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## Form **990-PF**

# EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury  Department of the Treasury						
Internal Revenue Service  Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a> .  Open to Public Inspection						
_		dar year 2016 or tax year beginning		, and ending	IA 5 1 11 11 11 11	
Nar	ne of	foundation			A Employer identification	number
_					45 070054	
		BAL G.L.O.W.		<del></del>	45-2738854	
		nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
_2	<u> 32:</u>	LE. 4TH STREET NO. C61	6		949-306-34	0
City	or to	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is per	nding, check here
_ <u>S</u>	<u>AN'</u>	ra ana, ca 92705				
G C	heck	all that apply: Initial return	X Initial return of a fo	ormer public charity	D 1. Foreign organizations,	check here
		Final return	Amended return	`		
		Address change	Name change		Foreign organizations mee check here and attach con	nputation
H C	heck	type of organization: X Section 501(c)(3) e	xempt private foundation		E If private foundation state	us was terminated
	Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1)(	
I Fa	ır ma	rket value of all assets at end of year   J Account	ıng method: X Cash	Accrual	F If the foundation is in a 6	0-month termination
(fr	om F	Part II, col (c), line 16)	ther (specify)		under section 507(b)(1)(	
	\$	2,919,986. (Part I, coll	ımn (d) must be on cash b	oasis)		
Pa	irt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	5,294,984.			3
	2	Check if the foundation is not required to attach Sch. B		-	± 1	
	3	Interest on savings and temporary cash investments				,-
	4	Dividends and interest from securities				- [. 41]
	58	Gross rents				,
		Net rental income or (loss)		4.		
	_	Net gain or (loss) from sale of assets not on line 10				
ě	, ou	Gross sales price for all				
Revenue	7	assets on line 6a  Capital gain net income (from Part IV, line 2)		0.		
a	8	Net short-term capital gain		<del></del>		
	9	Income modifications		1 1 1		
		Gross sales less returns and allowances	19 3	<del></del>		<del></del>
		Less Cost of goods sold	<del>                                     </del>		<u> </u>	
		Gross profit or (loss)	<del> </del>	<del> </del>	<del>  `                                   </del>	<del></del>
	11	Other income	<del> </del>		<del> </del>	<del></del>
	12	Total. Add lines 1 through 11	5,294,984.	0.	0.	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.1	0.
			618,544.	0.	0.1	618,544.
	14	Other employee salaries and wages  Pension plans, employee benefits	30,648.	0.	0.1	30,648.
ဟ	15	Pension plans, employee benefits ()	224,216.	0.	0.1	224,216.
Se	16a	Legal-fees Accounting rees 1 2018 TMT 2	56,788.	0.	0.	56,788.
ē	0	Other professional fees STMT 3	134,053.	0.	0.	134,053.
ŭ	] _ C	au m	134,033.	<del> </del>	<del> </del>	134,033.
Administrative Expense	17		52,931.	0.	0.	52,931.
фа	18		6,970.	0.	0.1	. 34,331.
is	19	Depreciation and depletion	83,532.	0.	0.	83,532.
Ē	20	Occupancy	217,565.	0.	0.	217,565.
	ı	Travel, conferences, and meetings	417,303.	<del> </del>		411,303.
and	22	Printing and publications	ANE COA		<del></del>	105 604
	23	Other expenses STMT 5	405,684.	0.	0.	405,684.
Operatina	24	Total operating and administrative	1 020 021	_	]	1 000 001
a De		expenses. Add lines 13 through 23	1,830,931.	0.	0.	1,823,961.
J	25	Contributions, gifts, grants paid	643,925.	<u> </u>	<del> </del>	643,925.
	26	Total expenses and disbursements.	0 474 056	_	1	2 469 226
	<u> </u>	Add lines 24 and 25	2,474,856.	0.	0.	2,467,886.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	2,820,128.	<del> </del>	<b> </b>	
	b	Net investment income (if negative, enter -0-)		0.	<del> </del>	
	l c	Adjusted net income (if negative, enter -0-)	1	I	0.1	}

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Fo	rm 99	-PF (2016) GLOBAL G.L.O.W. 45-2738854				
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year		
	<del></del>		(a) Book Value	(b) Book Value (c) Fair Market Valu		
	1	Cash - non-interest-bearing	22,081.	2,839,381.	2,839,381.	
		Savings and temporary cash investments	<del></del>	<del></del>	<del></del>	
	3	Accounts receivable				
	١.	Less: allowance for doubtful accounts	<del></del>	<del></del>	<del></del>	
	4	Pledges receivable ►				
	_	Grants receivable				
	1	Receivables due from officers, directors, trustees, and other	<del></del>		<del></del>	
	ľ	disqualified persons				
	,	Other notes and loans receivable		<del></del>	<del></del>	
	<b>'</b> '	Less; allowance for doubtful accounts		~~· · · · · · · · · · · · · · · · · · ·		
"	l a	Inventories for sale or use	<del></del>			
Assets	9	Prepaid expenses and deferred charges		<del></del>		
As	10a	Investments - U.S. and state government obligations	<del></del>			
	1	Investments - corporate stock				
		Investments - corporate bonds				
	1	Investments - land, buildings, and equipment basis	, t			
	1	Less accumulated depreciation 12,614.	58,611.	73,680.	73,680.	
	12	Investments - mortgage loans			<del></del>	
	13	Investments - other				
	14	Land, buildings, and equipment basis			7	
	ļ	Less accumulated depreciation				
	15	Other assets (describe ► STATEMENT 6)	9,664.	6,925.	6,925.	
	16	Total assets (to be completed by all filers - see the		ļ		
	<u> </u>	instructions. Also, see page 1, item I)	90,356.	2,919,986.	2,919,986.	
	17	Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	<del></del>			
iab g	21	Mortgages and other notes payable		11 000		
_	22	Other liabilities (describe STATEMENT 7)	4,535.	14,037.		
			4 525	14 027	-	
_	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117 check here	4,535.	14,037.	-	
		Touristations that follow of No 117, shook note				
Ś		and complete lines 24 through 26 and lines 30 and 31.	85,821.	905,949.	= , =	
nce		Unrestricted	03,041.	2,000,000.	ş -	
ala	25 26	Temporarily restricted Permanently restricted	<del></del>	2,000,000.		
or Fund Balance	20	Foundations that do not follow SFAS 117, check here		<del></del>	4 4	
뎚		and complete lines 27 through 31.		]		
	27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<del></del>		,	
Ass	29	Retained earnings, accumulated income, endowment, or other funds				
Net	30	Total net assets or fund balances	85,821.	2,905,949.	į	
~	1				-	
	31	Total liabilities and net assets/fund balances	90,356.	2,919,986.		
P	art	Analysis of Changes in Net Assets or Fund Ba			<del></del>	
=	=			<del></del>		
		net assets or fund balances at beginning of year - Part II, column (a), line 3	SU	1.1	0E 001	
	•	t agree with end-of-year figure reported on prior year's return)			85,821.	
		amount from Part I, line 27a increases not included in line 2 (itemize)		2	2,820,128.	
		increases not included in line 2 (nemize)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u>0.</u> 2,905,949.	
		eases not included in line 2 (itemize)		4 5	2,303,349.	
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30		2,905,949.	
<u> </u>	. <u> </u>	The state of the state of your time thinks into of the into our	1013 1110 00		Enrm 990-PF (2016)	

Form 990-PF (2016) GLOBAL G.L.O.W.	4	5-27	73885 <u>4</u>	F	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 494	8 - se	e instruc	tions	\$)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	)				
Date of ruling or determination letter: (attach copy of letter if necessary-see instruction	ns)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	· } [	1			0.
of Part I, line 27b	[		4		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col.	(b).	[_			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	· ·	2			0.
3 Add lines 1 and 2		3			O.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	Γ	4	·		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	Ţ	5			0.
6 Credits/Payments:	[				
a 2016 estimated tax payments and 2015 overpayment credited to 2016	Į	- 1			
b Exempt foreign organizations - tax withheld at source 6b			- 1		
c Tax paid with application for extension of time to file (Form 8868)			-		
d Backup withholding erroneously withheld 6d 6d				1.	
7 Total credits and payments. Add lines 6a through 6d		7	····		0.
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	F	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	►F	9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10			
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded >	11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it particip	ate or intervene in			Yes	No
any political campaign?			1a		$\overline{\mathbf{x}}$
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for	or the definition)?		1b		$\overline{\mathbf{x}}$
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any ma	terials published	f or			
distributed by the foundation in connection with the activities.			1 - 1	i	1.0
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			7-2		- * · ·
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	0.				-
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fo	undation		= "-		:4
managers. ► \$ 0.					- 1
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
If "Yes," attach a detailed description of the activities					-
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of i	ncorporation, or			_ <u>-</u> * ]	· ' {
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	45		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1 1	ł	
By language in the governing instrument, or					Ì
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict</li> </ul>	t with the state la	w			[
remain in the governing instrument?			6	Х	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c)	, and Part XV		7	Х	
					1
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			_	ſ	1
CA,NM			_	- [	1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or des	ignate)		[]		
of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494	2(j)(5) for calenda	ar			
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		`	9	X	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and a	ddresses		10		<u>X</u> _
			Form <b>990</b>	-PF (2	2016)

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Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

N/A

3b

4a

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Form 990-PF (2016) GLOBAL G.L.O.W.		·	45-27388	<b>54</b> Pa	age <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		į
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire				į
any voter registration drive?		Y	es X No	1 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Y	es X No	} }	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		ļ	.	ļ
4945(d)(4)(A)? (see instructions)		XY	es 🔲 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	]		1
the prevention of cruelty to children or animals?		Y	es X No	٠  .	
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	[	5b	X
Organizations relying on a current notice regarding disaster assistance check hi	· ·		▶┌┐┌		$\neg$
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ıned		1 1	1
expenditure responsibility for the grant?			es 🔲 No		]
If "Yes," attach the statement required by Regulations section 53 4945	-5(d)			1 . [	l
6a Did the foundation, during the year, receive any funds, directly or indirectly, to provide the foundation of the year.	• •			1 1	-
a personal benefit contract?	ouy promisino on		es X No	1 1	-,
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?	L		6b	X
	orsonal benefit contract.		-	<del>~</del>	<del></del> _
If "Yes" to 6b, file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?	v	es X No		-
b If "Yes," did the foundation receive any proceeds or have any net income attribu		١٠ اـــــا ١٠		7b	لــــــــــــــــــــــــــــــــــــــ
Part.VIII Information About Officers, Directors, Truste		nagers Highly	II/A	70	
Paid Employees, and Contractors	es, i ouiluation iviai	nagers, riiginiy			
1 List all officers, directors, trustees, foundation managers and their of	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expen	
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	(e) Expen	ther
	to position	enter -0-)	compensation	allowanc	<del></del>
SEE STATEMENT 8		0.	0.		^
SEE STATEMENT 0	<del></del>	· · ·	<u> </u>	<u> </u>	<u>o.</u>
	<del></del>	<del> </del>	L		
				١	
				<u> </u> 	
		<b></b>			
	<u></u>		L		
2 Compensation of five highest-paid employees (other than those incl	<del></del>	enter "NONE."	(d) Contributions to	7.2	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expen account, ot	
	devoted to position	(c) component	compensation	allowance	
JENNIFER L. ESTRADA - 2321 E. 4TH					
STREET NO. C616, SANTA ANA, CA 92705	40.00	71,035.	3,600.		0.
JENNY FAIRCHILD - 2321 E. 4TH STREET					
NO. C616, SANTA ANA, CA 92705	40.00	66,243.	3,600.		0.
SUE A. CRONMILLER - 2321 E. 4TH					_
STREET NO. C616, SANTA ANA, CA 92705	40.00	57,783.	3,600.	(	0.
TONANTZIN HYNES - 2321 E. 4TH STREET					_
NO. C616, SANTA ANA, CA 92705	40.00	54,600.	3,600.	(	0.
ANGELA M. APODACA - 2321 E. 4TH					_
STREET NO. C616, SANTA ANA, CA 92705	40.00	54,176.	3,600.	(	0.
Total number of other employees paid over \$50,000		<del></del>	▶		0
			Form	990-PF (20	
				,,	- /

Form **990-PF** (2016)

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, s	see instructions )
1	.Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	185,620.
C	Fair market value of all other assets	10	6,925.
đ	Total (add lines 1a, b, and c)	10	192,545.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	192,545.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,888.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	189,657.
6	Minimum investment return. Enter 5% of line 5	6	9,483.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
_	foreign organizations check here 🕨 🗓 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5	]	
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
F	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	_1a	2,467,886.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а		3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,467,886.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 1	_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,467,886.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for t	the section
_	4940(e) reduction of tax in those years.		
			Form <b>990-PF</b> (2016

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
A D I I I I I I I I I I I I I I I I I I	Corpus	reals prior to 2010	2013	2010
1 Distributable amount for 2016 from Part XI, line 7	-			
2 Undistributed income, if any, as of the end of 2016		<del></del>		
a Enter amount for 2015 only		-		
<b>b</b> Total for prior years:				
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
<b>b</b> From 2012				
c From 2013	,			,
d From 2014		•		,
e From 2015		,	-	
f Total of lines 3a through e			<u> </u>	
4 Qualifying distributions for 2016 from	-	-	,	
Part XII, line 4: ► \$		· -		,
a Applied to 2015, but not more than line 2a	, , , , , , , , , , , , , , , , , , , ,		<b> </b>	· · · · · · · · · · · · · · · · · · ·
<b>b</b> Applied to undistributed income of prior	,	1		
years (Election required - see instructions)	A Land Company		<u> </u>	
c Treated as distributions out of corpus		•		
(Election required - see instructions)		·		<u> </u>
d Applied to 2016 distributable amount				<del> </del>
e Remaining amount distributed out of corpus		<u></u>	2 * -	- 1
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount		<u> </u>		<b> </b>
must be shown in column (a))				
6 Enter the net total of each column as	* <b>4.</b>	-		'
indicated below:	<u> </u>	,	- '	1 . 4
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		<del></del>	<del> </del>	
<b>b</b> Prior years' undistributed income. Subtract			_	
line 4b from line 2b	<del></del>	<del> </del>		
c Enter the amount of prior years' undistributed income for which a notice of	•		•	
deficiency has been issued, or on which			-	· ,
the section 4942(a) tax has been previously			ļ '	), `
assessed	<del></del>	<u>-</u>	<del> </del>	<del></del>
d Subtract line 6c from line 6b. Taxable	, -		ļ	
amount - see instructions e Undistributed income for 2015. Subtract line			<u> </u>	
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2016. Subtract	,		<del> </del>	<del></del>
lines 4d and 5 from line 1. This amount must				
be distributed in 2017			į.	
7 Amounts treated as distributions out of	<del></del>			
corpus to satisfy requirements imposed by		ļ		
section 170(b)(1)(F) or 4942(g)(3) (Election		[		,
may be required - see instructions)		l		{
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:	-			
a Excess from 2012		İ	1 ,	
<b>b</b> Excess from 2013	]	1	1	
c Excess from 2014	]			
d Excess from 2015	,	,	]	
e Excess from 2016	<u> </u>	l	<u> </u>	
623581 11-23-16		_		Form <b>990-PF</b> (2016)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		Payment	<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ART OF A CHILD		NC	TO EDUCATE	
KAYUNGA ROAD			DISADVANTAGED GIRLS	
MUYENGA-KAMPALA, UGANDA	<u></u>			7,20
ASCHIANA ARMAN		NC	TO EDUCATE	
1TH MIKRORIAN ROAD	_		DISADVANTAGED GIRLS	
KABUL, AFGHANISTAN		ļ		16,50
		<u> </u>		
BATA FOUNDATION		NC	TO EDUCATE	
MARIKINA DULI IDDINES			DISADVANTAGED GIRLS	2 52
MARIKINA, PHILIPPINES	<del>-   </del>	<del> </del>	<del> </del>	2,500
		}	1	
		1		
CEINODE, GHANA		NC	TO EDUCATE	
OFFICE NO. 2 GRACELAND'S BUILDING		1	DISADVANTAGED GIRLS	
MPEASEM-EAST LEGON ACCRA, GHANA	<u> </u>			6,000
CHILD WELFARE SOCIETY		NC	TO EDUCATE	
140 CIRCULAR ROAD			DISADVANTAGED GIRLS	
FREETOWN, SIERRA LEONE	<u> </u>	L	L	<u> </u>
<del></del>	NTINUATION SHEE	T(S)	▶ 3a	643,925
Approved for future payment				
NONE		1		
110212				
		[		
		}		
		1		
		1		
				<del></del>
		{		
		[		
Total		L	▶ 3b	0
<del></del>			Fn	rm <b>990-PF</b> (201

15091113 146892 625531

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	5577.55107	<del></del>
			}	
FONDATION TOYA		NC	TO EDUCATE	
BOURDON		Ì	DISADVANTAGED GIRLS	
PORT-AU-PRINCE, HAITI		<del> </del>	<del> </del>	17,000
		1		
FRIENDS OF THAI DAUGHTERS		₽C	TO EDUCATE	
PO BOX 370		}	DISADVANTAGED GIRLS	
TREVETT, ME 4571	<del></del>	<del> </del> -	+	3,000
GOLDEN GIRLS FOUNDATION		NC	TO EDUCATE	
MASOGO CENTER			DISADVANTAGED GIRLS	
KISUMU, KENYA	<del></del>	<del> </del>	+	8,007
KENYA EDUCATION FUND		NC	TO EDUCATE	-
NGONG RD. NAIROBI, KENYA			DISADVANTAGED GIRLS	10,000
, 12/11		<del>†</del>	<del> </del>	10,000
LEAGUE OF YOUNG FEMALE LEADERS		NC	mo Pridame	
TAMALE		NC	TO EDUCATE DISADVANTAGED GIRLS	
TAMALE, GHANA			JISAN WALLES	6,000
				<del></del>
LITWORLD		PC	HERSTORY CAMPAIGN TO	
222 BROADWAY 19TH FLOOR	,		EDUCATE DISADVANTAGED	
NEW YORK, NY 10038	<del></del>	ļ	GIRLS	383,975
NEWARK GALS		PC	TO EDUCATE	
PO BOX 1721			DISADVANTAGED GIRLS	
NEWARK, NJ 7102	<del></del>	<del> </del>	<del> </del>	3,645
	,			
NIGERIA READS		NG	TO EDUCATE	
ABUJA ABUJA, NIGERIA			DISADVANTAGED GIRLS	10 000
ABOUR, NIGERIA	<del></del>	<del> </del>	<del> </del>	10,000
DIEM WALLEY DEADING AGGGGTTATON			TO DOVIGORD	
RIFT VALLEY READING ASSOCIATION PO BOX 536	1	NC	TO EDUCATE DISADVANTAGED GIRLS	
NJORO, KENYA			PIDANAWINGED GIKES	12,000
		<del> </del>	<del>                                     </del>	
SAVE THE ENVIRONMENT OF NEPAL		NC	TO EDUCATE	
CHANDRANIGAHAPUR-1	1	["-	DISADVANTAGED GIRLS	
RAUTAHAT, NEPAL	1	<u> </u>		12,305.
Total from continuation sheets				541,695.

PartXV Supplementary Information				
3 Grants and Contributions Paid During the Ye			<b>~</b>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
SEEDS OF HOPE FOUNDATION		NC	TO EDUCATE	ļ
P-692, ST. #5 WARIS PURA, FAISALABAD	1	ł	DISADVANTAGED GIRLS	
PUNJAB, PAKISTAN 38000	<del> </del>	<del> </del>	<del> </del>	8,000.
SPRINGBOARD TO OPPORTUNITIES		PC PC	TO EDUCATE	
3000 OLD CANTON RD SUITE 470		İ	DISADVANTAGED GIRLS	
JACKSON, MS 39216		<del> </del>	<del> </del>	13,563.
THE CO-OPERATIVE (MILELE)		NC	TO EDUCATE	
KISUMU		İ	DISADVANTAGED GIRLS	1
KISUMU, KENYA		<del> </del>	<del></del>	16,200.
NEWI		NC	TO EDUCATE	
NAIROBI WENTA		ļ	DISADVANTAGED GIRLS	45 000
NAIROBI, KENYA		<del> </del>	<del> </del>	15,000.
ME TONE BENOTING				
WE LOVE READING 55 ABDEL HAMEED BADEES SHEMSANI		NC	TO EDUCATE DISADVANTAGED GIRLS	
AMMAN, JORDAN			DISADVANTAGED GIRLS	8,000.
-,		<del> </del>		
WORLD VISION		NC	TO EDUCATE	
PO BOX 212			DISADVANTAGED GIRLS	
MANKON BAMENDA, CAMEROON		<u></u>		4,000.
ORANGE COUNTY UNITED WAY		PC	TO EDUCATE	
18012 MITCHELL SOUTH			DISADVANTAGED GIRLS	
IRVINE, CA 92614		<del> </del>	<del> </del>	11,000.
		1		
		}		
				<del></del>
		-		- <del></del>
•		1		
		<del> </del>	<del> </del>	
•	<u> </u>	<u> </u>	L	
Total from continuation sheets	<del></del>			

## Part XVI A Analysis of Income-Producing Activities

Patronia de la companya della companya della companya de la companya de la companya della compan	Unrelat	ed business income	Excl	uded by section 512, 513, or 514	<del>r - , ,</del>
Enter gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	<del> </del>	COGG	741104111	Tanolion moonie
b	-	<del> </del>	<u> </u>	<del></del>	<del> </del>
c					<del> </del>
d		1.			
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments	L	<u> </u>	L		
3 Interest on savings and temporary cash		(	l	l	[
investments		<del> </del>	<u> </u>	ļ	<del> </del>
4 Dividends and interest from securities			4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
5 Net rental income or (loss) from real estate:	7: 0 3: 0		25		
a Debt-financed property	<del> </del>	<del> </del>	<b>-</b>	<del></del>	<del> </del>
<ul><li>b Not debt-financed property</li><li>6 Net rental income or (loss) from personal</li></ul>	\ <del></del>	<del>                                     </del>	├	<del></del>	<del> </del>
, , ,	1		1	1	
roperty 7 Other investment income	}	<del> </del>		<del></del>	<del> </del>
8 Gain or (loss) from sales of assets other		<del> </del>			<del> </del>
than inventory	1	1	]		
9 Net income or (loss) from special events					<del>                                     </del>
10 Gross profit or (loss) from sales of inventory		L			
11 Other revenue:					
a	_	<u> </u>			
b	_	ļ		<u> </u>	
c	_		<u> </u>		
d	_	<u> </u>	ļ	 	<u></u> _
e	THE PARTY WATER WE SHARE THE		9c7+30-2003	ļ	<u>-</u> -
12 Subtotal. Add columns (b), (d), and (e)		<u> </u>		0.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13 _	0.
(See worksheet in line 13 instructions to verify calculations.)		maliabases of Eve		Dumaina	<del></del>
Part XVI-B Relationship of Activities	to the Acct	mplishment of Exe	•mpt	Purposes	
Line No. Explain below how each activity for which in			contrib	outed importantly to the accord	iplishment of
the foundation's exempt purposes (other that	an by providing fu	nds for such purposes).			
				<del></del>	<del></del>
<del></del>		<del></del>		<del></del>	<del></del>
<del></del>		<del></del>		<del></del>	
- <del></del>	<del></del>	<del></del>			<del></del>
- <del> </del>				····	
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	· · · · · · · · · · · · · · · · · · ·				
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		<del></del>		· <del> · · · · · · · · · · · · · · · · ·</del>	
	<del></del>			<del>,</del>	
	<del></del>			<del></del>	Form 990-PF (2016)
323621 11,23,16					Form 33U=FC (2016)

Form 990-PF (2016)

Phone no. 858-627-1400

SAN DIEGO, CA 92121

#### Schedule B

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

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2016

Employer identification number Name of the organization GLOBAL G.L.O.W. 45-2738854 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990. Part VIII, line 1h. or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

45-2738854

Pentl	Contributors (See instructions) Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KYLIE SCHUYLER AND DOUGLAS HODGE  157 EMERALD BAY  LAGUNA BEACH, CA 92651	\$5,250,400.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	UNITED WAY  701 N FAIRFAX STREET  ALEXANDRIA, VA 22314	\$6,500.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	THIRD MONDAY FOUNDATION  1 MEMORIAL AVE  PAWLING, NY 12564	\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	HRH FOUNDATION  936 OLIVE STREET  MENLO PARK, CA 94025	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Poncash Complete Part II for noncash contributions.)

Employer identification number

GLOBAL G.L.O.W.

45-2738854

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if a	idditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) . Date received
623453 10-18-1		\$Schedule B (Form 9	90. 990-EZ. or 990-PF) (2016)

FORM 990-PF	LEGAL	FEES	S'.	PATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
LEGAL FEES	224,216.	0.	0.	224,216
TO FM 990-PF, PG 1, LN 16A =	224,216.	0.	0.	224,216
FORM 990-PF	ACCOUNTI	NG FEES	gr	FATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTING AUDIT REVIEW	8,361. 13,000. 10,000. 18,427.	0. 0. 0.	0. 0. 0.	8,361. 13,000. 10,000. 18,427.
BOOKKEEPING COMPLIANCE	7,000.	0.	0.	7,000.
	7,000.	0.	0.	56,788.
COMPLIANCE TO FORM 990-PF, PG 1, LN 16B		0.	0.	
COMPLIANCE TO FORM 990-PF, PG 1, LN 16B	56,788.	0.	0.	56,788.
COMPLIANCE TO FORM 990-PF, PG 1, LN 16B FORM 990-PF	56,788.  OTHER PROFES  (A)  EXPENSES	0. SIONAL FEES  (B) NET INVEST-	O. (C) ADJUSTED	56,788.  FATEMENT 3  (D)  CHARITABLE
COMPLIANCE TO FORM 990-PF, PG 1, LN 16B  FORM 990-PF  DESCRIPTION	56,788.  OTHER PROFES  (A)  EXPENSES PER BOOKS	0. SIONAL FEES  (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	56,788.  FATEMENT 3  (D)  CHARITABLE PURPOSES
COMPLIANCE TO FORM 990-PF, PG 1, LN 16B  FORM 990-PF  DESCRIPTION  OUTSIDE SERVICES	56,788.  OTHER PROFES  (A)  EXPENSES PER BOOKS  134,053.	O. SIONAL FEES  (B) NET INVEST- MENT INCOME  0.	(C) ADJUSTED NET INCOME  0.	56,788.  TATEMENT 3  (D)  CHARITABLE PURPOSES  134,053.
TO FORM 990-PF, PG 1, LN 16B  FORM 990-PF  DESCRIPTION  OUTSIDE SERVICES  TO FORM 990-PF, PG 1, LN 16C	56,788.  OTHER PROFES  (A) EXPENSES PER BOOKS  134,053.  134,053.	O. SIONAL FEES  (B) NET INVEST- MENT INCOME  0.	(C) ADJUSTED NET INCOME  0.	56,788.  TATEMENT 3  (D) CHARITABLE PURPOSES  134,053.  134,053.
TO FORM 990-PF, PG 1, LN 16B  FORM 990-PF  DESCRIPTION  OUTSIDE SERVICES  TO FORM 990-PF, PG 1, LN 16C  FORM 990-PF	TAX	O. SIONAL FEES  (B) NET INVEST- MENT INCOME  0.  0.  (B) NET INVEST-	O.  (C) ADJUSTED NET INCOME  0.  (C) ADJUSTED	TATEMENT 3  (D) CHARITABLE PURPOSES  134,053.  134,053.  TATEMENT 4  (D) CHARITABLE

Global G.L.O.W. FEIN: 45-2738854 2016 Form 990-PF

Part IX-A: Summary of Direct Charitable Activities

#### About Global G.L.O.W

Global G.L.O.W. is a 501(c)(3) non-profit organization whose mission is to ignite the power of women and girls as a force for global transformation. G.L.O.W. stands for Girls Leading Our World and we are an incubator and accelerator of innovative ideas that ignite the power of women and girls. We serve women and girls who need us the most from vulnerable communities in the United States and abroad. Our selection criteria for programming is based on school district data in the U.S. and the multidimensional poverty index abroad. Global G.L.O.W. launched its largest initiative, the HerStory Campaign, in 2014. All of our current programming for girls, in Southern California, across the US and around the world, falls within the HerStory campaign. Other projects are under consideration include: financial literacy and healthcare advocacy for women and girls, and STEM-related initiatives.

#### About Global G.L.O.W.'s HerStory Campaign

Global G.L.O.W. launched the HerStory Campaign in 2014. It was developed by our Founder, who holds a doctorate in clinical psychology. Global G.L.O.W.'s HerStory Campaign sparks the potential of over 5,000 girls annually in 27 countries worldwide, via weekly programming, local and global summits and through advocacy. We run HerStory programming in conjunction with a vast network of grassroots organizations to assure that our program is customized to meet the needs of each community. Partners include Litworld and 60 other local, community-based organizations who are vetted and closely evaluated prior to joining the campaign.

### HerStory Programs Include:

- Local and International Out-of-School Programs: We combine mentoring, transformational literacy and art as tools for girls' empowerment in our innovative out-ofschool programs
  - Programs are delivered through an evidence-based, proprietary curriculum for girls based on social emotional literacy, mentorship and literacy.
  - We provide a complete pathway for adolescent girls with three different curricula for different age groups: HerStory LitClub, HerStory GLOW Club, HerStory Teen Club.
  - We provide a proprietary training program for women to serve as mentors who deliver our curricula to girls. This includes leadership training and professional development.

Global G.L.O.W. FEIN: 45-2738854 2016 Form 990-PF

Part IX-A: Summary of Direct Charitable Activities (cont.)

- 2. Local, Regional and Global Summits: We convene girls to cultivate connections, learn from one another and build girls' leadership to drive community-based action.
  - We host local, regional and global summits to bring girls together to achieve our outcomes. The summits focus on:
    - Literacy (Story Summits)
    - o Community Action (Global HerStory Summit)
    - o Future Planning and College Readiness
    - o 21st Century Skills and Knowledge
- 3. Girl-Driven Advocacy: We amplify girls' voices to advocate for the resources, policies and change needed so they can grow up strong.
  - We create content to amplify girls' voices, tell their stories and educate the community about the needs of girls. We use this content to advocate for the resources needed to strengthen girls.

Our programs build girls' social-emotional and self-expression skills. Social-emotional skills help girls learn effectively, work well with others and solve problems. These skills support academic learning and success in adult life, and alongside strong self-expression skills, help girls build strong voices.

With these skills in hand, girls grow into young women who become economically independent, are equipped to pursue a secure and fulfilling future and actively engage in improving their communities and feel they have the power to make positive change.

Substantiation of Expenditure Responsibility:

Recipient:

Art of A Child

Address

Kayunga Road Muyenga-Kampala

Uganda

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other than its intended

Diversion of funds:

purpose.

Date of reports from

recipient:

First report due October 31, 2017

The Foundation has no reason to doubt the accuracy or

Verification of reports:

reliability of the grantee's reports

Payment List

Payment List

Date Paid

Amount

Payment Method

Purpose

4/11/2016

\$ 7,200.00

Wire of Cash

HerStory 2016 2nd Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

**ASCHIANA** 

Address:

1th Mikrorian Road Kabul, Afghanistan

Amounts expended

by recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

than its intended purpose.

Date of reports

from recipient:

First report due October 31, 2017

Verification of reports: The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Paid	Amount		Payment Method	Purpose	
1/25/2016	\$	8,250.00	Wire of Cash	HerStory 2016 1st Quarter Program Costs	
4/11/2016	\$	8,250.00	Wire of Cash	HerStory 2016 2nd Quarter Program Costs	

Substantiation of Expenditure Responsibility:

Recipient:

**BATA Foundation** 

Address:

Marikina Philippines

Amounts expended

by recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

Date of reports from

recipient:

First report due October 31, 2017

than its intended purpose.

Verification of reports:

The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Paid	Amount		Payment Method	Purpose	
3/8/2016	\$	1,500.00	Bill Pay	HerStory 2016 2nd Quarter Program Costs	
11/28/2016	Ś	1.000.00	Check 1258	HerStory 2016 4th Quarter Program Costs	

Substantiation of Expenditure Responsibility:

Recipient:

**CEINODE Ghana** 

Address:

Office No. 2 Graceland's Building

Mpeasem-East Legon

Accra, Ghana

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for

Diversion of funds: other than its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

The Foundation has no reason to doubt the accuracy or reliability of the grantee's

Verification of reports:

reports

Payment List Payment List

Date Paid

1/25/2016

**Amount** 

6,000.00

Payment Method

Wire of Cash

Purpose

HerStory 2016 1st Quarter Program Costs

Substantiation of Expenditure Responsibility.

Recipient.

**Child Welfare Society** 

Address.

140 Circular Road Freetown

Sierra Leone

Amounts expended

by recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other than its

Diversion of funds: intended purpose

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports.

The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Paid	Amou	ınt	Payment Method	Purpose
1/25/2016	\$	15,000 00	Wire of Cash	HerStory 2016 1st Quarter Program Costs
1/29/2016	\$	15,000 00	Wire of Cash	HerStory 2016 1st Quarter Program Costs
3/8/2016	\$	15,000.00	Wire of Cash	HerStory 2016 1st Quarter Program Costs
6/9/2016	\$	15,000.00	Wire of Cash	HerStory 2016 2nd Quarter Program Costs
10/11/2016	\$	10,030.00	Wire of Cash	HerStory 2016 4th Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

Foundation Toya/TOYA Foundation

Address:

Bourdon

Port-au-Prince, Haiti

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other than

Diversion of funds:

its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports: The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Payment List

Date Paid Amount Payment Method Purpose

10/11/2016 \$ 17,000.00 Wire of Cash HerStory 2016 Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

Golden Girls Foundation

Address:

Masogo Center

Kısumu, Kenya

Amounts expended by

recipient:

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

Date of reports from

First report due October 31, 2017

than its intended purpose.

Verification of reports: The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Payment List

Date Paid Amount Payment Method Purpose

1/25/2016 \$ 8,007.00 Wire of Cash HerStory 2016 1st Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

Kenya Education Fund

Address:

Ngong Rd.

Nairobi, Kenya

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

than its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports:

The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Payment List

Date Paid

Amount

Payment Method

Purpose

11/28/2016

10,000.00

Check 1265

HerStory 2016 4th Quarter Program Costs

Substantiation of Expenditure Responsibility.

Recipient.

League of Young Female Leaders

Address.

Tamale Ghana

Amounts expended by

recipient.

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other than its

Diversion of funds:

intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports. The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Paid	Amount		Payment Method	Purpose
4/11/201	5 \$	3,000.00	Wire of Cash	HerStory 2016 2nd Quarter Program Costs
7/1/201	5 \$	3,000.00	Wire of Cash	HerStory 2016 3rd Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

Nigeria Reads

Address:

Abuja, Nigeria

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds: than its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports: The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Paid		Am	ount	Payment Method	Purpose
_	1/25/2016	\$	5,000.00	Wire of Cash	HerStory 2016 1st Quarter Program Costs
	5/10/2016	\$	5,000.00	Wire of Cash	HerStory 2016 2nd Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

Rift Valley Reading Association

Address:

PO Box 536 Njoro Kenya

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

than its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports: The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Pai	id	Amount		Payment Method	Purpose
	1/25/2016	\$	6,000.00	Wire of Cash	HerStory 2016 1st Quarter Program Costs
	4/11/2016	\$	6,000.00	Wire of Cash	HerStory 2016 2nd Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

Save the Environment of Nepal (STEN)

Address:

Chandranigahapur-1 Rautahat, Nepal

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

than its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports:

The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Paid	Amount		Payment Method	Purpose
1/25/2016	\$	6,000.00	Wire of Cash	HerStory 2016 1st Quarter Program Costs
5/4/2016	\$	6,305.00	Wire of Cash	HerStory 2016 2nd Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

Seeds of Hope Foundation

Address:

P-692, St. #5

Waris Pura, Faisalabad Punjab 38000, Pakistan

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

been used for other than its intended purpose.

The Foundation has no knowledge that any part of the investment has

Diversion of funds:

Date of reports from

recipient:

First report due October 31, 2017

The Foundation has no reason to doubt the accuracy or reliability of the

Verification of reports:

grantee's reports

**Payment List** 

Payment List

Date Paid Amount Payment Method Purpose

10/11/2016 \$ 8,000.00 Wire of Cash HerStory Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

The Co-Operative/Milel \*"The Co-Operative" = name of bank

Address:

Kisumu Kenya

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

of funds: than its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports:

The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Date Paid	Amount		Payment Method	Purpose
7/11/2016	\$	9,700.00	Wire of Cash	HerStory Program Costs
10/11/2016	\$	6,500.00	Wire of Cash	HerStory Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

The Women's Initiative in Education (NEWI)

Address:

Nairobi Kenya

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds:

than its intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports: The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Payment List

Date Paid Amount Payment Method Purpose

5/4/2016 \$ 15,000.00 Wire of Cash HerStory 2016 2nd Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

We Love Reading

Address:

55 Abdel Hameed Badees Shemsani

Amman, Jordan

Amounts expended by

recipient:

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other

Diversion of funds: than its intended purpose.

Date of reports from

Verification of reports:

recipient:

First report due October 31, 2017

The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Payment List

Date Paid Payment Method Purpose 1/25/2016 8,000.00 Wire of Cash HerStory 2016 1st Quarter Program Costs

Substantiation of Expenditure Responsibility:

Recipient:

World Vision for Education and Development

Address:

PO Box 212

Mankon Bamenda

Cameroon

Amounts expended by

recipient.

Amounts are expended quarterly throughout the year

The Foundation has no knowledge that any part of the investment has been used for other than its

Diversion of funds: intended purpose.

Date of reports from

recipient:

First report due October 31, 2017

Verification of reports: The Foundation has no reason to doubt the accuracy or reliability of the grantee's reports

Payment List

Payment List

Date Paid Amount Payment Method Purpose

9/6/2016 \$ 4,000.00 Wire of Cash HerStory Program Costs

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADVERSTISING	56,111.	0.	0.	56,111.	
PROGRAM SUPPLIES	46,981.	0.	0.	46,981.	
OFFICE EXPENSES	15,357.	0.	0.	15,357.	
SPECIAL EVENTS	20,982.	0.	0.	20,982.	
PAYROLL PROCESSING FEES	4,340.	0.	0.	4,340.	
EDUCATION	1,149.	0.	0.	1,149.	
MAINTENANCE & REPAIRS	9,361.	0.	0.	9,361.	
WEBSITE	3,264.	0.	0.	3,264.	
MEALS	87,055.	0.	0.	87,055.	
MISCELLANEOUS	7,146.	0.	0.	7,146.	
UTILITIES	5,096.	0.	0.	5,096.	
DUES, LICENSES AND FEES	2,515.	0.	0.	2,515.	
INSURANCE	5,117.	0.	0.	5,117.	
HER STORY PROGRAM COSTS	141,210.	0.	0.	141,210.	
TO FORM 990-PF, PG 1, LN 23	405,684.	0.	0.	405,684.	

FORM 990-PF	OTHER ASSETS		STATEMENT 6
DESCRIPTION	BEGINNING OF YR BOOK VALUE		FAIR MARKET VALUE
EMPLOYEE ADVANCE PREPAID DEPOSIT	2,739. 6,925.	0. 6,925.	0. 6,925.
TO FORM 990-PF, PART II, LINE 15	9,664.	6,925.	6,925.
FORM 990-PF OT	HER LIABILITIES		STATEMENT 7
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
PAYROLL LIABILITIES CREDIT CARD PAYABLE LOAN PAYABLE		350. 1,435. 2,750.	296. 13,741. 0.
	NE 22	4,535.	14,037.

	- LIST OF OFFICERS, DIRECTORS ES AND FOUNDATION MANAGERS		STATEMENT 8	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	-	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
KYLIE SCHUYLER 2321 E. 4TH STREET NO. C616 SANTA ANA, CA 92705	PRESIDENT/FOUN 2.00	DER 0.	0.	0.
MARY MOORE HILL 2321 E. 4TH STREET NO. C616 SANTA ANA, CA 92705	SECRETARY 2.00	0.	0.	0.
DEBBI Z. HENSLING 2321 E. 4TH STREET NO. C616 SANTA ANA, CA 92705	TREASURER 1.00	0.	0.	0.
VIVIAN BROWNE 2321 E. 4TH STREET NO. C616 SANTA ANA, CA 92705	DIRECTOR 1.00	0.	0.	0.
CARI GARFIELD 2321 E. 4TH STREET NO. C616 SANTA ANA, CA 92705	DIRECTOR 1.00	0.	0.	0.
MELYNN SCHUYLER 2321 E. 4TH STREET NO. C616 SANTA ANA, CA 92705	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.