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DLN: 93493112004293

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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

		011 calendar year, or tax year beginning 07-01	-2011 and ending 06-30-201	2				
	ack of an				D Employer id	lentification number		
Add		plicable C Name of organization GLOBAL FUND FOR CHILDREN						
—		Doing Business As		_	56-18348 E Telephone n			
_	me char				(202) 331	-9003		
_	tıal retur	1101 14TH CT NW NO 420	delivered to street address) Room/su	ite	G Gross receipts			
	rmınated				'			
Am	nended r	eturn City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005						
App	plication	pending						
		F Name and address of principal off KRISTIN LINDSEY	icer		s a group retu			
		1101 14TH ST NW NO 420		affilia	tes/	⊤Yes 🔽 No		
		WASHINGTON, DC 20005		H(b) Are al	l affiliates inclu	ded?		
T Ta	ıx-exem	pt status		_		t (see instructions)		
			1 1317(4)(1) 01 1 327	H(c) Grou	p exemption n	umber F		
		: WWW GLOBALFUNDFORCHILDREN ORG						
		anization Corporation Trust Association Othe	r⊫	L Year of fo	mation 1984	M State of legal domicile NC		
Pa	rt I	Summary						
		sriefly describe the organization's mission or mo: NDVANCE THE EDUCATION AND DIGNITY OF		OUND THE W	ORLD			
3]	ADVANCE THE EDUCATION AND DIGNITY OF	CHIEDREN AND TOOTH AR	OUND THE W	OKLD			
Activities & Governance	-							
<u> </u>	3 -	Check this box ┡── if the organization discontinu	ed its operations or disposed (of more than 2	5% of its net :	accatc		
ŝ	1	lumber of voting members of the governing body		n more than 2	3 % of its fiet 8	12		
жб 		lumber of independent voting members of the go		•	4	10		
ĕĕ		otal number of individuals employed in calendar			5	51		
<u>5</u>	1	otal number of volunteers (estimate if necessar			6	0		
ă		otal unrelated business revenue from Part VIII,			7a	0		
	ь	let unrelated business taxable income from Forn	n 990-T, line 34		7b	0		
			Prio	r Year	Current Year			
_	8	Contributions and grants (Part VIII, line 1h)		9,464,045	4,310,556			
Revenue	9	Program service revenue (Part VIII, line 2g)			10,279	<u> </u>		
jake	10	Investment income (Part VIII, column (A), line			22,268	26,582		
_	11	Other revenue (Part VIII, column (A), lines 5, Total revenue—add lines 8 through 11 (must e		_	62,530	1,396,974		
	12	12)		9	9,559,122	5,740,577		
	13	Grants and similar amounts paid (Part IX, colu			3,862,366	4,327,559		
	14	Benefits paid to or for members (Part IX, colum	nn (A), line 4)		0	0		
ø	15	Salaries, other compensation, employee benefi	ts (Part IX, column (A), lines		2 422 070	2 559 246		
Expenses	16a	5-10) Professional fundraising fees (Part IX, column	(A) line 11a)		2,423,070	2,558,246		
<u>क</u>	b							
ŭ	17	Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11;		1.642.220 1.606.1				
	18	Total expenses Add lines 13–17 (must equal	·		1,642,330 7,927,766	1,606,180 8,491,985		
	19	Revenue less expenses Subtract line 18 from			1,631,356	-2,751,408		
æ ø	+	Saprade IIIe 10 IIIII		Beginning	of Current			
90 G					ear	End of Year		
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			9,317,599	6,608,944		
end G	21	Total liabilities (Part X, line 26)			694,803	790,184		
	22	Net assets or fund balances Subtract line 21 f	rom line 20		8,622,796	5,818,760		
			in alcoding a second control of					
Unde know		Signature Block ties of perjury, I declare that I have examined this re nd belief, it is true, correct, and complete. Declarati						
		*****		20	13-04-02			
Sign		Signature of officer			ite			
Her		KRISTIN LINDSEY CEO						
		Type or print name and title						
Paid		Preparer's signature ANGEL NGANDO		Check if self- employed • —	Preparer's taxp (see instruction P00719222	ayer identification number is)		
•	arer's	Firm's name (or yours CLIFTONLARSONALLEN LLP		•	EIN • 41-0746	.749		
Use (Only	if self-employed), address, and ZIP + 4 4250 N FAIRFAX DRIVE SUITE :	1020		LIN F 41-0/46	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

ARLINGTON, VA 22203

May the IRS discuss this return with the preparer shown above? (see instructions)

Phone no 🕨 (571) 227-9500

Par	rt IIII Statement of Progra Check if Schedule O conta				୮
1	Briefly describe the organization	's mission			
ORG	ADVANCE THE DIGNITY OF CHI GANIZATIONS WORKING WITH M LDREN'S BOOKS TO PROMOTE O	IANY OF THE WORLD'S	MOST VULNERABLE		
2	Did the organization undertake a the prior Form 990 or 990-EZ?		ervices during the year	which were not listed on	┌ Yes ┌ No
_	If "Yes," describe these new serv				
3	Did the organization cease condi- services?			nducts, any program	┌ Yes ┌ No
4	Describe the organization's progexpenses Section 501(c)(3) and grants and allocations to others,	ram service accomplishn d 501(c)(4) organizations	s and section 4947(a)	(1) trusts are required to rep	
	(Code) (Exper	nses \$ 6,827,360	ıncludıng grants of \$	4,327,559) (Revenue \$	34,338)
	GRANTMAKING THE GLOBAL FUND FO THEIR COMMUNITIES TO THRIVE OUR EVEN MORE CHILDREN IN NEED IT AL LABORERS - AND HELPS THEM REGAIN	STRATEGIC SUPPORT AND IN SO TRANSFORMS THE LIVES O	IVESTMENTS HELP OUR GRAF F CHILDREN ON THE EDGE	ANTEES ACHIEVE THEIR VISION, BE	COME SUSTAINABLE, AND REACH
4b	(Code) (Exper	nses \$ 384,390	ıncludıng grants of \$) (Revenue \$)
	COMMUNICATIONS THROUGH THE PO YOUTH AROUND THE WORLD, PROMOT				es and voices of Children an
4 c	(Code) (Exper	nses \$	ıncludıng grants of \$) (Revenue \$)
4d	Other program services (Desci (Expenses \$	ribe in Schedule O) including grants o	f\$) (Revenue \$)
4e	Total program service expenses				

Part IV	Checklist	of F	Reauired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II"	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 6			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-		
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
la	Did the organization have unrelated business gross income of \$1,000 or more during the			
_	year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
la	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 or securities account)?	4a		No
ь				
	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	255 managed on a ming requirements for Form FD T 20-22 1, Report of Foreign bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
		50		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
,	were not tax deductible?	OD		
_	· · · · · · · · · · · · · · · · · · ·	7a		NI ~
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	/a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
e	contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
,	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	711		
•	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	, [
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
_				

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

Check if Schedule O contains a response to any question in this Part VI		. 🗸
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Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	_		
Re	evenue Code.)			
40-	Delthe annual to be been been been been been been been	40-	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a		No
h	taxable entity during the year?			110
J	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure	100		

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

Own website Another's website V Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 THE ORGANIZATION 1101 14TH ST NW NO 420

WASHINGTON, DC 20005 (202) 331-9003

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

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

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

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week (describe hours	unles an	on (de thar	n one son er ar	e bo: is bo nd a	x, oth		(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
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	organizations
(1) RICK BURDICK DIRECTOR	1 00	х						0	0	0
(2) TAMARA C FOX DIRECTOR	1 00	х						0	0	0
(3) ARNAB GHATAK DIRECTOR	1 00	х						0	0	0
(4) JAMES ESPOSITO DIRECTOR	1 00	х						0	0	0
(5) JAMES SHERIDAN DIRECTOR	1 00	х						0	0	0
(6) HAFSAT ABIOLA-COSTELLO DIRECTOR	1 00	х						0	0	0
(7) MARK MCGOLDRICK CHAIR	5 00	х		Х				0	0	0
(8) SARAH PEROT VICE CHAIR	1 00	х		Х				0	0	0
(9) SANJIV KHATTRI TREASURER	1 00	х		Х				0	0	0
(10) JOAN PLATT SECRETARY	1 00	х		Х				0	0	0
(11) MAYA AJMERA DIRECTOR	5 00	х		Х				191,346	0	17,249
(12) KRISTIN LINDSEY CEO	40 00	х		Х				162,482	0	11,198
(13) VICTORIA DUNNING VP PROGRAMS	40 00			Х				149,580	0	16,322
(14) JERRY IRVINE VP COMMUNICATIONS	40 00			Х				124,550	0	8,607
(15) JIM KLEIN DIRECTOR OF FINANCE	40 00			Х				58,370	0	3,937
(16) ANNE SORENSEN VP DEVELOPMENT	40 00			Х				90,620	0	12,514

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

	(A) Name and Title	(B) Average hours per week (describe	unles an	on (d e tha	n on son er ai	e bo ıs bo nd a	x, oth		(D) Reporta compens from t organizati 2/1099-N	rtable Reportable compensation from related tion (W- organizations		portable Estimated amount of other compensation from the 2/1099-				
		hours for related organizations in Schedule O)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza			
1b	Sub-Total		<u> </u>	<u> </u>	<u> </u>			<u> </u> ►								
С	Total from continuation sheets					•		F								
d 2	Total (add lines 1b and 1c). Total number of individuals (inclusive 100,000 of reportable compensions).	udıng but not lın	nited to	thos	e lıs) who		776,948 nore tha	n	0		69,827		
													Yes	No No		
3	Did the organization list any forr on line 1a? <i>If</i> " <i>Yes," complete Sch</i>					ey e	mploy •	ee, o	or highest co	ompens	ated employee	3		No.		
4	For any individual listed on line 1 organization and related organization and related organization.											4	Yes			
5	Did any person listed on line 1a services rendered to the organiz											5		No		
Se	ection B. Independent Con	tractors														
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio														
	Nan	(A) ne and business add	dress							Descr	(B) ription of services		(C Comper			
												+				
												\downarrow				
	Total number of independent conti \$100,000 of compensation from t			ot lin	nıted	d to	those	liste	l d above) wh	o receiv	ed more than	+				

Form 9								Page 9
Part	/1111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
#\$ #	1a	Federated cam	paigns 1a					
호호	ь	Membership du	ies 1b					
s, g	C	Fundraising ev	ents 1c	58,800				
≢ <u>a</u>	d	Related organiz	zations 1d	1,004,956				
Contributions, gifts, grants and other similar amounts	e	Government grant	s (contributions) 1e					
ri S T S	f	All other contribute	ons, gifts, grants, and 1f ot included above	3,246,800				
돌 돌	g	Noncash contr	ibutions included in					
걸	١.	lines 1a-1f \$ _	- 1 - 1 (_	4,310,556			
<u>Q @</u>	h	Iotal. Add line	s 1 a - 1 f		4,310,330			
e =		ON THE DOOKSTO	DE 64156	Business Code				
ven	2a	ONLINE BOOKSTOI	RE SALES	451211	6,465	6,465		
Program Serwce Revenue	b							
	d							
	e							
	f	All other progr	am service revenue					
Ď	'							
	g		s 2a – 2f		6,465			
	3		ome (including dividen		26,582			26,582
	4		ar amounts) stment of tax-exempt bond		20,362			20,362
	5			proceeds	27,873	27,873		
		,	(ı) Real	(II) Personal				
	6a	Gross rents	9,550	,				
	ь	Less rental expenses	0					
	c	Rental income	9,550					
	d	or (loss) Net rental inco	me or (loss)	<u> </u>	9,550			9,550
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or other basis and						
		sales expenses						
	c	Gain or (loss)		<u> </u>				
	d 8a		ss)					
Other Revenue	oa	events (not inc \$58	rom fundraising luding ,800 s reported on line 1c)					
ě			ne 18					
늅			a	1,523,372				
Ě	b		penses b (loss) from fundraising		1,359,551			1,359,551
•	c 9a		rom gaming activities		1,333,331			1,555,551
			ne 19 a					
	b		penses b					
	10a	Gross sales of returns and allo		vitiesF				
	b		a oods sold b					
	С	Net income or Miscellaneou	(loss) from sales of inv	entory F Business Code				
	11a	miscellaneou	s Revenue	Dusilless Code				
	b							
	C							
	d	All other reven	ue					
	e		s 11a-11d	·				
				▶				
	12	Total revenue.	See Instructions .	▶	5,740,577	34,338	0	1,395,683

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) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	311,793	311,793		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	,	,		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	4,015,766	4,015,766		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	852,255	622,524	157,958	71,773
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,357,816	860,371	135,612	361,833
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	43,121	25,720	4,175	13,226
9	Other employee benefits	160,694	108,689	16,061	35,944
10	Payroll taxes	144,360	92,709	18,343	33,308
11	Fees for services (non-employees)				
а	Management				
ь	Legal				
c	Accounting	30,020		30,020	
d	Lobbying	,			
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	184,748	84,780	80,825	19,143
12	Advertising and promotion		,	·	
13	Office expenses	110,599	13,510	76,122	20,967
14	Information technology	189,302	14,370	174,833	99
15	Royalties	,	,	,	
16	Occupancy	369,232	249,208	44,865	75,159
17	Travel	218,788	145,888	40,340	32,560
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			,	
19	Conferences, conventions, and meetings	5,145	5,145		
20	Interest	3,2.10	5,2.0		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	70,949		70,949	
23	Insurance	25,997	3,771	22,226	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	KNO WLEDGE EXCHANGES	160,025	160,025		
b	DONOR SUPPORTED ACTIVIT	57,293	57,293		
С	COMMUNICATIONS AND MATE	56,622	37,528	2,429	16,665
d	ANNUAL REPORT	52,938		52,938	
е	9				
f	All other expenses	74,522	402,660	-461,707	133,569
25	Total functional expenses. Add lines 1 through 24f	8,491,985	7,211,750	465,989	814,246
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 18,815 204,501 1 1 1.851.291 2.574.747 2 2 3 5,845,028 2,370,349 3 29.188 4 37.645 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 18.455 8 0 9 66.987 9 20.804 Prepaid expenses and deferred charges 658.169 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 403,413 b Less accumulated depreciation 310,994 10c 254,756 1,159,251 1,132,769 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 17,590 13,373 15 15 9,317,599 6,608,944 16 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 284,855 152,694 17 17 Accounts payable and accrued expenses . 18 120,696 18 378,365 19 3,470 19 7,000 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 5,970 24 3,395 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 279,812 25 248,730 D 26 694,803 26 790,184 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1,148,302 27 Unrestricted net assets 1,134,302 6,390,789 28 3,597,941 28 Temporarily restricted net assets Fund 29 1,083,705 29 1,086,517 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 8.622.796 33 5.818.760 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 9.317.599 6.608.944 34

- Pa	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,7	740,577
2	Total expenses (must equal Part IX, column (A), line 25)	2			.91,985
3	Revenue less expenses Subtract line 2 from line 1	3		-2,7	751,408
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8,6	522,796
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	-52,628
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		5,8	318,760
Par	Tt XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			T	NI-
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			res	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
С	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	☐ Separate basis ☐ Both consolidated and separated basis				
За	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?	!	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization GLOBAL FUND FOR CHILDREN

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Employer identification number

Dowb I	De	- f P-	blic Charity Ct-			s much com	- بطه مهمام	150-18348					
Part I			Iblic Charity Star te foundation becaus		_		•	<u> </u>	istruction	UNS			
			ion of churches, or as										
2		-	d in section 170(b)(1			-	/)(±)(M)(i)	•					
у 3 Г			pperative hospital se				n 170/h)/1	1) (A) (iii)					
· —	· ·			=					1)/A)/::	::\			
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	=	-	erated for the benefi	_	e or univers	ity owned or o	perated by	a government	al unit d	described i	n		
_			(A)(iv). (Complete P										
6	A federa	federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	describe	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 🗆			described in sectior		A)(vi) (Co	mplete Part I	I)						
9 —			at normally receives					ributions, mem	bership	fees, and	iross		
- ,	_		rities related to its ex					· ·	-		_		
			oss investment inco										
	• • •	_	ganızatıon after June				•		,				
.0 —			ganized and operated										
. 1			ganized and operated						o carry o	out the pur	noses o		
·	one or m the box t	ore public	ly supported organiz ibes the type of supp b Type I	ations descr orting organ	ribed in sec lization and	tion 509(a)(1) or section es 11e thro	n 509(a)(2) Se ugh 11h	ee secti o		3). Che		
e f g	other the section! If the ord check the Since Au	an foundat 509(a)(2) ganization iis box igust 17, 2	ox, I certify that the ion managers and other received a written do 2006, has the organi	her than one	or more pu	iblicly support	ed organiz	ations describe	ed in sec	ction 509(a)(1) or		
	_	ı persons? son who dı	rectly or indirectly c	ontrols eith	er alone or	together with	persons de	escribed in (ii)		▼	es No		
			governing body of th			=	p =		Г	11g(i)	- 110		
	, ,	•	er of a person descri		_				<u> </u>	11g(ii)			
	` '	•	lled entity of a perso	` ,		above?				11g(iii)			
h			ng information about						Ľ	9()			
(i) Name suppo organiz	e of (ii) rted EIN		e of (ii) (described on courted EIN lines 1-9 above your ation or IRC section		(iv) Is the organizat col (i) list your gove docume	e ion in ted in erning	organızat col (ı) of	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) mount o upport?	
			(see instructions))	Yes	No	Yes	No	Yes	No				
otal							†		<u> </u>				

Support Schedule for Organizations Described in IRC 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.)

S	ection A. Public Support	e organization	ians to quanty t	inder the tests i	isted below, pi	<u> </u>	iipiete i	art III./
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20)11	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	8,187,10	7,322,644	6,268,791	9,464,045	4	,310,556	35,553,144
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit							
4	to the organization without charge Total. Add lines 1 through 3	8,187,10	8 7,322,644	6,268,791	9,464,045	4.	,310,556	35,553,144
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the							11,651,902
	amount shown on line 11, column (f)							
6	Public Support. Subtract line 5 from line 4							23,901,242
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20		(f) Total
7	A mounts from line 4	8,187,108	7,322,644	6,268,791	9,464,045	4,	310,556	35,553,144
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	167,398	72,951	40,920	60,900		26,582	368,751
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets				6,307			6,307
11	Total support (Add lines 7 through 10)							35,928,202
12	Gross receipts from related activiti	ies, etc (See ins	tructions)			12		51,525
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ion's first, second	, thırd, fourth, or fı	fth tax year as a	501(c)(3) organız	ation, ▶┌
S	ection C. Computation of Pul	blic Support I	Percentage					
14	Public Support Percentage for 201	1 (line 6 column	(f) divided by line	11 column (f))		14		66 530 %
15	Public Support Percentage for 201	0 Schedule A, Pa	art II, line 14			15		74 990 %
16a	33 1/3% support test—2011. If the and stop here. The organization qua				ine 14 is 33 1/3%	or more	, check t	his box ▶ ✓
	33 1/3% support test—2010. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization part IV how the organization mecorganization	n qualifies as a p — 2011. If the org ition meets the "	ublicly supported janization did not facts and circums	organization check a box on lin tances" test, chec	e 13, 16a, or 16l ck this box and st	and line	: 14 Explain	▶ ┌
b 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organization Explain in Part IV how the organization Private Foundation If the organizationstructions	nization meets th	ne "facts and circu facts and circums	ımstances" test, o tances" test The	theck this box an organization qua	d stop he lifies as a	re. publicly	·

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 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 (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).									
	Facts And Circumstances Test									
	Explanation									

Schedule A (Form 990 or 990-EZ) 2011

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DLN: 93493112004293

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

Supplemental Financial Statements

Open to Public

Interna	al Revenue Service	► Attach to Fo	Inspe			ection	
	me of the organ			Emp	loyer ident if ica	tion numb	er
GL	OBAL FUND FOR CHI	LDREN		56-	1834887		
Pa			dvised Funds or Other Similar F			. Comple	te if the
	organiz	zation answered "Yes" to Form 99			(L) Fdd -		
1	Total number a	at and of year	(a) Donor advised funds	<u> </u>	(b) Funds and o	tner accou	ints
2		tributions to (during year)					
3	33 3	nts from (during year)					
4		ue at end of year					
5	Did the organiz	· · · · · · · · · · · · · · · · · · ·	sors in writing that the assets held in dor organization's exclusive legal control?	nor advi	sed	┌ Yes	┌ No
6	Did the organizused only for c	zation inform all grantees, donors, and	donor advisors in writing that grant funds efit of the donor or donor advisor, or for a			┌ Yes	┌ No
Pa	rt III Conse	rvation Easements. Complete	ıf the organization answered "Yes" t	o Forn	n 990, Part I\	/, line 7.	
2	Preservat Protection Preservat Complete lines	conservation easements held by the or ion of land for public use (e g , recreati n of natural habitat ion of open space s 2a–2d if the organization held a quali he last day of the tax year		certifie	d historic struc	-	a
					Held at the	End of the	Year
а	Total number o	of conservation easements		2a			
b	Total acreage	restricted by conservation easements		2b			
C		servation easements on a certified his		2c			
d	Number of con	servation easements included in (c) ac	cquired after 8/17/06	2d			
3	Number of con	servation easements modified, transfe	erred, released, extinguished, or terminate	ed by th	ie organization	durıng	
	the taxable ye	ar ►					
4	Number of stat	tes where property subject to conserva	ation easement is located ►				
5		nization have a written policy regarding f the conservation easements it holds?	g the periodic monitoring, inspection, han ?	dling of	violations, and	│ ├ Yes	┌ No
6	Staff and volur	nteer hours devoted to monitoring, insp	pecting and enforcing conservation easen	nents d	uring the year I	-	
7	A mount of exp	enses incurred in monitoring, inspectii	ng, and enforcing conservation easement	s during	g the year		
•	► \$						
8		nservation easement reported on line 2) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion		┌ Yes	┌ No
9	balance sheet,		onservation easements in its revenue and the footnote to the organization's financia nents				
Par			ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Otl	her Similar	Assets.	
1a	art, historical t	treasures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or resear nancial statements that describes these i	ch ın fu			e,
b	historical treas		116, to report in its revenue statement a public exhibition, education, or research i s				
	(i) Revenues i	ncluded in Form 990, Part VIII, line 1			► \$		
	(ii) Assets inc	luded in Form 990, Part X			<u> </u>		
2	If the organiza	•	orical treasures, or other similar assets for Single 116 relating to these items	or finan	cial gain, provi	de the	

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	His	<u>toric</u>	al Tre	easur	es, or O	the	r Similar A	sset	S (co.	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th		_		_			tion		
а	Public exhibition		d	Γ	Loan o	rexch	ange progi	ams				
b	Scholarly research		e	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's c Part XIV	ollections and explai	n how	v they	further	the or	rganızatıon	ı's ex	empt purpose	ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								nılar	□ Y	es	┌ No
Par	ESCROW and Custodial Arrang Part IV, line 9, or reported an ar	ements. Comple	te ıf	the o	rganız	ation			es" to Form	, -		,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	diary	for co	ntrıbut	ions oi	r other ass	ets r	not	┌ Y	es	┌ No
b	If "Yes," explain the arrangement in Part XI $$	V and complete the f	ollow	ıng tal	ble		_					
							-		Α	moun	t	
С	Beginning balance							1c				
d	Additions during the year						L	1d				
e	Distributions during the year						L	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?							┌ Y	es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/										
Par	t V Endowment Funds. Complete		ans	were	d "Yes							
		(a)Current Year	(b)	Prior Ye		(c) Two	Years Back	_	Three Years Back	+ ` ´	our Ye	ears Back
1a	Beginning of year balance	1,083,705		1,0	83,705		1,080,98	4	1,077,43	+		
b	Contributions	2,812					2,72	3	3,54			
С	Investment earnings or losses								7,43	4		
d	Grants or scholarships											
е	Other expenditures for facilities and programs								7,43	4		
f	Administrative expenses											
g	End of year balance	1,086,517		1,0	83,705		1,083,70	5	1,080,98	2		
2	Provide the estimated percentage of the year	r end balance held a	s					•		<u> </u>		
а	Board designated or quasi-endowment											
ь	Permanent endowment ► 100 000 %											
с За	Term endowment ► Are there endowment funds not in the posse	ssion of the organiza	ition t	hat ar	e held	and ac	lministere	d for	the			
-	organization by	Join of the organiza		ac ai	e nera	ana ac		u 101		Γ	Yes	No
	(i) unrelated organizations								За	(i)		No
	(ii) related organizations								3a	(ii)		No
b	If "Yes" to 3a(II), are the related organization							•	3	Bb		
4	Describe in Part XIV the intended uses of th					_						
Par'	VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	rt X,	line 1	0.	ı					
	Description of property				Cost or s (invest		(b) Cost or obasis (oth		(c) Accumulate depreciation	ed ((d) Bo	ok value
1a l	and											
b E	Buildings											
c L	easehold improvements				3	376,030			175,	921		200,109
d E	quipment				2	282,139			227,	492		54,647
	X											
е (Other		•									

Part VII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	. ,	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	
(a) Descrip	tion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
DEFERRED LEASEHOLD ALLOWANCE	248,730	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	248,730	
2 Fin 49 (ASC 740) Footpote In Bort VIV provide the text		nization's financial statements that reports the

3 4 a b c	Subtract line 2e from line 1	4c 5	
4 a b	A mounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIV)		
4 a	A mounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a	_	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
~		. 2	
e	Add lines 2a through 2d	2e 3	
d	Other (Describe in Part XIV)	↓	
c	Other losses	- I	
b	Prior year adjustments	-	
a	Donated services and use of facilities	4	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
1	Total expenses and losses per audited financial statements	1	
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	Return
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
C	Add lines 4a and 4b	4c	
b	Other (Describe in Part XIV)		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
3	Subtract line 2e from line 1	3	
e	Add lines 2a through 2d	2e	
d	Other (Describe in Part XIV)		
c	Recoveries of prior year grants		
b	Donated services and use of facilities		
а	Net unrealized gains on investments		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
1	Total revenue, gains, and other support per audited financial statements	1	
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
9	Total adjustments (net) Add lines 4 - 8	9	
8	Other (Describe in Part XIV)	8	
7	Prior period adjustments	7	
6	Investment expenses	6	
5	Donated services and use of facilities	5	
4	Net unrealized gains (losses) on investments	4	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE CONTRIBUTIONS TO THE ENDOWMENT FUNDS ARE TO BE HELD BY GFC IN PERPETUITY
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	GLOBAL FUND FOR CHILDREN IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) THE INTERNAL REVENUE SERVICE HAS CLASSIFIED GFC AS A PUBLICLY SUPPORTED FOUNDATION UNDER SECTION 509(A)(1) AND 170(B)(1)(A)(VI) OF THE IRC THE GLOBAL FUND FOR CHILDREN UK TRUST IS EXEMPT FROM TAX IN THE UK UNDER SECTION 505 OF THE TAXES ACT OF 1988 GLOBAL FUND FOR CHILDREN HAS ADOPTED THE GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THE IMPLEMENTATION OF THIS GUIDANCE HAD NO IMPACT ON GLOBAL FUND FOR CHILDREN'S FINANCIAL STATEMENTS GLOBAL FUND FOR CHILDREN BELIEVES IT HAS APPROPRIATE SUPPORT FOR UNRELATED TRADE OR BUSINESS POSITIONS AND, AS A RESULT, DOES NOT HAVE UNCERTAIN INCOME TAX POSITIONS THAT HAVE A MATERIAL IMPACT ON THE FINANCIAL STATEMENTS GLOBAL FUND FOR CHILDREN FILES AS A TAX-EXEMPT ORGANIZATION GLOBAL FUND FOR CHILDREN'S 2009, 2010 AND 2011 TAX YEARS ARE OPEN FOR EXAMINATION BY THE IRS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493112004293

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990,

> Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

Name of the organization GLOBAL FUND FOR CHILDREN **Employer identification number**

					56-1834887	
Pa	"Yes" to Form 990, Par	n on Activiti rt IV, lıne 14b	es Outside th	e United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the cassistance, the grantees' eligible the grants or assistance?	gibility for the	grants or assis	tance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in Pa United States	rt V the organiz	atıon's procedur	es for monitoring the use	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal sı	pace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for region/investments in region
	-					
3:	Sub-total	0	0			0
	Total from continuation sheets to Part I	0				0

c Totals (add lines 3a and 3b)

chedule F (Form		istance to Organ	nizations or Entition	es Outside the Un	ited States Comr	lete if the organiza	tion answered "Yes"	Page 2
Part 1	IV, line 15, for any	recipient who rece	eived more than \$5,0	000. Check this box	if no one recipient	received more than	n \$5,000	► F
Use F	Part V if additional s	pace is needed.						
(a) Name of organization		(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
See Add Data	11							

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

308

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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						1	dula E (Earry 000) 2011

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 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	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)	Г	Yes	্	Νo
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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
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)	Г	Yes	┍	Νo
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 file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 GLOBAL FUND FOR CHILDREN MONITORS THE USE OF GRANT FUNDS OUTSIDE OF THE US BY REQUIRING GRANTEES TO SUBMIT INTERIM AND FINAL NARRATIVE AND FINANCIAL REPORTS TO OUR PROGRAM OFFICERS WHO MONITOR THEIR GRANTEES ADDITIONALLY GFC COMPILES AND INPUTS DATA INTO OUR GRANTS MANAGEMENT AND METRICS SYSTEM PROGRAM OFFICERS ALSO PERFORM SITE VISITS TYPICALLY ON A BIANNUAL BASIS THE GRANTS MANAGER ENSURES GRANT COMPLIANCE AND COMPLIANCE WITH US TREASURY VOLUNTARY GUIDELINES FOR ORDER 13224

Schedule F (Form 990) 2010

Additional Data

Software ID: Software Version:

EIN: 56-1834887

Name: GLOBAL FUND FOR CHILDREN

(a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of grant	(e) A mount of	(f) Manner of cash	(g) A mount of non-cash	(h) Description of	(ı) Method of valuatıon (book, FMV,
organization	and EIN(ıf applıcable)			cash grant	dısbursement	assistance	non-cash assistance	appraisal, other)
			SUSTAINABILITY AWARD	25,000				
		EAST ASIA & PACIFIC\INDONESIA	SUSTAINABILITY AWARD	25,000				
		EAST ASIA & PACIFIC\INDONESIA	SUSTAINABILITY AWARD	25,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant		cash	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EAST ASIA & PACIFIC\THAILAND	SUSTAINABILITY AWARD	25,000				
			SUSTAINABILITY AWARD	25,000				
		EUROPE & CENTRAL ASIA\SERBIA	SUSTAINABILITY AWARD	25,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	, , <i>,</i>	(ı) Method of valuatıon (book, FMV, appraısal, other)
			SUSTAINABILITY AWARD	25,000				•
			SUSTAINABILITY AWARD	25,000				
		LATIN AMERICA & CARIBBEAN\BOLIVIA	SUSTAINABILITY AWARD	25,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	, , ,	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			SUSTAINABILITY AWARD	25,000				-
			SUSTAINABILITY AWARD	25,000				
		LATIN AMERICA & CARIBBEAN\MEXICO	SUSTAINABILITY AWARD	25,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		drant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\NICARAGUA	SUSTAINABILITY AWARD	25,000			
			SUSTAINABILITY AWARD	25,000			
		,	SUSTAINABILITY AWARD	25,000			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUSTAINABILITY AWARD	25,000			
		SUSTAINABILITY AWARD	25,000			
		SUSTAINABILITY AWARD	25,000			

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(N) Description of	(ı) Method of valuation (book, FMV, appraisal, other)
		,	SUSTAINABILITY AWARD	25,000				
		SUB-SAHARAN AFRICA\ETHIOPIA	SUSTAINABILITY AWARD	25,000				
			SUSTAINABILITY AWARD	25,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	of	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	. ,	(ı) Method of valuatıon (book, FMV, appraısal, other)
			SUSTAINABILITY AWARD	25,000				
		EAST ASIA & PACIFIC\CHINA	PRIMARY GRANT	20,000				
		EAST ASIA & PACIFIC\INDONESIA	PRIMARY GRANT	20,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC\THAILAND	PRIMARY GRANT	20,000				
			PRIMARY GRANT	20,000				
		LATIN AMERICA & CARIBBEAN\BRAZIL	PRIMARY GRANT	20,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	Description of	(ı) Method of valuatıon (book, FMV, appraısal, other)
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	20,000				
			PRIMARY GRANT	20,000				
		LATIN AMERICA & CARIBBEAN\NICARAGUA	PRIMARY GRANT	20,000				

	(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			LATIN AMERICA & CARIBBEAN\PERU		20,000				
ſ				PRIMARY GRANT	20,000				
				PRIMARY GRANT	20,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	l	SOUTH ASIA\INDIA	PRIMARY GRANT	20,000				
		SOUTH ASIA\PAKISTAN	PRIMARY GRANT	20,000				
	l	SOUTH ASIA\PAKISTAN	PRIMARY GRANT	20,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	1		PRIMARY GRANT	20,000				
	1		PRIMARY GRANT	20,000				
	1		PRIMARY GRANT	20,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	1		PRIMARY GRANT	20,000				
			PRIMARY GRANT	20,000				
			PRIMARY GRANT	19,000				_

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\DOMINICAN REPUBLIC	PRIMARY GRANT	19,000				
			PRIMARY GRANT	18,000				
			PRIMARY GRANT	18,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(0)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	1		PRIMARY GRANT	18,000				
		,	PRIMARY GRANT	18,000				
	1	SUB-SAHARAN AFRICA\ETHIOPIA	PRIMARY GRANT	18,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC\INDONESIA	PRIMARY GRANT	17,000				
			PRIMARY GRANT	17,000				
			PRIMARY GRANT	17,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE & CENTRAL	PRIMARY	17,000				
		ASIA\UKRAINE	GRANT					
		EUROPE & CENTRAL	PRIMARY	17,000				
		ASIA\UKRAINE	GRANT					
		LATIN AMERICA &	PRIMARY	17,000				
		CARIBBEAN\BRAZIL	GRANT					

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	Description of	(ı) Method of valuatıon (book, FMV, appraısal, other)
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	17,000				
			PRIMARY GRANT	17,000				
			PRIMARY GRANT	17,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\PANAMA	PRIMARY GRANT	17,000				
		SOUTH ASIA\INDIA	PRIMARY GRANT	17,000				
		SOUTH ASIA\INDIA	PRIMARY GRANT	17,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	l .		PRIMARY GRANT	17,000				
			PRIMARY GRANT	17,000				
	l .		PRIMARY GRANT	17,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(5)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	17,000				
			PRIMARY GRANT	17,000				
			PRIMARY GRANT	17,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	17,000				
		EAST ASIA & PACIFIC\CAMBODIA	PRIMARY GRANT	16,000				
			PRIMARY GRANT	16,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	16,000				
			PRIMARY GRANT	16,000				
		LATIN AMERICA & CARIBBEAN\ARGENTINA	PRIMARY GRANT	16,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	16,000				
			PRIMARY GRANT	16,000				
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	16,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	16,000				·
			PRIMARY GRANT	16,000				
			PRIMARY GRANT	16,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	16,000				
		EAST ASIA & PACIFIC\INDONESIA	PRIMARY GRANT	15,000				
			PRIMARY GRANT	15,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(n) Description of	(ı) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	15,000				-
			PRIMARY GRANT	15,000				
		LATIN AMERICA & CARIBBEAN\DOMINICAN REPUBLIC	PRIMARY GRANT	15,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	Description of	(ı) Method of valuatıon (book, FMV, appraisal, other)
			PRIMARY GRANT	15,000				•
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	15,000				
			PRIMARY GRANT	15,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(N) Description of	(ı) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\NICARAGUA	PRIMARY GRANT	15,000				
			PRIMARY GRANT	15,000				
		l '	PRIMARY GRANT	15,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA\INDIA	PRIMARY GRANT	15,000				
		EAST ASIA & PACIFIC\CAMBODIA	PRIMARY GRANT	14,000				
		LATIN AMERICA & CARIBBEAN\BRAZIL	PRIMARY GRANT	14,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	Description of	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	14,000				
		LATIN AMERICA & CARIBBEAN\DOMINICAN REPUBLIC	PRIMARY GRANT	14,000				
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	14,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	14,000				
		SOUTH ASIA\AFGHANISTAN	PRIMARY GRANT	14,000				
		'	PRIMARY GRANT	14,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	14,000				
			PRIMARY GRANT	14,000				
			PRIMARY GRANT	14,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	14,000				
			PRIMARY GRANT	14,000				
		EAST ASIA & PACIFIC\CAMBODIA	PRIMARY GRANT	13,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC\MONGOLIA	PRIMARY GRANT	13,000				
		EUROPE & CENTRAL ASIA\HUNGARY	PRIMARY GRANT	13,000				
		EUROPE & CENTRAL ASIA\SERBIA	PRIMARY GRANT	13,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	13,000				
		LATIN AMERICA & CARIBBEAN\HAITI		13,000				
			PRIMARY GRANT	13,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	13,000				
			PRIMARY GRANT	13,000				
			PRIMARY GRANT	13,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	13,000				-
		SUB-SAHARAN AFRICA\DEMOCRATIC REPUBLIC OF THE CONGO	PRIMARY GRANT	13,000				
			PRIMARY GRANT	13,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC\CAMBODIA	PRIMARY GRANT	12,000				
			PRIMARY GRANT	12,000				
			PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	12,000				
		EUROPE & CENTRAL ASIA\ROMANIA	PRIMARY GRANT	12,000				
			PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	12,000				
			PRIMARY GRANT	12,000				
		LATIN AMERICA & CARIBBEAN\BOLIVIA	PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\COLOMBIA	PRIMARY GRANT	12,000				
		LATIN AMERICA & CARIBBEAN\COLOMBIA	PRIMARY GRANT	12,000				
		LATIN AMERICA & CARIBBEAN\COLOMBIA	PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	Description of	(ı) Method of valuatıon (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	12,000				
		LATIN AMERICA & CARIBBEAN\HONDURAS	PRIMARY GRANT	12,000				
			PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	l .		PRIMARY GRANT	12,000				
			PRIMARY GRANT	12,000				
	l .		PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(C) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA\INDIA	PRIMARY GRANT	12,000				
		SOUTH ASIA\PAKISTAN	PRIMARY GRANT	12,000				
		SOUTH ASIA\PAKISTAN	PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	12,000				-
			PRIMARY GRANT	12,000				
			PRIMARY GRANT	12,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	1		PRIMARY GRANT	12,000				
	1		PRIMARY GRANT	12,000				
	1		PRIMARY GRANT	11,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	i (n)	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC\PHILIPPINES	PRIMARY GRANT	11,000				_
		EAST ASIA & PACIFIC\PHILIPPINES	PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	I (h)	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	11,000				
		LATIN AMERICA & CARIBBEAN\COLOMBIA	PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\MEXICO	PRIMARY GRANT	11,000				
		SOUTH ASIA\INDIA	PRIMARY GRANT	11,000				
		· '	PRIMARY GRANT	11,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA\SWAZILAND	PRIMARY GRANT	11,000				
			PRIMARY GRANT	11,000				
		EAST ASIA & PACIFIC\CAMBODIA	PRIMARY GRANT	10,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	i ini	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	10,000				
		EAST ASIA & PACIFIC\PHILIPPINES	PRIMARY GRANT	10,000				
			PRIMARY GRANT	10,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	10,000				
		ASIA\SERBIA	GRANT					
			PRIMARY GRANT	10,000				
			PRIMARY GRANT	10,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	i (n)	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	10,000				•
			PRIMARY GRANT	10,000				
		LATIN AMERICA & CARIBBEAN\ECUADOR	PRIMARY GRANT	10,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\PANAMA	PRIMARY GRANT	10,000				
		SOUTH ASIA\INDIA	PRIMARY GRANT	10,000				
		SOUTH ASIA\INDIA	PRIMARY GRANT	10,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		PRIMARY GRANT	10,000			
		PRIMARY GRANT	10,000			
		PRIMARY GRANT	10,000			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	10,000				
			PRIMARY GRANT	10,000				
			PRIMARY GRANT	10,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	i ini	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA\MOZAMBIQUE	PRIMARY GRANT	10,000				
			PRIMARY GRANT	10,000				
			PRIMARY GRANT	10,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant		(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		,	O RGA NIZATIO NA L DEVELO PMENT A WA RD	9,500				
		EAST ASIA & PACIFIC\CAMBODIA	PRIMARY GRANT	9,000				
		EAST ASIA & PACIFIC\INDONESIA	PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE & CENTRAL ASIA\HUNGARY	PRIMARY GRANT	9,000				
		EUROPE & CENTRAL ASIA\KAZAKHSTAN		9,000				
		EUROPE & CENTRAL ASIA\MOLDOVA	PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	Description of	(ı) Method of valuatıon (book, FMV, appraısal, other)
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	9,000				
		LATIN AMERICA & CARIBBEAN\NICARAGUA	PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		I · · · ·	PRIMARY GRANT	9,000				-
			PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		PRIMARY GRANT	9,000				
	1	PRIMARY GRANT	9,000				
	1	PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				
		SOUTH ASIA\SRI LANKA	PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) itegion	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA\TANZANIA	PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				
			PRIMARY GRANT	9,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			O P P O R T U N I T Y G R A N T	8,500				
		ASIA\INDIA	ORGANIZATIONAL DEVELOPMENT AWARD	8,400				
		ASIA\INDIA	O RGANIZATIO NA L DEVELO PMENT A WARD	8,400				_

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		ASIA\INDIA	ORGANIZATIONAL DEVELOPMENT AWARD	8,400				
		ASIA\INDIA	ORGANIZATIONAL DEVELOPMENT AWARD	8,400				
		ASIA\INDIA	ORGANIZATIONAL DEVELOPMENT AWARD	8,400				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	8,000				
		EAST ASIA & PACIFIC\THAILAND	PRIMARY GRANT	8,000				
		EUROPE & CENTRAL ASIA\SERBIA	PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	8,000				
		EUROPE &	PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	8,000				
		LATIN AMERICA & CARIBBEAN\ARGENTINA	PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	I (N)	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	8,000				
		LATIN AMERICA & CARIBBEAN\COLOMBIA	PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		LATIN AMERICA & CARIBBEAN\GUATEMALA	PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				
		,	PRIMARY GRANT	8,000				

` ′	Name of nization	(b) IRS code section and EIN(if applicable)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	8,000				-
			PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				

` ′	Name of nization	(b) IRS code section and EIN(if applicable)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	8,000				-
			PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA\SRI LANKA	PRIMARY GRANT	8,000				
		SOUTH ASIA\SRI LANKA	PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA\KENYA	PRIMARY GRANT	8,000				-
		SUB-SAHARAN AFRICA\LIBERIA	PRIMARY GRANT	8,000				
		SUB-SAHARAN AFRICA\LIBERIA	PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(0)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	8,000				
			PRIMARY GRANT	8,000				
		SUB-SAHARAN AFRICA\SWAZILAND	PRIMARY GRANT	8,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(6)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA\TANZANIA	PRIMARY GRANT	8,000				
		SUB-SAHARAN AFRICA\TANZANIA	PRIMARY GRANT	8,000				
			PRIMARY GRANT	7,500				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	ו וחו ו	(ı) Method of valuatıon (book, FMV, appraısal, other)
		CENTRAL	ORGANIZATIONAL DEVELOPMENT AWARD	7,265				
	1	EAST ASIA & PACIFIC\CHINA	PRIMARY GRANT	7,000				
		EAST ASIA & PACIFIC\CHINA	PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC\INDONESIA	PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				
		EAST ASIA & PACIFIC\MONGOLIA	PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC\MONGOLIA	PRIMARY GRANT	7,000				
		EUROPE & CENTRAL ASIA\KYRGYZSTAN	PRIMARY GRANT	7,000				
		EUROPE & CENTRAL ASIA\MOLDOVA	PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(N) Description of	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	7,000				
		LATIN AMERICA & CARIBBEAN\DOMINICAN REPUBLIC	PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(N) Description of	(ı) Method of valuatıon (book, FMV, appraısal, other)
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				
		LATIN AMERICA & CARIBBEAN\NICARAGUA	PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Kegion	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		LATIN AMERICA & CARIBBEAN\PANAMA	PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				
			PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	1		PRIMARY GRANT	7,000				
	1		PRIMARY GRANT	7,000				
	1		PRIMARY GRANT	7,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA\TANZANIA	PRIMARY GRANT	7,000				-
			PRIMARY GRANT	7,000				
		EAST ASIA & PACIFIC\CAMBODIA	PRIMARY GRANT	6,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	i ini	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	6,000				•
			PRIMARY GRANT	6,000				
		EAST ASIA & PACIFIC\PHILIPPINES	PRIMARY GRANT	6,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Kegion	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	6,000				•
		LATIN AMERICA & CARIBBEAN\BOLIVIA	PRIMARY GRANT	6,000				
			PRIMARY GRANT	6,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	6,000				•
			PRIMARY GRANT	6,000				
			PRIMARY GRANT	6,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	6,000				
			PRIMARY GRANT	6,000				
			PRIMARY GRANT	6,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY	6,000				
		AFRICA\UGANDA EUROPE & CENTRAL ASIA\KAZAKHSTAN		5,500				
			PRIMARY GRANT	5,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	i (ni	(ı) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	5,000				-
		EAST ASIA & PACIFIC\THAILAND	OPPORTUNITY GRANT	5,000				
		EUROPE & CENTRAL ASIA\KYRGYZSTAN		5,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		EUROPE & CENTRAL ASIA\MOLDOVA	PRIMARY GRANT	5,000				
		CENTRAL	O RGANIZATIO NAL DEVELO PMENT A WARD	5,000				
		LATIN AMERICA & CARIBBEAN\PERU	PRIMARY GRANT	5,000				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRIMARY GRANT	5,000			
			PRIMARY GRANT	5,000			

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DLN: 93493112004293

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

	ne of the organization BAL FUND FOR CHILDREN	.1					Employer ider	ntification number
GLU	BAL FUND FOR CHILDREN	V					56-1834887	
Pa	rt I Fundraising Ac	tivities. Complet	e if the o	organiza	tion answered "Yes"	to Form	n 990, Part IV	, line 17.
1	Indicate whether the organ	nızatıon raısed funds	through	any of the	following activities Ch	eck all ti	hat apply	
а	Mail solicitations			e	Solicitation of noi	n-govern	ment grants	
b	Internet and e-mail so	olicitations		f	Solicitation of gov	/ernmen	t grants	
С	Phone solicitations			g	✓ Special fundraisir	g event	5	
d	☐ In-person solicitation	s						
2a b	Did the organization have or key employees listed in If "Yes," list the ten higher to be compensated at leas	ı Form 990, Part VII st paıd ındıvıduals or) or entity entities	/ in conne (fundraise	ection with professional ers) pursuant to agreem	fundraisi ents und	ng services? ler which the fur	
((i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or r fundra	mount paid to etained by) iiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
Tota	ıl							
3	List all states in which the licensing	organization is regis	stered or	licensed t	to solicit funds or has be	een notif	ied it is exempt	from registration or

Par	t II	Fundraising Events. Com more than \$15,000 on Form				
		, ,	(a) Event #1	(b) Event #2	(c) O ther Events	(d) Total Events (Add col (a) through
			GALA			col (c))
_			(event type)	(event type)	(total number)	
en la	1	Gross receipts	1,582,172	2		1,582,172
Revenue	2	Less Charitable contributions	58,800			58,800
	3	Gross income (line 1 minus line 2)	1,523,372	2		1,523,372
	4	Cash prizes				<u> </u>
မှု	5	Non-cash prizes				<u> </u>
Expenses	6	Rent/facility costs	30,809	9		30,809
	7	Food and beverages	58,800			58,800
Direct	8	Entertainment	1,500			1,500
۵	9	Other direct expenses .	72,712	2		72,712
	10	Direct expense summary Add lin	es 4 through 9 ın columr	n (d)		(163,821)
	11	Net income summary Combine Ii	nes 3 and 10 ın column ((d)		1,359,551
Par	: III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	irt IV, line 19, or repo	orted more than
Reveilue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 (Gross revenue				
ses	2 (Cash prizes				
Expenses	3 1	Non-cash prizes				
	4 F	Rent/facility costs				
Direct	5 (Other direct expenses				
	6 \	Volunteer labor	┌ Yes	┌ Yes	┌ Yes	_
		Direct expense summary Add line:				()
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	umn (d)	<u> ►</u>	<u></u>
9 a b	Is th	er the state(s) in which the organization licensed to operate	gaming activities in eac	h of these states?		· Fyes Fno
LOa b		e any of the organization's gaming les," Explain	licenses revoked, susper	nded or terminated during	the tax year?	
ט		es, Explain				

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Гү	es Γ_{No}
12		neficiary or trustee of a trust or a mem			
	formed to administer charitable (gamıng?		· · · · Γ γ	es Γ_{No}
13	Indicate the percentage of gamir	ng activity operated in			
а	The organization's facility			13a	
b	An outside facility			13b	
14	Provide the name and address of records	f the person who prepares the organiza	tion's gaming/special events book	s and	
	Name 🟲				
	Address ►				
15a	Does the organization have a co	ntract with a third party from whom the	organization receives gaming		
				Γ_{\vee}	s F _{No}
b		ning revenue received by the organizat			23 140
	amount of gaming revenue retain	ied by the third party 🟲 \$			
c	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	* \$			
	Description of services provided	>			
	Director/officer	Employee	Independent contractor		
17	Mandatory distributions				
а	Is the organization required unde	er state law to make charitable distribu	itions from the gaming proceeds to		
					es Γ_{No}
b		required under state law distributed to	o other exempt organizations or sp	ent	
	in the organization's own exempt	activities diiring the tay vear 🖛 💲			
Par	t IV Complete this part to j	provide additional information for	responses to quuestion on Sc	hedule G (see	
Par	Complete this part to provide instructions.)		responses to quuestion on Sc	hedule G (see	

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DLN: 93493112004293 OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

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

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

Inspection

GLOBAL FUND FOR CHILDREN						56-1834887	
1 Does the organization maintain the selection criteria used to a Describe in Part IV the organical part IV th	n records to substant award the grants or as	iate the amount of the sistance?					▽ Yes ┌
Form 990, Part IV, lı	ne 21 for any recip	pient that received n	rganizations in the nore than \$5,000. Ch needed	eck this box if no one	recipient receive	d more than \$5,000.	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section !3 Enter total number of other org		_				· · · · , _	20

Part III Grants and Other Assist Use Schedule I-1 (Form 99			s. Complete if the orgar	nization answered "Yes" to	Form 990, Part IV, line 22.
(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation		•	
	PART I, LINE 2	, , ,			NG PROCEDURES FOR US GRANTEES
MONITORING GRANTS IN THE U S					GRANTMAKING WE ALSO COLLECT A E ORGANIZATIONAL METRICS, NARRATIVE
		DESCRIPTIONS OF HOV	•		•

Software ID: Software Version:

EIN: 56-1834887

Name: GLOBAL FUND FOR CHILDREN

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREE MINDS BOOK CLUB AND WRITING WORKSHOP2201 P STREET NW WASHINGTON, DC 20037	43- 2066514		25,000			SUSTAINABILITY AWARD
NYAKA AIDS ORPHANS PROJECT PO BOX 339 EAST LANSING, MI 48864			25,000			SUSTAINABILITY AWARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATE4492 BURR PLACE BOULDER, CO 80303			20,000				PRIMARY GRANT
FREE MINDS BOOK CLUB AND WRITING WORKSHOP2201 P STREET NW WASHINGTON, DC 20037	43- 2066514		20,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NYAKA AIDS ORPHANS PROJECTPO BOX 339 EAST LANSING,MI 48864			20,000				PRIMARY GRANT
HESHIMA KENYA PO BOX 408077 CHICAGO,IL 60640			18,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASCENSIONS COMMUNITY SERVICES1526 HOWARD ROAD SE WASHINGTON, DC 20020	51- 0519629		17,000				PRIMARY GRANT
HOPE HOUSEPO BOX 60682 WASHINGTON, DC 20039	31- 1594625		16,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON YOUTH CHOIR733 8TH STREET NW WASHINGTON, DC 20001	52- 1833176		15,000				PRIMARY GRANT
LA PLAZITA INSTITUTE831 ISLETA BLVD SW ALBUQUERQUE,NM 87105	26- 2486467		14,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RURAL CHINA EDUCATION FOUNDATIONPO BOX 92424 ROCHESTER, NY 14692	20- 2753350		13,000				PRIMARY GRANT
TINY TOONES5585 E PACIFIC COAST HIGHWAY 229 LONG BEACH, CA 90804			13,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERSTAGES INC 7720 ALASKA AVENUE NW WASHINGTON, DC 20012	76- 0787343		11,000				PRIMARY GRANT
HOMELESS CHILDREN'S PLAYTIME PROJECT 1525 NEWTON STREET NW WASHINGTON, DC	20- 3380456		10,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONE COMMON UNITY1525 NEWTON STREET NW WASHINGTON, DC 20010	52- 2270569		10,000				PRIMARY GRANT
SHINING HOPE FOR COMMUNITIES14 RED GLEN RD MIDDLETOWN,CT 06457			10,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KAKENYA CENTER FOR EXCELLENCE 2100 PENNSYLVANIA AVE NW SUITE 525 WASHINGTON DC, DC 20037	26- 3658409		9,000				PRIMARY GRANT
MARIPOSA DR FOUNDATION309 THIRD STREET ITHACA.NY 14850	27- 0726866		8,000				PRIMARY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERACTION1400 16TH STREET NW SUITE 210 WASHINGTON, DC 20036			7,254				AFFINITY GRANT
HESHIMA KENYAPO BOX 408077 CHICAGO,IL 60640			5,000				OPPORTUNITY GRANT

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DLN: 93493112004293

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization **Employer identification number** GLOBAL FUND FOR CHILDREN 56-1834887 **Questions Regarding Compensation** Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g, maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract $\overline{\mathbf{v}}$ Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Nο 4h Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo **4**c Participate in, or receive payment from, an equity-based compensation arrangement? Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo

section 53 4958-6(c)?

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

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

(1) MAYA AJMERA (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							•	
(i) Base compensation Compensation Compensation Form 990 or Form 990 or Form 990-EZ (1) MAYA AJMERA (i)	(A) Name	_	(B) Breakdown of					
(1) MATA ASMERA (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			(i) Base compensation	incentive	reportable	penefits	(R)(I)-(D)	Form 990 or
(1) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(1) MAYA AJMERA	(I) (II)	171,346 0			7,349 0		0 0
	(2) KRISTIN LINDSEY	(I) (II)	157,482 0		0	6,698 0	173,680 0	0 0
	(3) VICTORIA DUNNING	(I) (II)	148,780 0		l l	7,352 0	165,902	0

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

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SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization GLOBAL FUND FOR CHILDREN

Employer identification number

					56-1834887			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of do contribution	etermı	_	
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	1	15,030	FAIR MARKET VAL	UE		
10	Securities—Closely held stock $\ .$							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
	O ther ▶()							
	O ther ▶()							
	Other ► ()				I			
29	Number of Forms 8283 received for which the organization compl				29			
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	eriod?			30a		No
b	If "Yes," describe the arrangeme	ent in Part I	I					
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	······ =, ==··=	WELLS FARGO IS AUTHORIZED TO FACILITATE THE RECEIVING AND SELLING OF ANY DONATED STOCK

Schedule M (Form 990) 2011

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2011

Open to Public Inspection

Name of the organization GLOBAL FUND FOR CHILDREN

Employer identification number

56-1834887

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE RETURN IS PROVIDED TO THE ENTIRE BOARD PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	ALL NEW BOARD MEMBERS AND EMPLOYEES ARE GIVEN THE ORGANIZATION'S CONFLICT OF INTEREST DISCLOSURE POLICY AND ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST DISCLOSURE STATEMENT IF A CONFLICT ARISES, THE CEO IS ENGAGED TO DETERMINE IF THERE IS A CONFLICT OF INTEREST IF IT IS DETERMINED THAT THERE IS A CONFLICT OF INTEREST, THE PRESIDENT WILL PRESENT THE MATTER TO THE CHAIR OF THE BOARD OF DIRECTORS FOR A FINAL DETERMINATION THE CONFLICTED PARTY IS EXPECTED TO BE INVOLVED IN THE DISCUSSION
	FORM 990, PART VI, SECTION B, LINE 15	THE GLOBAL FUND FOR CHILDREN HAS A SUBSET OF THE BOARD THAT REVIEWS THE SALARY OF THE EXECUTIVE DIRECTOR ON AN ANNUAL BASIS FACTORS THAT INFLUENCE THEIR DECISION INCLUDE. 1) COMPARISON TO PEER ORGANIZATIONS, 2) THE ORGANIZATION'S OVERALL PERFORMANCE DURING THE PRECEDING FISCAL YEAR, AND 3) ANY ADDITIONAL RELEVANT ITEMS THE FINANCE AND AUDIT COMMITTEE OF THE BOARD REVIEWS AND AUTHORIZES PROPOSED COMPENSATION INCREASES FOR OFFICERS(VPS) OF GLOBAL FUND FOR CHILDREN
	FORM 990, PART VI, SECTION C, LINE 19	FINANCIAL STATEMENTS ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -52,628

SCHEDULE R Related Or.

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

DLN: 93493112004293

Related Organizations and Unrelated Partnerships

► See separate instructions.

Cat No 50135Y

2011

OMB No 1545-0047

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Schedule R (Form 990) 2011

Department of the Treasury Internal Revenue Service

(Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

Employer identification number Name of the organization GLOBAL FUND FOR CHILDREN 56-1834887 Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) (a) (b) (c) (d) (e) Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Primary activity Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (d) (c) Section 512(b)(13) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity controlled (if section 501(c)(3)) or foreign country) entity organization Yes No (1) THE GLOBAL FUND FOR CHILDREN UK TRUST CO MOUNT KELLETT CAPITAL TO IMPROVE THE LIVES OF BERGER HOUSE 36-38 BERKELEY SQUARE VULNERABLE CHILDREN UK N/A No AND YOUTH IN OUR LONDON W1J5AE UK WORLD

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No	
												i

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

che	edule R (Form 990) 2011		Рa	age 3
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 3	36.)		
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gıft, grant, or capıtal contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Sale of assets to related organization(s)	1f		No
g	Purchase of assets from related organization(s)	1 g		No
h	Exchange of assets with related organization(s)	1h		No
i	Lease of facilities, equipment, or other assets to related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets from related organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations by related organization(s)	11		No
m	n Sharıng of facılıtıes, equipment, mailing lists, or other assets with related organization(s)	1m		No
n	Sharing of paid employees with related organization(s)	1n		No
0	Reimbursement paid to related organization(s) for expenses	10		No
p	Reimbursement paid by related organization(s) for expenses	1р	Yes	
q	O ther transfer of cash or property to related organization(s)	1q		No
r	O ther transfer of cash or property from related organization(s)	1r	Yes	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thres	holds		

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) THE GLOBAL FUND FOR CHILDREN UK TRUST CO MOUNT KELLETT CAPITAL	R	553,228	
(2)			
(3)			
(4) 			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloc		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

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Schedule R (Form 990) 2011