46,265.	61,350.
<b>14</b> Information technology	128,435.	63,136.	45,112.	20,187.
<b>15</b> Royalties				
<b>16</b> Occupancy	420,557.	103,308.	311,969.	5,280.
<b>17</b> Travel	6,912,588.	6,852,813.	52,058.	7,717.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	375,818.	256.		375,562.
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	30,556.	28,146.	1,893.	517.
<b>23</b> Insurance	117,235.	46,921.	67,916.	2,398.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>SP. EVENTS &amp; RECEPTIONS</b>	2,161.	351.		1,810.
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	21,731,774.	19,331,900.	1,036,352.	1,363,522.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	4,225,537.	<b>1</b>	6,652,560.
	<b>2</b> Savings and temporary cash investments .....	80,039.	<b>2</b>	129,890.
	<b>3</b> Pledges and grants receivable, net .....	6,519,088.	<b>3</b>	10,134,218.
	<b>4</b> Accounts receivable, net .....	109,015.	<b>4</b>	2,140.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....	331.	<b>5</b>	1,783.
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	0.	<b>7</b>	3,545,442.
	<b>8</b> Inventories for sale or use .....	36,022.	<b>8</b>	36,022.
	<b>9</b> Prepaid expenses and deferred charges .....	199,850.	<b>9</b>	384,135.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 36,327,778.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 215,145.	<b>10c</b>	36,112,633.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	70,733.	<b>12</b>	70,733.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	40,128,583.	<b>16</b>	57,069,556.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	806,832.	<b>17</b>	2,925,623.
	<b>18</b> Grants payable .....	514,247.	<b>18</b>	787,348.
	<b>19</b> Deferred revenue .....	77,136.	<b>19</b>	330,738.
	<b>20</b> Tax-exempt bond liabilities .....	21,901,124.	<b>20</b>	26,548,994.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	5,320.	<b>21</b>	7,735.
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	21,563.	<b>25</b>	0.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	23,326,222.	<b>26</b>	30,600,438.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	7,780,610.	<b>27</b>	9,917,796.
	<b>28</b> Net assets with donor restrictions .....	9,021,751.	<b>28</b>	16,551,322.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	16,802,361.	<b>32</b>	26,469,118.
	<b>33</b> Total liabilities and net assets/fund balances .....	40,128,583.	<b>33</b>	57,069,556.

Form 990 (2021)

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	31,398,531.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	21,731,774.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	9,666,757.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	16,802,361.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	26,469,118.

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

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

Form 990 (2021)

Department of the Treasury  
Internal Revenue Service

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**

52-2151557

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).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

**f** Enter the number of supported organizations

**g** Provide the following information about the supported organization(s).

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	15691024.	12711145.	18006674.	14387559.	31062235.	91858637.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	15691024.	12711145.	18006674.	14387559.	31062235.	91858637.
<b>5</b> 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) .....						11721844.
<b>6 Public support.</b> Subtract line 5 from line 4.						80136793.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	15691024.	12711145.	18006674.	14387559.	31062235.	91858637.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	137,831.	72,908.	12,180.	1,710.	93.	224,722.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....			2,346.	2,305.	6,402.	11,053.
<b>11 Total support.</b> Add lines 7 through 10 .....						92094412.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	1,161,204.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	87.02	%
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	85.92	%
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2021.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

Schedule A (Form 990) 2021

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2021</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2020</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

**b 33 1/3% support tests - 2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ..... ☐



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV** Supporting Organizations (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

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

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

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

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

  

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

  

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2021

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

Section D - Distributions		Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>	
<b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>	
<b>7</b> <b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>	
<b>9</b> Distributable amount for 2021 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017			
<b>b</b> Excess from 2018			
<b>c</b> Excess from 2019			
<b>d</b> Excess from 2020			
<b>e</b> Excess from 2021			

Schedule A (Form 990) 2021

**Part VI**

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

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

2019 AMOUNT: \$ 346.

2020 AMOUNT: \$ 305.

2021 AMOUNT: \$ 6,402.

**HONORARIA**

2019 AMOUNT: \$ 2,000.

2020 AMOUNT: \$ 2,000.

**Schedule B**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

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

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

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

Employer identification number

**VITAL VOICES GLOBAL PARTNERSHIP, INC.****52-2151557****Part I****Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>7,173,527.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>5,401,800.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>2,006,295.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>1,164,759.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>801,660.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

VITAL VOICES GLOBAL PARTNERSHIP, INC.

52-2151557

**Part II****Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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



Employer identification number

52-2151557

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

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

**SCHEDULE C**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

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

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

2 Political campaign activity expenditures ..... ▶ \$

3 Volunteer hours for political campaign activities .....

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

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

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

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

4a Was a correction made? ..... ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

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

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)		1,924.													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		465.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		2,389.													
<b>d</b> Other exempt purpose expenditures		22,315,275.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		22,317,664.													
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
<b>2a</b> Lobbying nontaxable amount	727,261.	737,273.	729,043.	1,000,000.	3,193,577.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					4,790,366.
<b>c</b> Total lobbying expenditures	8,474.	2,043.	2,711.	2,389.	15,617.
<b>d</b> Grassroots nontaxable amount	181,815.	184,318.	182,261.	250,000.	798,394.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,197,591.
<b>f</b> Grassroots lobbying expenditures	1,695.	1,231.	1,303.	1,924.	6,153.

Schedule C (Form 990) 2021



**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](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

**Name of the organization**

VITAL VOICES GLOBAL PARTNERSHIP, INC.

**Employer identification number**

52-2151557

**Part I**

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

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

**Part II**

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

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

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

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

☐ Yes ☐ No

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

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

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

☐ Yes ☐ No

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

**Part III**

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

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

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

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

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

▶ \$ .....

(ii) Assets included in Form 990, Part X .....

▶ \$ .....

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

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

▶ \$ .....

b Assets included in Form 990, Part X .....

▶ \$ .....

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

Schedule D (Form 990) 2021

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

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

a ☐ Public exhibition

d ☐ Loan or exchange program

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? ☐ Yes ☒ No

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

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

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

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

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

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

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

a Board designated or quasi-endowment ☐ \_\_\_\_\_ %

b Permanent endowment ☐ \_\_\_\_\_ %

c Term endowment ☐ \_\_\_\_\_ %

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

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

(i) Unrelated organizations

(ii) Related organizations

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

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

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		7,055,879.		7,055,879.
b Buildings		21,626,078.		21,626,078.
c Leasehold improvements				
d Equipment		45,894.	45,894.	0.
e Other		7,599,927.	169,251.	7,430,676.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				36,112,633.

Schedule D (Form 990) 2021

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

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

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements .....	<b>1</b>	31,984,417.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments .....	<b>2a</b>	
<b>b</b>	Donated services and use of facilities .....	<b>2b</b>	361,668.
<b>c</b>	Recoveries of prior year grants .....	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>	224,218.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>	585,886.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....	<b>3</b>	31,398,531.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) .....	<b>5</b>	31,398,531.

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

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

<b>1</b>	Total expenses and losses per audited financial statements .....	<b>1</b>	22,317,660.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities .....	<b>2a</b>	361,668.
<b>b</b>	Prior year adjustments .....	<b>2b</b>	
<b>c</b>	Other losses .....	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>	224,218.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>	585,886.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....	<b>3</b>	21,731,774.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) .....	<b>5</b>	21,731,774.

**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, 2021 VITAL VOICES HELD \$7,735 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, 2021, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.



**Part XIII** Supplemental Information *(continued)*

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 224,218.

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 224,218.

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

Employer identification number

VITAL VOICES GLOBAL PARTNERSHIP, INC.

52-2151557

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SUB-SAHARAN AFRICA	0	4	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	97,235.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		2,071,263.
SOUTH ASIA	0	4	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	6,879,739.
SOUTH ASIA	0	0	GRANTMAKING		2,019,944.
SOUTH AMERICA	0	4	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	60,842.
SOUTH AMERICA	0	0	GRANTMAKING		105,694.
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	26,631.
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	0	GRANTMAKING		58,687.
<b>3 a Subtotal</b> .....	0	12			11,320,035.
<b>b Total from continuation sheets to Part I</b> .....	0	16			2,190,004.
<b>c Totals</b> (add lines 3a and 3b) .....	0	28			13,510,039.

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

Schedule F (Form 990) 2021

SEE PART V FOR COLUMN (E) DESCRIPTIONS

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	5	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	47,120.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		384,646.
EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	42,246.
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		50,915.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	4	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	79,631.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING		68,957.
MIDDLE EAST AND NORTH AFRICA	0	1	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	143,836.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		1,319,997.
NORTH AMERICA (WHICH INCLUDES CANADA AND MEXICO, BUT NOT THE U.S.)	0	5	PROGRAM SERVICES	BUSINESS AND LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN	23,990.
NORTH AMERICA (WHICH INCLUDES CANADA AND MEXICO, BUT NOT THE U.S.)	0	0	GRANTMAKING		28,666.
<b>Totals</b> .....		16			2,190,004.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	57,569.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	56,697.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	54,192.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	44,543.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	28,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	40,407.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	7,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	7,000.	WIRE TRANSFER	0.		

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

37

3 Enter total number of other organizations or entities

1

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2021

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

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	6,500.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	732,621.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	70,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	58,343.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GRANT TO SUPPORT THE ECONOMIC EMPOWERMENT OF WOMEN BUSINESS OWNERS.	10,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	GRANT TO SUPPORT VITAL VOICES NETWORK LEADER'S ORGANIZATION TO PROVIDE CHILDREN	5,362.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	245,842.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	200,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	172,263.	WIRE TRANSFER	0.		

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

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	167,195.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	150,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	136,908.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	100,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	85,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	85,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES	76,051.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	36,833.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	15,000.	WIRE TRANSFER	0.		

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

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	GRANT TO EMPOWER TRANS PEOPLE IN INDIA TO PLAN THEIR SAFE TRANSITION JOURNEY BY	11,034.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	10,592.	WIRE TRANSFER	0.		
		SOUTH ASIA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	8,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	426,071.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	26,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	21,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	21,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	17,234.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	15,000.	WIRE TRANSFER	0.		

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

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GRANT TO ADDRESS THE ISSUE OF HUMAN TRAFFICKING.	9,500.	WIRE TRANSFER	0.		



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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	SUB-SAHARAN AFRICA	240	1497458.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	MIDDLE EAST AND NORTH AFRICA	51	357,533.	WIRE TRANSFER	0.		
CASH ASSISTANCE FOR SUSTENANCE	SOUTH ASIA	1,045	234,570.	WIRE TRANSFER	0.		
GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO	SOUTH ASIA	1	187,580.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	SOUTH ASIA	28	180,865.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	CENTRAL AMERICA AND THE CARIBBEAN	21	108,570.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	SOUTH AMERICA	14	76,848.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	RUSSIA AND THE NEWLY INDEPENDENT STATES	22	58,687.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	EAST ASIA AND THE PACIFIC	5	35,915.	WIRE TRANSFER	0.		

SEE PART V FOR COLUMN (A) DESCRIPTIONS

Schedule F (Form 990) 2021

**Part III** Continuation of Grants and Other Assistance to Individuals Outside the United States. (Schedule F (Form 990), Part III)

(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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SUPPORT FOR PROJECTS LED BY YOUNG WOMEN LEADERS IN THEIR COMMUNITIES	CENTRAL AMERICA AND THE CARIBBEAN	15	28,074.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	NORTH AMERICA	6	14,705.	WIRE TRANSFER	0.		
SUPPORT FOR PROJECTS LED BY YOUNG WOMEN LEADERS IN THEIR COMMUNITIES	NORTH AMERICA	7	13,961.	WIRE TRANSFER	0.		
CASH ASSISTANCE FOR SUSTENANCE	EAST ASIA AND THE PACIFIC	1	10,000.	WIRE TRANSFER	0.		
SUPPORT FOR PROJECTS LED BY YOUNG WOMEN LEADERS IN THEIR COMMUNITIES	SOUTH AMERICA	6	9,986.	WIRE TRANSFER	0.		
GENDER BASED VIOLENCE URGENT ASSISTANCE FUND	EUROPE (INCLUDING ICELAND AND GREENLAND)	3	8,050.	WIRE TRANSFER	0.		

**Part IV Foreign Forms**

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

Schedule F (Form 990) 2021

**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.

AS OF 2014, VITAL VOICES MANAGES A FUND TO PROVIDE EMERGENCY ASSISTANCE TO INDIVIDUALS FACING EXTREME ACTS OF GENDER-BASED VIOLENCE INCLUDING HARMFUL TRADITIONAL PRACTICES. THE URGENT 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 PART I OF SCHEDULE F ARE REPORTED USING THE ACCRUAL BASIS OF ACCOUNTING WHICH IS THE SAME METHOD OF ACCOUNTING USED IN THE FINANCIAL STATEMENTS.

**Part V Supplemental Information**

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

**PART I, LINE 3, COLUMN (E):****REGION: SUB-SAHARAN AFRICA****(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND****MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY,****DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE;****CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.****REGION: SOUTH ASIA****(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND****MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY,****DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE;****CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS; PROGRAMMING TO****SUPPORT THE EVACUATION AND RESETTLEMENT OF AT-RISK AFGHAN WOMEN LEADERS****AND THEIR FAMILIES.****REGION: SOUTH AMERICA****(E) SPECIFIC TYPES OF SERVICES IN REGION: BUSINESS AND LEADERSHIP****TRAINING, TECHNICAL ASSISTANCE, NETWORKING, AND MENTORING FOR WOMEN**

**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.

ENTREPRENEURS WHO ARE GROWING THEIR SMALL AND MEDIUM SIZED BUSINESSES OR ORGANIZATIONS; HUMAN RIGHTS PROGRAMMING TO ADDRESS THE ISSUE OF VIOLENCE AGAINST WOMEN; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY, DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

REGION: RUSSIA AND THE NEWLY INDEPENDENT STATES

(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY, DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY, DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE; CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

**Part V Supplemental Information**

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

**REGION: EAST ASIA AND THE PACIFIC****(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND****MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY,****DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE;****CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.****REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)****(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND****MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY,****DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE;****CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.****REGION: MIDDLE EAST AND NORTH AFRICA****(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND****MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY,**

**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.

DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE;  
CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

(A) REGION:

NORTH AMERICA (WHICH INCLUDES CANADA AND MEXICO, BUT NOT THE U.S.)

(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; LEADERSHIP TRAINING, TECHNICAL ASSISTANCE, NETWORKING AND  
MENTORING FOR WOMEN POLITICAL LEADERS WHO ARE DEVELOPING THEIR CAPACITY,  
DECISION-MAKING POWER AND EFFECTIVENESS AS LEADERS IN PUBLIC LIFE;  
CAPACITY BUILDING, MENTORING AND LEADERSHIP PROGRAMS.

PART II, COLUMN (D):

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: GRANT TO SUPPORT VITAL VOICES NETWORK LEADER'S  
ORGANIZATION TO PROVIDE CHILDREN ACCESS TO BOOKS AND GENERATE THE HABIT  
AND JOY FOR READING.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.



**Part V Supplemental Information**

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

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO PROVIDE FOR HOLISTIC SUPPORT TO AFGHAN  
WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO RESETTLEMENT.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GRANT TO EMPOWER TRANS PEOPLE IN INDIA TO PLAN

**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.

THEIR SAFE TRANSITION JOURNEY BY CREATING VIDEOS WITH GENDER TRANSITION  
SPECIFIC INFORMATION IN HINDI.

PART III, COLUMN (A):

REGION: SOUTH ASIA

(A) TYPE OF GRANT OR ASSISTANCE: GRANT TO PROVIDE FOR HOLISTIC SUPPORT  
TO AFGHAN WOMEN LEADERS AND THEIR FAMILIES WHILE IN TRANSITION TO  
RESETTLEMENT.

Department of the Treasury  
Internal Revenue Service

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

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

# 2021

**Open to Public Inspection**

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

## Part I

### Fundraising Activities.

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

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

- a** ☐ Mail solicitations

- e ☐ Solicitation of non-government grants

- b** ☐ Internet and email solicitations

- f** ☐ Solicitation of government grants

- c** ☐ Phone solicitations

- g ☐ Special fundraising events

- d** ☐ In-person solicitations

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ **No**

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>Total</b>						

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

**COPY**

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		OTHER FUNDRAISING (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts .....	655,441.			655,441.
	2 Less: Contributions .....	616,412.			616,412.
	3 Gross income (line 1 minus line 2) .....	39,029.			39,029.
Direct Expenses	4 Cash prizes .....				
	5 Noncash prizes .....				
	6 Rent/facility costs .....	20,559.			20,559.
	7 Food and beverages .....	95,954.			95,954.
	8 Entertainment .....	64,227.			64,227.
	9 Other direct expenses .....	43,478.			43,478.
	10 Direct expense summary. Add lines 4 through 9 in column (d) .....				224,218.
11 Net income summary. Subtract line 10 from line 3, column (d) .....				-185,189.	

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

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

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

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

b If "No," explain: \_\_\_\_\_

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

b If "Yes," explain: \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

**b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

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

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

- 16** Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

☐ Director/officer☐ Employee☐ Independent contractor

- 17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

**b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

<b>Part IV</b>	<b>Supplemental Information</b> <i>(continued)</i>
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[illegible]

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization  
**VITAL VOICES GLOBAL PARTNERSHIP, INC.**

**Employer identification number**  
**52-2151557**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... ☒ **Yes** ☐ **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
GLOBAL FUND FOR WOMEN 800 MARKET STREET, SEVENTH FLOOR SAN FRANCISCO, CA 94102	77-0155782	501(C)(3)	180,767.	0.			GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.
412 FOOD RESCUE, INC. 6022 BROAD STREET PITTSBURGH, PA 15206	47-3476140	501(C)(3)	20,495.	0.			GRANT TO VITAL VOICES NETWORK LEADER'S ORGANIZATION TO EXPAND ITS EFFORTS TO 10
COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE, INC. - 151 ELLIS STREET NE - ATLANTA, GA 30303	13-1685039	501(C)(3)	16,671.	0.			GRANT TO ADDRESS THE ISSUE OF GENDER-BASED VIOLENCE.
INHERSHOES INC. 8311 WESTMINSTER BL STE 330 WESTMINSTER, CA 92683	47-2758913	501(C)(3)	15,000.	0.			GRANT TO PROVIDE ACCESS, INSTRUCTION, AND COMMUNITY TO WOMEN, ESPECIALLY BIPOC AND
FUTURE FOR US 2132 3RD AVENUE, SUITE 222 SEATTLE, WA 98121	83-3124313		14,915.	0.			GRANT TO VITAL VOICES NETWORK LEADER'S BUSINESS TO REBRAND AND RESTRUCTURE THEIR

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

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

**Schedule I (Form 990) 2021**

**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUPPORT FOR PROJECTS LED BY YOUNG WOMEN LEADERS IN THEIR COMMUNITIES	10	27,883.	0.		

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

**PART I, LINE 2:**

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



**Part IV** Supplemental Information

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.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: 412 FOOD RESCUE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANT TO VITAL VOICES NETWORK LEADER'S ORGANIZATION TO EXPAND ITS EFFORTS TO 10 ADDITIONAL CITIES.

NAME OF ORGANIZATION OR GOVERNMENT: INHERSHOES INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANT TO PROVIDE ACCESS, INSTRUCTION, AND COMMUNITY TO WOMEN, ESPECIALLY BIPOC AND WOMEN OF COLOR, IN THIS VULNERABLE TIME, THROUGH TRAININGS ON ALLYSHIP AND CAREER DEVELOPMENT, AS WELL AS THROUGH MENTORSHIP PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: FUTURE FOR US

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANT TO VITAL VOICES NETWORK LEADER'S BUSINESS TO REBRAND AND RESTRUCTURE THEIR BUSINESS TO ENSURE IT WILL CONTINUE TO ADVANCE WOMXN OF COLOR PROFESSIONALS AROUND THE WORLD.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

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

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

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

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

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

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

**a** The organization? .....

**b** Any related organization? .....

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

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

**a** The organization? .....

**b** Any related organization? .....

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

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

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

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

Yes No

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

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ALYSE NELSON PRESIDENT AND CEO	(i)	307,715.	0.	0.	5,748.	14,415.	327,878.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) FAIDA FULLER CHIEF OPERATING OFFICER	(i)	221,449.	0.	0.	4,615.	11,738.	237,802.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LIAM DALL CHIEF DEVELOPMENT OFFICER	(i)	200,292.	0.	0.	4,030.	11,953.	216,275.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MANIRA ALVA VP, ISSUES ADVOCACY	(i)	162,732.	0.	0.	3,362.	26,670.	192,764.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SARA VANDEPEUTE VP, FINANCE & ADMINISTRATION	(i)	175,411.	0.	0.	3,504.	6,877.	185,792.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ZOE DEAN SMITH SR VP, LEADERSHIP & SOCIAL IMPACT	(i)	163,436.	0.	0.	3,341.	10,510.	177,287.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SABA GHORI, VP, GLOBAL NETWORK & REGIONAL ENGAGEMENT	(i)	139,935.	0.	0.	0.	16,765.	156,700.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) EUGENIA PODESTA VP, LEADERSHIP & SOCIAL IMPACT	(i)	131,324.	0.	0.	2,750.	17,708.	151,782.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III** Supplemental Information

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

PART I, LINE 4A:

CYNTHIA DYER, VP, HUMAN RIGHTS - 90,104

**Supplemental Information on Tax-Exempt Bonds**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**  
▶ **Attach to Form 990.** ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**  
**Open to Public Inspection**

Name of the organization

**VITAL VOICES GLOBAL PARTNERSHIP, INC.**

**Employer identification number**  
**52-2151557**

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> DISTRICT OF COLUMBIA	53-6001131	000000000	04/17/20	27215000.	SEE SUPPLEMENTAL INFORMATION		X		X		X
<b>B</b>											
<b>C</b>											
<b>D</b>											

**Part II Proceeds**

	A		B		C		D	
<b>1</b> Amount of bonds retired .....	427,358.							
<b>2</b> Amount of bonds legally defeased .....								
<b>3</b> Total proceeds of issue .....	27,215,000.							
<b>4</b> Gross proceeds in reserve funds .....								
<b>5</b> Capitalized interest from proceeds .....								
<b>6</b> Proceeds in refunding escrows .....								
<b>7</b> Issuance costs from proceeds .....	45,000.							
<b>8</b> Credit enhancement from proceeds .....								
<b>9</b> Working capital expenditures from proceeds .....								
<b>10</b> Capital expenditures from proceeds .....	23,624,558.							
<b>11</b> Other spent proceeds .....								
<b>12</b> Other unspent proceeds .....	3,545,442.							
<b>13</b> Year of substantial completion .....								
	Yes	No	Yes	No	Yes	No	Yes	No
<b>14</b> Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)? .....		X						
<b>15</b> Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)? .....		X						
<b>16</b> Has the final allocation of proceeds been made? .....		X						
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds? .....		X						

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

**Schedule K (Form 990) 2021**

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....		X						
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		X						
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		X						
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X						
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....		%		%		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		%		%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		X						
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	X							

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		X						
<b>2</b> If "No" to line 1, did the following apply?								
<b>a</b> Rebate not due yet? .....	X							
<b>b</b> Exception to rebate? .....		X						
<b>c</b> No rebate due? .....		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....	X							

**Part IV Arbitrage** (continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of GIC .....								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....								
<b>6</b> Were any gross proceeds invested beyond an available temporary period? .....		X						
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....	X							

**Part V Procedures To Undertake Corrective Action**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations? .....	X							

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions.

PART I, LINE A, COLUMN F:

THE BONDS WERE ISSUED FOR THE PURPOSE OF ACQUIRING, CONSTRUCTING, RENOVATING, AND EQUIPPING OF A NEW HEADQUARTERS BUILDING.

PART II, LINE 17:

WHEN THE BOND-FINANCED PROJECT IS COMPLETE AND THE FINAL ALLOCATION OF PROCEEDS IS MADE, ADEQUATE BOOKS AND RECORDS WILL BE IN PLACE TO SUPPORT THAT ALLOCATION.

**SCHEDULE L**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open To Public  
Inspection**

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ..... ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... ▶ \$

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
ALYSE NELSON	PRESIDENT	CASH ADV		X	0.	1,783.		X		X		X

Total ..... ▶ \$ 1,783.

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

Schedule L (Form 990) 2021

SEE PART V FOR CONTINUATIONS





**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

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:

IMPLEMENTS COMPREHENSIVE ACTIVITIES TO ADDRESS THE FOLLOWING

OBJECTIVES: 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. 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 BY WORKING WITH OTHER LEADING ORGANIZATIONS. IN 2021, VITAL

VOICES PROVIDED URGENT ASSISTANCE TO SUPPORT MORE THAN 910 SURVIVORS OF

GBV WORLDWIDE AND SUPPORTED OVER 15,000 INDIVIDUALS THROUGH ADDITIONAL

PROGRAMMING.

AFGHAN WOMEN'S FUND: IN 2021 THROUGH THE EMERGENCY FUND FOR AFGHAN

WOMEN, VITAL VOICES WITH THEIR PARTNER COALITION WORKED TOGETHER TO

MEET THE CRITICAL NEEDS OF THE MOST AT-RISK WOMEN LEADERS, HUMAN RIGHTS

DEFENDERS, JOURNALISTS, POLITICIANS, AND OTHER LEADERS EVACUATING THEM

AND THEIR FAMILIES; PROVIDING FOR THEIR MID-TERM SUPPORT TO ADDRESS

URGENT BASIC NEEDS; AND PLANNING FOR THEIR LONG-TERM RESETTLEMENT. THE

RESPONSE INCLUDED THE FOLLOWING ACTIONS:

1) EVACUATIONS OUT OF AFGHANISTAN COORDINATING EFFORTS AND

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

COLLABORATING IN REAL-TIME WITH HUMANITARIAN ORGANIZATIONS, GOVERNMENTS, SECURITY, AND MANY OTHER PARTNERS TO PROVIDE SAFE PASSAGE FOR AFGHAN WOMEN AND THEIR FAMILIES OUT OF THE COUNTRY. THIS INCLUDES SETTING UP SAFE HOUSES, ARRANGING SECURE TRANSIT AND AIRPORT GATE ACCESS, OBTAINING PASSPORTS AND E-VISAS, AND OTHER CRITICAL LOGISTICS. WE ARE LOOKING INTO ANY AND ALL OPTIONS, AND WORKING WITH ONE ANOTHER TO SHARE STRATEGIES AND COORDINATE ON EVACUATION FLIGHTS. THIS IS AN ONGOING EFFORT.

2) IMMEDIATE NEEDS IN TRANSITION LOCATIONS WORKING WITH GOVERNMENTS AND LOCAL ORGANIZATIONS TO MEET THE BASIC NEEDS FOR EVACUATED WOMEN AND THEIR FAMILIES IN COUNTRIES THAT HAVE AGREED TO HOST THEM DURING THIS TRANSITION. WE HAVE ACTIVATED OUR GLOBAL NETWORK OF 18,000 WOMEN LEADERS FROM 184 COUNTRIES AND OTHER LOCAL PARTNERS TO ADDRESS BASIC CRITICAL NEEDS SUCH AS SHELTER, FOOD, CLOTHING, CHILDCARE, HEALTHCARE, COVID-19 PREVENTION AND TREATMENT, PSYCHOSOCIAL AND TRAUMA SUPPORT, AND OTHER HUMAN RIGHTS NEEDS.

3) LONG-TERM RESETTLEMENT AND ONGOING SUPPORT: COORDINATE ON THE LONG-TERM RESETTLEMENT OF AFGHAN WOMEN AND THEIR FAMILIES, PROVIDING THE ASSISTANCE, RESOURCES, AND TRUSTED NETWORKS NEEDED TO LIVE FULL AND PROSPEROUS LIVES, FREE FROM OPPRESSION. VV WILL ALSO WORK WITH THESE WOMEN LEADERS TO BE THE VOICE FOR THOSE WHO REMAIN IN AFGHANISTAN, KEEPING THE FIGHT FOR WOMEN'S RIGHTS ALIVE AND AMPLIFYING THEIR CALLS TO ACTION.

TO DATE VV HAS SUPPORTED THE EVACUATION OF 1100 AT HIGH-RISK WOMEN AND THEIR FAMILY MEMBERS, OF WHICH AROUND 900 HAVE REACHED THEIR FINAL DESTINATION.

VV100 INITIATIVE: IN 2016, VITAL VOICES CONVENED THE MOST EXCEPTIONAL

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

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 2021, WE IMPLEMENTED SEVERAL VIRTUAL PROGRAMS WITHIN THIS INITIATIVE TO CONTINUE PROVIDING INDIVIDUALIZED CAPACITY BUILDING AND SUPPORT TO VV100 LEADERS AS THE COVID-19 PANDEMIC CONTINUED. WE CREATED THE VITAL VOICES SPEAKER BUREAU, A COLLECTION OF NETWORK MEMBERS FEATURED AS SPEAKERS ON PARTICULAR SUBJECTS. OUR GOAL WAS TO FACILITATE SPEAKING OPPORTUNITIES FOR VV100 NETWORK MEMBERS, CONNECT THEM TO MORE MEDIA OPPORTUNITIES AND AMPLIFY THEIR LEADERSHIP VOICES. WE DESIGNED AND IMPLEMENTED THE VV100 PEER MENTORSHIP PROGRAM THAT ENABLED THEM TO CONNECT WITH ONE ANOTHER ON SPECIFIC LEADERSHIP AND ORGANIZATIONAL CHALLENGES. EACH PEER GROUP DISCUSSED CHALLENGES FROM FUNDRAISING AND PROGRAM DESIGN, TO BUILDING A PERSONAL BRAND AND ADDRESSING BURNOUT AND WELLNESS. THIS VIRTUAL PROGRAM INCLUDED WORKSHOPS AND DISCUSSIONS FACILITATED BY VITAL VOICES, AS WELL AS SELF-PACED ACTIVITIES FOR EACH PEER GROUP. WE ALSO DESIGNED AND IMPLEMENTED THE VV100 VIRTUAL SCOPEATHON PROGRAM BUILDING ON THE SUCCESS OF THE PREVIOUS YEAR'S

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

PROGRAM, WHICH WAS DESIGNED TO ADDRESS A SPECIFIC CHALLENGE FACING THE VV100 WOMEN AND THE ORGANIZATIONS THEY WORK WITH BY TAPPING INTO THE EXPERTISE OF J&J EMPLOYEES AROUND THE WORLD THROUGH THE FORMATION OF CONSULTING GROUPS.

GLOBAL LEADERSHIP AWARDS HONOREE PROGRAM: EACH YEAR, VITAL VOICES HOSTS THE GLOBAL LEADERSHIP AWARDS, HONORING UNSUNG HEROES AND COURAGEOUS LEADERS WORKING TO STRENGTHEN DEMOCRACY, INCREASE ECONOMIC OPPORTUNITY AND PROTECT HUMAN RIGHTS IN COMMUNITIES AROUND THE WORLD. THE GLOBAL LEADERSHIP AWARDS HONOREE PROGRAM PROVIDES CUSTOMIZED AND TAILORED SUPPORT THAT INCLUDES NETWORKING OPPORTUNITIES, CAPACITY BUILDING AND HIGH PROFILE THOUGHT-LEADERSHIP EVENTS TO GIVE GREATER CREDIBILITY AND VISIBILITY TO THE HONOREES FOR THE EIGHT DAYS THEY ARE IN WASHINGTON, DC.

IN 2021, VITAL VOICES HONORED FOUR YOUNG WOMEN LEADERS WHO HAD BOLD VISIONS TO MAKE LASTING CHANGES IN THEIR COMMUNITIES, THROUGH THE 2ND ANNUAL VIRTUAL EVENT IN PARTNERSHIP WITH NOWTHIS NEXT GARNERING OVER 6 MILLION VIEWS. THE WORK OF EACH HONOREE WAS FEATURED USING FILM, PHOTOGRAPHY, LIVE INTERVIEWS WITH CELEBRITIES AND THOUGHT LEADERS AS WELL AS SOCIAL MEDIA PLATFORMS TO RAISE THEIR RESPECTIVE PUBLIC PROFILES AND BUILD AWARENESS AND VISIBILITY FOR THEM AND THEIR WORK.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: CUSTOMIZED BUSINESS SKILLS TRAINING, LEADERSHIP DEVELOPMENT, TECHNICAL ASSISTANCE, AND ACCESS TO NETWORKS AND CONNECTIONS. GOING INTO ITS 7TH YEAR IN 2020, THIS PROGRAM AIMED TO ELEVATE WOMEN BUSINESS LEADERS AS DRIVERS FOR ECONOMIC GROWTH AND SOCIAL CHANGE IN THEIR COMMUNITIES,

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

COUNTRIES AND THE WORLD BY HELPING THEM GROW THEIR BUSINESSES AND EXPAND THEIR SOCIAL IMPACT. THROUGH ONLINE TRAININGS, FELLOWS FOCUS ON LONG-TERM BUSINESS STRATEGY PAIRED WITH ACTION-ORIENTED STRATEGIC PLANS TO GROW THEIR BUSINESSES. THEY AMPLIFY THEIR ROLES AS LEADERS IN THEIR BUSINESSES AND THEIR COMMUNITIES' CREATING JOBS, STIMULATING ECONOMIC GROWTH AND PRODUCING WIDER SOCIAL BENEFITS.

THROUGH THE PROGRAM, PARTICIPANTS GAIN KNOWLEDGE AND SKILLS IN STRATEGIC PLANNING, FINANCIAL MANAGEMENT, MARKETING & SALES, STRATEGIC NETWORKING, LEADERSHIP, HUMAN RESOURCES AND COMMUNICATIONS. THEY RECEIVE VALUABLE TECHNICAL ASSISTANCE AND SUPPORT AND BECOME MEMBERS OF A VALUABLE GLOBAL NETWORK OF WOMEN BUSINESS OWNERS AND THE BROADER VITAL VOICES NETWORK OF MORE THAN 20,000 OF WOMEN LEADERS AROUND THE WORLD.

IN 2021 VITAL VOICES WORKED WITH WOMEN OWNERS OF SMALL AND MEDIUM-SIZED BUSINESSES THROUGH THE VV GROW FELLOWSHIP TO HELP THEM SET AND ACHIEVE THEIR BUSINESS GROWTH GOALS. DURING 2021, VITAL VOICES STAFF AND TRAINERS HOSTED WEEKLY WEBINARS COVERING FINANCIAL MANAGEMENT, STRATEGIC PLANNING, LEADERSHIP, HUMAN RESOURCES, MARKETING AND SALES, STRATEGIC NETWORKING AND COMMUNICATION. AS TRAVEL WAS NOT POSSIBLE DUE TO THE PANDEMIC, IN LIEU OF AN IN-PERSON TRAINING VITAL VOICES STAFF HOSTED A 3-DAY VIRTUAL CONFERENCE IN AUGUST ON TRANSFORMATIVE LEADERSHIP. FELLOWS HAD AN OPPORTUNITY TO BUILD A STRONG NETWORK OF PEER SUPPORT, CONNECT WITH PARTNERS, LEARN FROM EXPERTS AND BE INSPIRED BY MEMBERS OF THE VITAL VOICES NETWORK.

IN 2021 THE VV GROW FELLOWSHIP CURRICULUM WAS UNIQUELY TAILORED TO THE

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

MEET THE NEEDS OF WOMEN BUSINESS OWNERS, PARTICULARLY IN LIGHT OF THE OF THE COVID-19 PANDEMIC AND INCLUDED MODULES ON BUSINESS CONTINUITY PLANNING, RESILIENCY PLANNING AND OTHER RELEVANT TOPICS. FELLOWS ALSO RECEIVED ACCESS TO SISTER CIRCLE SUPPORT SESSIONS AND INDIVIDUALIZED CONNECTIONS THROUGHOUT THE COURSE OF THE PROGRAM. DURING THE YEAR, VITAL VOICES TEAM MEMBERS FURTHER REFINED A GLOBAL TRAINING CURRICULUM AND RECRUITMENT STRATEGY FOR 2022.

THE WE EMPOWER UN SDG CHALLENGE WAS LAUNCHED IN 2018 AND IS THE FIRST OF ITS KIND GLOBAL BUSINESS COMPETITION FOR WOMEN ENTREPRENEURS WHO ARE ADVANCING THE UN SUSTAINABLE DEVELOPMENT GOALS AND INSPIRING ENTIRE COMMUNITIES TO ACT TO CREATE THE WORLD WE WANT BY 2030.

IN 2021, THE WE EMPOWER CHALLENGE AWARDEES VIRTUALLY PARTICIPATED IN EVENTS SURROUNDING THE 76TH UN GENERAL ASSEMBLY AS WELL AS CONNECTED WITH RENOWNED BUSINESS EXPERTS FROM AROUND THE WORLD. AWARDEES ALSO PARTICIPATED IN A DYNAMIC PITCH COMPETITION, HOSTED BY FASHION DESIGNER, ACTIVIST AND VITAL VOICES BOARD MEMBER DIANE VON FURSTENBERG, TO PRESENT THEIR BUSINESS WHERE THE WINNER RECEIVED A \$20,000 GRANT.

VOICES THAT INSPIRE: IN 2018, WITH THE SUPPORT OF P&G, VITAL VOICES LAUNCHED A SIGNATURE PROGRAM, VOICES THAT INSPIRE (VOCES QUE INSPIRAN / VOZES QUE INSPIRAM), TO SUPPORT YOUNG WOMEN WHO ARE DEDICATED TO MAKING A POSITIVE IMPACT IN ARGENTINA, BRAZIL, COSTA RICA, GUATEMALA, MEXICO AND PANAMA. WE AIM TO INCREASE THE OPPORTUNITY, LEADERSHIP CAPACITY, NETWORK AND FUNDING RESOURCES TO UNLEASH THE LEADERSHIP POTENTIAL OF YOUNG WOMEN AROUND THE WORLD; SPARKING A GLOBAL MOVEMENT TO EMPOWER

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

YOUNG WOMEN, CREATE SUSTAINABLE CHANGE, AND TRANSFORM THE MEANING OF LEADERSHIP.

IN 2021, VITAL VOICES WELCOMED A NEW COHORT OF 30 VOICES THAT INSPIRE GRANTEES WHO WERE ALL ELIGIBLE TO APPLY FOR SOCIAL IMPACT FUNDS TO AMPLIFY THEIR GRASSROOTS PROJECTS.

THE RAJENDRA IMPACT FUND: THE RAJENDRA FOUNDATION SOCIAL IMPACT FUND INCUBATES YOUNG WOMEN LEADER'S BIG, BOLD, UNTESTED IDEAS. BY PROVIDING GRANTS TO YOUNG WOMEN LEADERS, THE RAJENDRA FOUNDATION IS CREATING A CULTURAL SHIFT TO INVEST IN AND AMPLIFY THE IDEAS OF YOUNG WOMEN, FURTHER UNLOCKING THEIR LEADERSHIP POTENTIAL.

THE RAJENDRA FOUNDATION SOCIAL IMPACT FUND PROVIDES GRANTS TO INNOVATIVE YOUNG WOMEN LEADERS (18-25) FROM THE RISING VOICES NETWORK IN THE UNITED STATES, CANADA, AND MEXICO WHO ARE MAKING STRIDES TO CREATIVELY ADDRESS THE ISSUES OF CHILD POVERTY, VULNERABILITY, FOOD INSECURITY, CLIMATE JUSTICE AND/OR SYSTEMIC INEQUALITY. GRANT RECIPIENTS MAY USE A VARIETY OF APPROACHES INCLUDING THE ARTS, SCIENCE AND TECHNOLOGY, HEALTHCARE AND ADVOCACY. RECIPIENTS MAY USE THE FUNDING FOR THEIR OWN PERSONAL LEADERSHIP GROWTH TO ADDRESS THE ISSUES OR FOR THEIR ORGANIZATIONS THAT ADDRESS THE ISSUES.

IN 2021, THE RAJENDRA FOUNDATION SOCIAL IMPACT FUND BENEFITED 9 WOMEN FROM THE UNITED STATES AND MEXICO.

GOOGLE IMPACT FUND: IN MARCH 2021, VITAL VOICES, ALONG WITH PROJECT EVERYONE, JOINED FORCES WITH GOOGLE.ORG TO LAUNCH THEIR \$25 MILLION GOOGLE IMPACT CHALLENGE FOR WOMEN AND GIRLS. THIS YEAR, VITAL VOICES



Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

REVIEWED THE 7,800 APPLICATIONS RECEIVED FROM AROUND THE WORLD, WHICH CALLED FOR ORGANIZATIONS TO SUBMIT THEIR BOLDEST AND MOST INNOVATIVE IDEAS TO CREATE A MORE EQUITABLE ECONOMIC REALITY FOR WOMEN AND GIRLS. OVER HALF OF VITAL VOICES STAFF REVIEWED APPLICATIONS FOR THE FIRST TWO STAGES OF THE APPLICATION PROCESS AND CONDUCTED OVER 140 INTERVIEWS FOR THE FINAL STAGE OF SELECTION. ON NOVEMBER 8TH, GOOGLE.ORG ANNOUNCED THE 34 ORGANIZATIONS SELECTED TO RECEIVE FUNDING. IN 2022, VITAL VOICES WILL CONTINUE TO WORK ALONGSIDE GOOGLE'S ACCELERATOR PROGRAM TO PROVIDE TRAINING, MENTORSHIP AND A NETWORK TO HELP AMPLIFY AND ADVANCE THESE LEADERS AND THEIR PROJECTS. VITAL VOICES WILL ALSO OFFER THE VITAL VOICES LEADERSHIP JOURNEY TO WOMEN LEADERS OF THE 34 ORGANIZATIONS HELPING TO BOLSTER THEIR LEADERSHIP DEVELOPMENT.

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, NON-PROFIT, GOVERNMENT AND SOCIAL ENTERPRISE SECTORS, THUS ACCELERATING WOMEN'S LEADERSHIP AND ECONOMIC EMPOWERMENT THROUGHOUT THE WORLD.

SINCE 2012, THE GAP HAS SERVED A TOTAL OF 352 WOMEN FROM 85 COUNTRIES, MADE UP OF 170 GLOBAL AMBASSADORS FROM 31 COUNTRIES, MENTORING 182 MENTEES FROM 65 COUNTRIES. THE MENTEES ARE WOMEN LEADERS OF SMALL AND MEDIUM-SIZED BUSINESSES, SOCIAL ENTERPRISES, AND NON-PROFIT ORGANIZATIONS TACKLING SOME OF THE WORLD'S MOST CRITICAL CHALLENGES, SUCH AS CLIMATE CHANGE AND ADDRESSING THE UNITED NATIONS SUSTAINABLE

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

DEVELOPMENT GOALS, WHILE BOOSTING THEIR ECONOMIES AND CREATING POSITIVE SOCIAL IMPACT.

IN 2021, VITAL VOICES ORGANIZED A TOTAL OF 12 ZOOM CALLS CONNECTING WITH PAST PROGRAM MENTEES AND GLOBAL AMBASSADORS PROVIDING THE OPPORTUNITY FOR THOUGHT LEADERSHIP AND PEER-SHARING AS THE WORLD CONTINUES TO PIVOT AMID THE COVID-19 PANDEMIC.

FORTUNE: THE FORTUNE U.S. DEPARTMENT OF STATE GLOBAL WOMEN'S MENTORING PARTNERSHIP IS A PUBLIC-PRIVATE PARTNERSHIP BETWEEN FORTUNE MOST POWERFUL WOMEN, THE U.S. DEPARTMENT OF STATE, AND VITAL VOICES GLOBAL PARTNERSHIP. THE PROGRAM DRAWS ON THE EXPERTISE OF AMERICA'S MOST ACCOMPLISHED LEADERS TO ENHANCE THE BUSINESS AND LEADERSHIP SKILLS OF INTERNATIONAL WOMEN PROFESSIONALS. DURING THE PROGRAM, MENTEES ENGAGE IN SKILLS TRAININGS, PANEL DISCUSSIONS, NETWORKING EVENTS, AND A MENTORSHIP PROGRAM WITH TOP WOMEN EXECUTIVES AND THEIR TEAMS. PAST MENTORS HAVE COME FROM AMERICA'S MOST PRESTIGIOUS COMPANIES, SUCH AS CVS HEALTH, JOHNSON & JOHNSON, AIG, AND ACCENTURE. FROM THIS PROGRAM, MENTEES GAIN CRITICAL BUSINESS AND LEADERSHIP SKILLS AND THE INSPIRATION TO PAY IT FORWARD, ACCELERATING POSITIVE CHANGE IN THEIR HOME COMMUNITIES. IN ITS 17TH YEAR, THE PROGRAM INCLUDES 351 ALUMNAE FROM 58 COUNTRIES AND TERRITORIES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: LEADERSHIP DEVELOPMENT TO OUTSTANDING WOMEN POLITICAL LEADERS MAKING AND INFLUENCING POLICY ACROSS THE GLOBE. WITH THE SUPPORT OF FREEPORT-MCMORAN, VV ENGAGE AIMS TO INCREASE THE CAPACITY, DECISION-MAKING POWER, AND EFFECTIVENESS OF WOMEN LEADERS IN POLITICAL

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

LIFE, SHIFTING CULTURE AROUND WOMEN'S PUBLIC LEADERSHIP AND MOVING TOWARDS EQUALITY IN PUBLIC REPRESENTATION GLOBALLY. WE ALSO AIM TO WORK TOWARDS A MORE INCLUSIVE AND EQUITABLE WORLD BY ADVANCING THE UN SUSTAINABLE DEVELOPMENT GOALS (SDGS) THROUGH POLICY.

IN 2021 VITAL VOICES WORKED WITH THE THIRD COHORT OF VV ENGAGE FELLOWS. THE FELLOWSHIP WAS ANCHORED ON THE SAME FOUNDATIONS OF SKILL-BUILDING, MENTORING NETWORKS AND PRACTICAL TRAINING AS PAST COHORTS. THE THIRD COHORT OF FELLOWS INCLUDED 37 FELLOWS FROM 30 COUNTRIES. DUE TO COVID-19 THE FELLOWSHIP WAS ENTIRELY ONLINE AND NEW CURRICULUM WAS IMPLEMENTED IN RESPONSE TO THE ALL-VIRTUAL FORMAT, FOR EXAMPLE, FELLOWS PARTICIPATED IN AN INTENSIVE 6-WEEK DIGITAL STORYTELLING WORKSHOP. WE ALSO CONTINUED WITH MONTHLY COMMUNITY CHECK-INS TO SERVE THE ENTIRE VV ENGAGE COMMUNITY, INCLUDING ALUMNI. THESE CHECK-INS ALLOWED THE FELLOWS TO ENGAGE WITH NEW TRAININGS AND NETWORKING OPPORTUNITIES AND TO CONTINUE TO BUILD THE VV ENGAGE COMMUNITY.

VOICES AGAINST VIOLENCE (VAV) PEACE: THE INTERGENERATIONAL FELLOWSHIP ON WOMEN, PEACE AND SECURITY IN SOUTH CENTRAL EUROPE, OR PEACE FELLOWSHIP, MADE POSSIBLE BY VOICES AGAINST VIOLENCE: THE GENDER-BASED VIOLENCE GLOBAL INITIATIVE (VAV), IS A YEAR-LONG PROGRAM THAT SUPPORTS EMERGING AND ESTABLISHED WOMEN LEADERS WORKING TO ADDRESS GENDER-BASED VIOLENCE (GBV) IN THE COUNTRIES OF BOSNIA AND HERZEGOVINA, CROATIA, KOSOVO AND SERBIA. THROUGH THIS FELLOWSHIP, WE AIM TO INCREASE THE CAPACITY, COLLABORATION, DECISION-MAKING POWER AND EFFECTIVENESS OF WOMEN LEADERS WORKING ON GBV ACROSS GENERATIONS AND SECTORS, AND EQUIPPING THEM WITH THE TOOLS THEY NEED TO ADVANCE WOMEN'S RIGHTS THROUGH THE WOMEN, PEACE, AND SECURITY (WPS) AGENDA. IN 2021, A COHORT OF 16 PEACE FELLOWS WAS SELECTED, AND FELLOWS WERE ONBOARDED AND BEGAN

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

A SERIES OF VIRTUAL TRAININGS ALONGSIDE PEER-TO-PEER NETWORKING AND  
IN-COUNTRY NETWORKING.

VOICES AGAINST VIOLENCE (VAV) FELLOWSHIP: THE VAV FELLOWSHIP IS AN  
INNOVATIVE, CROSS-REGIONAL, ONE-YEAR PROGRAM ENGAGING TWENTY FELLOWS  
FROM TEN CIVIL-SOCIETY ORGANIZATIONS. THE VAV FELLOWSHIP, OFFERED IN  
ENGLISH AND SPANISH, AIMS TO ADVANCE THE CAPACITY AND GLOBAL NETWORK OF  
THE SELECTED COMMUNITY-BASED ORGANIZATIONS COMBATTING GENDER-BASED  
VIOLENCE. THE VAV FELLOWSHIP INCLUDES TAILORED TRAININGS AND PROMOTE  
PEER-TO-PEER LEARNING AND EXCHANGES AMONG PARTICIPANTS.

THROUGHOUT THE PILOT YEAR OF THE VAV FELLOWSHIP IN 2021, FELLOWS  
ENGAGED IN BI-WEEKLY VIRTUAL GATHERINGS, FOCUSED ON GAINING KNOWLEDGE  
OF INNOVATIVE STRATEGIES TO ADDRESS SYSTEMIC AND INSTITUTIONAL GAPS IN  
THEIR REGION OR COUNTRY, AS WELL AS LEADERSHIP DEVELOPMENT EXPERIENCE,  
GRANT-MANAGEMENT SKILLS, FUNDRAISING TECHNIQUES, THE CAPACITY TO  
ESTABLISH AND IMPLEMENT CLEAR POLICIES AND PROCEDURES WITHIN THEIR  
ORGANIZATION, AND BEST PRACTICES FOR MITIGATING SECONDARY TRAUMA AND  
SUPPORTING SELF-CARE EFFORTS. THE FELLOWS DEVELOPED PROPOSALS FOR  
SUBAWARDS THEY WILL CARRY OUT AFTER THE FINAL ONLINE ENGAGEMENTS AND  
GATHERINGS IN 2022. THE 2021-2022 COHORT MET FOR THE ENTIRETY OF 2021  
DUE TO THE COVID-19 SITUATION AND CONSEQUENT TRAVEL RESTRICTIONS.

GLOBAL FREEDOM EXCHANGE: CAPITALIZING ON THE LEADERSHIP AND EXPERTISE  
OF INTERNATIONAL LEADERS IN THE VITAL VOICES NETWORK, THE GLOBAL  
FREEDOM EXCHANGE (GFE), A HILTON AND VITAL VOICES PARTNERSHIP,  
LEVERAGES LEADERSHIP TO END SEX AND LABOR TRAFFICKING. OVER THE  
LIFESPAN OF THE PROGRAM, GFE HAS DEVELOPED AN INTERNATIONAL NETWORK OF  
ACTIVISTS WORKING IN THE FIELDS OF ADVOCACY, SERVICE PROVISION, LAW

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

ENFORCEMENT, CRIMINAL JUSTICE, AND PUBLIC HEALTH FROM EVERY REGION OF THE WORLD. IN 2021, IN RESPONSE TO ONGOING CHALLENGES OF THE COVID-19 PANDEMIC, VITAL VOICES BUILT UPON AND STRENGTHEN THE CUSTOMIZED, VIRTUAL FELLOW SUPPORT AND GRANT OFFERINGS THAT INITIALLY EMERGED AS CREATIVE, SUPPORTIVE SOLUTIONS FOR PROGRAMMING IN 2020 WHEN THE PANDEMIC HAD DOWNSTREAM EFFECTS ON VIOLENCE AND EXPLOITATION, AS WELL AS COMPOUNDED OBSTACLES TO FELLOWS' ABILITY TO ADDRESS THEM. VIRTUAL TRAININGS ADDRESSED A MYRIAD OF CAPACITY AND SKILLS-BUILDING TOPICS, INCLUDING LEGAL CONSIDERATIONS FOR NGO LEADERS, MENTORSHIP, MENTAL HEALTH, MEDITATION, AND GRANT WRITING. VITAL VOICES ALSO CONTINUED TO SUPPORT THE ESSENTIAL EFFORTS OF GFE FELLOWS THROUGH GRANT FUNDING OPPORTUNITIES, THROUGH THE CONTINUATION AND EXPANSION OF GFE PROJECT GRANTS AS WELL AS THE LAUNCH OF THE INAUGURAL GFE EMERGENCY FUND GRANTS.

ENVIRONMENTAL JUSTICE CURRICULUM: IN 2021 VITAL VOICES PARTNERED WITH THE WOMEN'S EARTH ALLIANCE TO CREATE A CLIMATE AND GENDER ACTION TOOLKIT TO PROVIDE LEADERS IN ALL SECTORS THE NECESSARY TOOLS, SUPPORT, AND NETWORKS TO INTEGRATE CLIMATE AND GENDER JUSTICE INTO THEIR LEADERSHIP PRACTICE. THIS TOOLKIT OFFERS LEADERS THE OPPORTUNITY TO EXPAND THEIR KNOWLEDGE AROUND THE CLIMATE EMERGENCY AND WOMEN'S UNIQUE POSITION IN THE CRISIS, LEARN ABOUT PROVEN CLIMATE JUSTICE STRATEGIES AND MAINSTREAM CLIMATE AND GENDER BEST PRACTICES, DESIGN A CLIMATE AND GENDER ACTION PLAN FOR THEIR ORGANIZATIONS AND COMMUNITIES AND BUILD A NETWORK OF SUPPORT FOR THEIR CLIMATE JUSTICE EFFORTS.

COMBATTING GENDER-BASED VIOLENCE (GBV) TRAININGS: IN 2021, LEVERAGING AVON RELATIONSHIPS AND SUPPORT IN COMBINATION WITH A GRANT FROM EURASIA

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

FOUNDATION, VITAL VOICES COLLABORATED WITH LOCAL RUSSIAN PARTNERS AND THE AVON FOUNDATION FOR WOMEN IN RUSSIA TO ORGANIZE, DEVELOP, AND DELIVER FOUR TRAININGS AT THE INTERSECTION OF YOUTH AND GBV FOR OVER 500 AVON REPRESENTATIVES ACROSS RUSSIA BETWEEN MARCH AND JUNE 2021. THESE TRAININGS COVERED TOPICS INCLUDING, BUT NOT LIMITED TO: DIVERSE FORMS AND IMPACT OF VIOLENCE (ESPECIALLY DOMESTIC VIOLENCE), STEREOTYPES OF GENDER AND MASCULINITY, AND YOUTH-SPECIFIC DYNAMICS AND CONSIDERATIONS RELATED TO GBV. PARTICIPANTS ENGAGED ACTIVELY WITH THE MATERIAL PRESENTED, ASKING QUESTIONS AND RESPONDING POSITIVELY TO THE CALLS FOR ACTION FROM PRESENTERS. AT THE CONCLUSION OF THESE TRAININGS, NUMEROUS PARTICIPANTS INDICATED AN INTEREST IN APPLYING THE LESSONS OF THE TRAININGS TO HELPING WOMEN IN THEIR COMMUNITIES.

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:

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

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 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.

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

AR, CA, CT, CO, GA, HI, IL, KS, KY, MA, MD, MI, MS, NH, NJ, NM, NY, OH, OK, OR, PA, SC, TN, UT, VA

Name of the organization

VITAL VOICES GLOBAL PARTNERSHIP, INC.

Employer identification number

52-2151557

WV

FORM 990, PART VI, SECTION C, LINE 19:

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