### Part I Summary

1. Briefly describe the organization's mission or most significant activities: 

   ![Insert Schedule O]

2. Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3. Number of voting members of the governing body (Part VI, line 1a): 3

4. Number of independent voting members of the governing body (Part VI, line 1b): 4

5. Total number of individuals employed in calendar year 2018 (Part V, line 2a): 5

6. Total number of volunteers (estimate if necessary): 30

7a. Total unrelated business revenue from Part VIII, column (C), line 12: 7a.

   ![Add lines 8 through 11 (must equal Part VIII, column (A), line 12)]

7b. Net unrelated business taxable income from Form 990-T, line 38: 7b.

### Activities & Governance

8. Contributions and grants (Part VIII, line 1h): 890,497.

9. Program service revenue (Part VIII, line 2g): 1,564,764.

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d): 37,720.

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e): 1,364.

12. Total revenue (must equal Part VIII, column (A), line 12): 1,132,011.

13. Grants and similar amounts paid (Part IX, column (A), lines 1-3): 611,430.


15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10): 179,296.

16a. Professional fundraising fees (Part IX, column (A), line 11e): 237,096.

   ![Total fundraising expenses (Part IX, column (D), line 12)]

17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e): 480,854.


   ![Total unrelated business revenue from Part VIII, column (C), line 12]

20. Total assets (Part X, line 16): 711,598.

   ![Beginning of Current Year]


   ![End of Year]

22. Net assets or fund balances. Subtract line 21 from line 20: 11,430.

### Part II Signature Block

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of officer</td>
<td>D. CASANOVA</td>
</tr>
<tr>
<td>Date</td>
<td>EXECUTIVE DIR.</td>
</tr>
</tbody>
</table>

**Paid Preparer Use Only**

- **Firm's name**: VM ACCOUNTING SERVICES CPA
- **Firm's EIN**: 20-2124886
- **Firm's address**: 1101 COLLEGE AVENUE, SUITE 240
- **Phone no.**: 707-542-4465

May the IRS discuss this return with the preparer shown above? (see instructions) **Yes No**
Part III Statement of Program Service Accomplishments

1. Briefly describe the organization’s mission:

   SEE SCHEDULE O

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 

   Yes X No

   If “Yes,” describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services? 

   Yes X No

   If “Yes,” describe these changes on Schedule O.

4. Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses.

   a. (Code: ) (Expenses $421,858. including grants of $134,822.) (Revenue $ )

   MANY SCHOOLS IN EAST AFRICA LACK CLEAN WATER AND ADEQUATE SANITATION SYSTEMS. A LACK OF CLEAN WATER AND SANITATION LEADS TO DECREASES IN SCHOOL ATTENDANCE, HIGHER DROPOUT RATES, AND AN INCREASE IN PHYSICAL, SOCIAL, AND PSYCHOLOGICAL ILLNESSES. GLOBAL PARTNERS RESPONDS TO COMMUNITIES WITH WATER NEEDS THROUGH WASH (WATER, SANITATION, AND HYGIENE) PROJECTS THAT PROVIDE CLEAN WATER INFRASTRUCTURE, ASSISTANCE IN WATER MANAGEMENT AND SUSTAINABILITY, SANITATION FACILITY IMPROVEMENT, AND HYGIENE EDUCATION. GLOBAL PARTNERS’ WASH PROJECTS HAVE BEEN SHOWN TO REDUCE RATES OF DIARRHEA AND PARASITIC AND RESPIRATORY INFECTION AND ENABLE STUDENTS TO SPEND SIGNIFICANTLY MORE TIME ON HOMEWORK.

   b. (Code: ) (Expenses $242,367. including grants of $153,529.) (Revenue $ )

   SEE SCHEDULE O

   c. (Code: ) (Expenses $143,889. including grants of $132,326.) (Revenue $ )

   GLOBAL PARTNERS’ GIRLS’ EDUCATION PROGRAM EMPOWERS GIRLS AND YOUNG WOMEN WHO OTHERWISE WOULD BE FINANCIALLY UNABLE TO CONTINUE THEIR EDUCATION TO ATTEND SCHOOL, INSPIRING THEM TO LEAD PRODUCTIVE LIVES AND PROTECTING THEM FROM FORCED EARLY MARRIAGE. EDUCATING A GIRL HAS A RESOUNDING IMPACT ON HOUSEHOLD HEALTH AND ECONOMIC WELLBEING THAT INCREASES EXPONENTIALLY. RESEARCH SHOWS THAT WHEN GIRLS GO TO SECONDARY SCHOOL, THEY ARE MORE LIKELY TO HAVE HIGHER HOUSEHOLD INCOME, FEWER CHILDREN, HEALTHIER CHILDREN, AND MORE EDUCATED CHILDREN. GLOBAL PARTNERS BEGAN FOCUSING ON GIRLS’ EDUCATION 20 YEARS AGO, AND WE REMAIN DEEPLY COMMITTED TO IMPROVING THE QUALITY OF LIFE AND EDUCATION FOR GIRLS IN EAST AFRICA TODAY. CURRENTLY, WE SUPPORT GIRLS’ EDUCATION THROUGH THE FUNDING OF INDIVIDUAL SECONDARY SCHOOL AND TERTIARY LEVEL SCHOLARSHIPS IN UGANDA AND TANZANIA.

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

   SEE SCHEDULE O

   (Expenses $139,214. including grants of $83,642.) (Revenue $ )

   e. Total program service expenses $947,328.

BAA
Part IV Checklist of Required Schedules

1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A. 
   
   Yes No 1 X

2. Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?

   
   Yes No 2 X

3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.

   
   Yes No 3 X

4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II.

   
   Yes No 4 X

5. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.

   
   Yes No 5 X

6. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.

   
   Yes No 6 X

7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II.

   
   Yes No 7 X

8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.

   
   Yes No 8 X

9. Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.

   
   Yes No 9 X

10. 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.

    
    Yes No 10 X

11. If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

   a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.

      
      Yes No 11a X

   b. Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.

      
      Yes No 11b X

   c. Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.

      
      Yes No 11c X

   d. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.

      
      Yes No 11d X

   e. Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.

      
      Yes No 11e X

   f. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.

      
      Yes No 11f X

12. Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.

    
    Yes No 12a X

    b. Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.

        
        Yes No 12b X

13. Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.

    
    Yes No 13 X

14. Did the organization maintain an office, employees, or agents outside of the United States?

    
    Yes No 14a X

    b. Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business activities, or program service activities outside the United States, or aggregate investments valued at $100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.

        
        Yes No 14b X

15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.

    
    Yes No 15 X

16. Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts II and IV.

    
    Yes No 16 X

17. Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11a? If 'Yes,' complete Schedule G, Part I (see instructions).

    
    Yes No 17 X

18. Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.

    
    Yes No 18 X

19. Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.

    
    Yes No 19 X

20. Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H.

    
    Yes No 20a X

    b. If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

        
        Yes No 20b X

21. Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.

    
    Yes No 21 X
22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. ........................................ 22 X

23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J. ........................................ 23 X

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a. .................. 24a X

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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I. ........................................................................................................... 25a X

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I. .......... 25b X

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II. ........... 26 X

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III. ........................................ 27 X

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. ........ 28a X

b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. ........................................ 28b X

c An entity of which the current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. ........................................ 28c X

29 Did the organization receive more than $25,000 in non-cash contributions? If 'Yes,' complete Schedule M. ........... 29 X

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. ........................................ 30 X

31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. ........................................ 31 X

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. ........................................ 32 X

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I. ........... 33 X

34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. ........................................ 34 X

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. ........................................ 35a X

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2. ........................................ 35b

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. ........................................ 36 X

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI. ........................................ 37 X

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. ........................................ 38 X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .................... 1a

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .................... 1b

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? ........................................ 1c X
### Part V Statements Regarding Other IRS Filings and Tax Compliance

#### 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...

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>

#### 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

#### 3a Did the organization have unrelated business gross income of $1,000 or more during the year?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

#### 3b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

#### 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

#### 4b If 'Yes,' enter the name of the foreign country:


#### 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

#### 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

#### 5c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

#### 6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

#### 6b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 7 Organizations that may receive deductible contributions under section 170(c).

<table>
<thead>
<tr>
<th>a</th>
<th>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?</th>
</tr>
</thead>
<tbody>
<tr>
<td>b</td>
<td>If 'Yes,' did the organization notify the donor of the value of the goods or services provided?</td>
</tr>
<tr>
<td>c</td>
<td>Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
</tr>
<tr>
<td>d</td>
<td>If 'Yes,' indicate the number of Forms 8282 filed during the year.</td>
</tr>
<tr>
<td>e</td>
<td>Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
</tr>
<tr>
<td>f</td>
<td>Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
</tr>
<tr>
<td>g</td>
<td>If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
</tr>
<tr>
<td>h</td>
<td>If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099-C?</td>
</tr>
</tbody>
</table>

#### 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 9 Sponsoring organizations maintaining donor advised funds.

<table>
<thead>
<tr>
<th>a</th>
<th>Did the sponsoring organization make any taxable distributions under section 4966?</th>
</tr>
</thead>
<tbody>
<tr>
<td>b</td>
<td>Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
</tr>
</tbody>
</table>

#### 10 Section 501(c)(7) organizations. Enter:

<table>
<thead>
<tr>
<th>a</th>
<th>Initiation fees and capital contributions included on Part VIII, line 12.</th>
</tr>
</thead>
<tbody>
<tr>
<td>b</td>
<td>Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.</td>
</tr>
</tbody>
</table>

#### 11 Section 501(c)(12) organizations. Enter:

<table>
<thead>
<tr>
<th>a</th>
<th>Gross income from members or shareholders.</th>
</tr>
</thead>
<tbody>
<tr>
<td>b</td>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
</tr>
</tbody>
</table>

#### 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
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</tbody>
</table>

#### 12b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
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</tbody>
</table>

#### 13 Section 501(c)(29) qualified nonprofit health insurance issuers.

<table>
<thead>
<tr>
<th>a</th>
<th>Is the organization licensed to issue qualified health plans in more than one state?</th>
</tr>
</thead>
<tbody>
<tr>
<td>b</td>
<td>Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.</td>
</tr>
<tr>
<td>c</td>
<td>Enter the amount of reserves on hand.</td>
</tr>
</tbody>
</table>

#### 14a Did the organization receive any payments for indoor tanning services during the tax year?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
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</table>

#### 14b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

#### 15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

#### 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
### Section A. Governing Body and Management

1. Enter the number of voting members of the governing body at the end of the tax year.  
   - Yes: 11

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?  
   - 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?  
   - Yes

4. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  
   - Yes

5. Did the organization become aware during the year of a significant diversion of the organization’s assets?  
   - Yes

6. Did the organization have members or stockholders?  
   - No

7. 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?  
   - Yes

8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  
   - a. The governing body?  
      - No
   - b. Each committee with authority to act on behalf of the governing body?  
      - No

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?  
   - Yes

### Section B. Policies

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

10. Did the organization have local chapters, branches, or affiliates?  
    - Yes

11. a. Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  
    - Yes

12. a. Did the organization have a written conflict of interest policy?  
    - Yes

13. Did the organization have a written whistleblower policy?  
    - Yes

14. Did the organization have a written document retention and destruction policy?  
    - 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?  
   - a. The organization’s CEO, Executive Director, or top management official.  
      - Yes
   - b. Other officers or key employees of the organization.  
      - Yes

16. a. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  
    - Yes

### Section C. Disclosure

17. List the states with which a copy of this Form 990 is required to be filed:  
   - CA

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

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

20. State the name, address, and telephone number of the person who possesses the organization’s books and records:  
   - D. CASANOVA 320 PROFESSIONAL CENTER DR ROHNERT PARK CA 94928 (707) 588-0550
## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1. Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization’s tax year.

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(C) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) D. STARE</td>
<td>PRESIDENT</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(2) M. GEWIRTZ</td>
<td>VICE PRESIDENT</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(3) A. WITTHOHN</td>
<td>SECRETARY</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(4) J. CULLISON</td>
<td>TREASURER</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(5) D. HARRIS</td>
<td>MEMBER</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(6) S. HURT</td>
<td>PROJ. CHAIR</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(7) D. CASTENHOLZ</td>
<td>MEMBER</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(8) P. VERBISCAR-BROWN</td>
<td>MEMBER</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(9) Y. WHITE</td>
<td>MEMBER</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(10) M. GLASER</td>
<td>MEMBER</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(11) A. HAIGHT</td>
<td>MEMBER</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(12) D. CASANOVA</td>
<td>EXECUTIVE DIR.</td>
<td>40</td>
<td>0</td>
<td>70,000</td>
<td>0</td>
</tr>
<tr>
<td>(13)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

<table>
<thead>
<tr>
<th>(A)</th>
<th>Name and title</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
<th>(E)</th>
<th>(F)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)</td>
<td>Position</td>
<td>Reportable compensation from the organization (W-2/1099-MISC)</td>
<td>Reportable compensation from related organizations (W-2/1099-MISC)</td>
<td>Estimated amount of other compensation from the organization and related organizations</td>
<td></td>
</tr>
<tr>
<td>(15)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17)</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(18)</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>(19)</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>(20)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(21)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(22)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(23)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(24)</td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>(25)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total: 70,000. 0. 6,652.

c Total from continuation sheets to Part VII, Section A: 0. 0. 0.

d Total (add lines 1b and 1c): 70,000. 0. 6,652.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 0

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual.

   Yes  No

   3  X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If 'Yes,' complete Schedule J for such individual.

   Yes  No

   4  X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person.

   Yes  No

   5  X

**Section B. Independent Contractors**

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

<table>
<thead>
<tr>
<th>(A)</th>
<th>Name and business address</th>
<th>(B)</th>
<th>Description of services</th>
<th>(C)</th>
<th>Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 0
### Part VIII Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>Total revenue</th>
<th>Related or exempt function revenue</th>
<th>Unrelated business revenue</th>
<th>Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>81,800</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above...</td>
<td>1,074,964</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f: $81,680</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f.</td>
<td>1,156,764</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Business Code

37,720. 37,720.

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a PROGRAM SERVICES</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue...</td>
<td></td>
</tr>
<tr>
<td>g Total. Add lines 2a-2f</td>
<td>37,720.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investment income (including dividends, interest and other similar amounts)</th>
<th>5,205.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Income from investment of tax-exempt bond proceeds</th>
<th>5,205.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Gross rents</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
</table>

| Less: rental expenses |               |               |
|                       |               |               |
| Rental income or (loss) |               |               |
|                       |               |               |
| Net rental income or (loss) |               |               |
|                         |               |               |

<table>
<thead>
<tr>
<th>Gross amount from sales of assets other than inventory</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
</table>

| Less: cost or other basis and sales expenses |               |               |
|                                            |               |               |
| Gain or (loss) |               |               |
|               |               |               |
| Net gain or (loss) |               |               |
|                      |               |               |

<table>
<thead>
<tr>
<th>Gross income from fundraising events (not including $81,800 of contributions reported on line 1c).</th>
<th></th>
</tr>
</thead>
</table>

| Less: direct expenses |               |               |
|                      |               |               |
| Net income or (loss) from fundraising events |               |               |
|                                                |               |               |

<table>
<thead>
<tr>
<th>Gross income from gaming activities. See Part IV, line 19</th>
<th></th>
</tr>
</thead>
</table>

| Less: direct expenses |               |               |
|                      |               |               |
| Net income or (loss) from gaming activities |               |               |
|                                            |               |

<table>
<thead>
<tr>
<th>Gross sales of inventory, less returns and allowances</th>
<th></th>
</tr>
</thead>
</table>

| Less: cost of goods sold |               |
|                         |               |
| Net income or (loss) from sales of inventory |               |

#### Other Revenue

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>All other revenue</th>
<th></th>
</tr>
</thead>
</table>

| e Total. Add lines 11a-11d |               |
|                            |               |

<p>| 12 Total revenue. See instructions | 1,177,700. | 37,720. | 0. | 5,205. |</p>
<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>596,116.</td>
<td>596,116.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>73,340.</td>
<td>51,338.</td>
<td>7,334.</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>126,366.</td>
<td>97,597.</td>
<td>14,649.</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>16,243.</td>
<td>10,561.</td>
<td>2,145.</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>21,150.</td>
<td>12,889.</td>
<td>5,659.</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>21,874.</td>
<td>21,874.</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>18,354.</td>
<td>5,495.</td>
<td>2,768.</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>34,643.</td>
<td>15,622.</td>
<td>14,848.</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>12,963.</td>
<td>7,735.</td>
<td>2,167.</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>162,677.</td>
<td>137,087.</td>
<td>7,079.</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>757.</td>
<td>757.</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>5,891.</td>
<td>395.</td>
<td>5,496.</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>EVENT EXPENSES</td>
<td>15,835.</td>
<td>1,265.</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>TRAINING &amp; EDUCATION</td>
<td>12,534.</td>
<td>11,228.</td>
<td>660.</td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>1,118,743.</td>
<td>947,328.</td>
<td>85,436.</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720).</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part X  Balance Sheet

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash – non-interest-bearing</td>
<td>274,889</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>367,716</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>40,445</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>63,077</td>
</tr>
<tr>
<td>10</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>17,026</td>
</tr>
<tr>
<td>10a</td>
<td>Less: accumulated depreciation</td>
<td>16,769</td>
</tr>
<tr>
<td>11</td>
<td>Investments – publicly traded securities</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments – other securities. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments – program-related. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>747,142</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>35,544</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>35,544</td>
</tr>
<tr>
<td>27</td>
<td>Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.</td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Unrestricted net assets</td>
<td>426,461</td>
</tr>
<tr>
<td>29</td>
<td>Temporarily restricted net assets</td>
<td>268,257</td>
</tr>
<tr>
<td>30</td>
<td>Permanently restricted net assets</td>
<td>16,880</td>
</tr>
<tr>
<td>31</td>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
</tr>
<tr>
<td>35</td>
<td>Total net assets or fund balances</td>
<td>711,598</td>
</tr>
<tr>
<td>36</td>
<td>Total liabilities and net assets/fund balances</td>
<td>747,142</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12).</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25).</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments.</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses.</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments.</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O).</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).</td>
<td>10</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cash</td>
<td>X Accrual</td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked ‘Other,’ explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>If ‘Yes,’ check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>X Separate basis</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>If ‘Yes,’ check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>X Separate basis</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If ‘Yes’ to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td>3a</td>
</tr>
<tr>
<td></td>
<td>If ‘Yes,’ did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</td>
<td></td>
</tr>
</tbody>
</table>
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received.</td>
<td>664,916</td>
<td>893,016</td>
<td>912,645</td>
<td>890,497</td>
<td>1,156,764</td>
<td>4,517,838</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>664,916</td>
<td>893,016</td>
<td>912,645</td>
<td>890,497</td>
<td>1,156,764</td>
<td>4,517,838</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td>1,766,332</td>
<td>1,766,332</td>
<td>1,766,332</td>
<td>1,766,332</td>
<td>1,766,332</td>
<td>1,766,332</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td>2,751,506</td>
<td>2,751,506</td>
<td>2,751,506</td>
<td>2,751,506</td>
<td>2,751,506</td>
<td>2,751,506</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>664,916</td>
<td>893,016</td>
<td>912,645</td>
<td>890,497</td>
<td>1,156,764</td>
<td>4,517,838</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>416.00</td>
<td>206.00</td>
<td>1,364.00</td>
<td>5,205.00</td>
<td>7,191.00</td>
<td>7,191.00</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI)</td>
<td>748.00</td>
<td>9,771.00</td>
<td>272,990.00</td>
<td>283,509.00</td>
<td>283,509.00</td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td>4,808,538</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) 2018</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))</td>
<td>57.22 %</td>
<td>69.67 %</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Public support percentage from 2017 Schedule A, Part II, line 14</td>
<td>57.22 %</td>
<td>69.67 %</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a 33-1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16b 33-1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

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

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any ‘unusual grants.’)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>(a) 2014</td>
<td>(b) 2015</td>
<td>(c) 2016</td>
<td>(d) 2017</td>
<td>(e) 2018</td>
<td>(f) Total</td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Public support</strong></td>
<td>(Subtract line 8 from line 6.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total support</strong></td>
<td>(Add lines 9, 10c, 11, and 12.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2018</th>
<th>(b) 2017</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2017 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

| | (a) 33-1/3% support tests—2018 | (b) 33-1/3% support tests—2017 | (c) Private foundation | (d) Private foundation |
|-------------------------------|-------------------------------|-----------------------|-----------------------|
| 17 Investment income percentage for 2018 | (line 10c, column (f), divided by line 13, column (f)) |         |         |
| 18 Investment income percentage from 2017 Schedule A, Part III, line 17 |         |         |         |
| 19a 33-1/3% support tests—2018 | If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization |         |         |
| 19b 33-1/3% support tests—2017 | If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization |         |         |
| 20 Private foundation | If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions |         |         |
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

1. **Are all of the organization’s supported organizations listed by name in the organization’s governing documents?**
   - Yes
   - No

2. **Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?**
   - Yes
   - No

3a. **Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?**
   - Yes
   - No

3b. **Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?**
   - Yes
   - No

3c. **Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?**
   - Yes
   - No

4a. **Was any supported organization not organized in the United States (foreign supported organization)?**
   - Yes
   - No

4b. **Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?**
   - Yes
   - No

4c. **Was the substitution the result of an event beyond the organization’s control?**
   - Yes
   - No

5a. **Did the organization add, substitute, or remove any supported organizations during the tax year?**
   - Yes
   - No

5b. **Was any added or substituted supported organization part of a class already designated in the organization’s governing document?**
   - Yes
   - No

5c. **Substitutions only. Was the substitution the result of an event beyond the organization’s control?**
   - Yes
   - No

6. **Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization’s supported organizations?**
   - Yes
   - No

7. **Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor?**
   - Yes
   - No

8. **Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?**
   - Yes
   - No

9a. **Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?**
   - Yes
   - No

9b. **Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest?**
   - Yes
   - No

9c. **Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest?**
   - Yes
   - No

10a. **Did the organization have any excess business holdings in the tax year?**
   - Yes
   - No

10b. **If ‘Yes,’ provide detail in Part VI.**

**GLOBAL PARTNERS FOR DEVELOPMENT**

**94-2537375**

**94-2537375**

**BAA**

**TEEA0404L 06/07/18**
Part IV  Supporting Organizations (continued)

11  Has the organization accepted a gift or contribution from any of the following persons?
   a  A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the
governing body of a supported organization?
   b  A family member of a person described in (a) above?
   c  A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.

Section B. Type I Supporting Organizations

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

2  Did the organization operate for the benefit of any supported organization other than the supported organization(s)
   that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such
   benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the
   supporting organization.

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

1  Did the organization provide to each of its supported organizations, by the last day of the fifth month of the
   organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax
   year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the
   organization's governing documents in effect on the date of notification, to the extent not previously provided?

2  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported
   organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the
   organization maintained a close and continuous working relationship with the supported organization(s).

3  By reason of the relationship described in (2), did the organization's supported organizations have a significant
   voice in the organization's investment policies and in directing the use of the organization's income or assets at
   all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played
   in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

1  Check the box next to the method that the organization used to satisfy the Integrity Part Test during the year (see instructions).
   a  The organization satisfied the Activities Test. Complete line 2 below.
   b  The organization is the parent of each of its supported organizations. Complete line 3 below.
   c  The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

2  Activities Test.  Answer (a) and (b) below.
   a  Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the
       supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported
       organizations and explain how these activities directly furthered their exempt purposes, how the organization was
       responsive to those supported organizations, and how the organization determined that these activities constituted
       substantially all of its activities.
   b  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of
       the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for
       the organization's position that its supported organization(s) would have engaged in these activities but for the
       organization's involvement.

3  Parent of Supported Organizations.  Answer (a) and (b) below.
   a  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of
       each of the supported organizations? Provide details in Part VI.
   b  Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its
       supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section A – Adjusted Net Income

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

#### Section B – Minimum Asset Amount

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

#### Section C – Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td><strong>Distributable Amount.</strong> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
<tr>
<td>7</td>
<td>Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions).</td>
</tr>
</tbody>
</table>
### Part V — Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section D — Distributions

<table>
<thead>
<tr>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>10</td>
</tr>
</tbody>
</table>

#### Section E — Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2018</th>
<th>(iii) Distributable Amount for 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2018 from Section C, line 6</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2018</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>From 2013</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2014</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2015</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2016</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2017</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through e</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2018 distributable amount</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2013 not applied (see instructions)</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2018 from Section D, line 7:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2018 distributable amount</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2019. Add lines 3j and 4c.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2014</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2015</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2016</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2017</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2018</td>
<td></td>
</tr>
</tbody>
</table>
### PART VI, SUPPLEMENTAL INFORMATION

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

(See instructions.)

#### PART II, LINE 10 - OTHER INCOME

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Misc Income</td>
<td>$2,457</td>
<td>$9,771</td>
<td>$748</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel Reimb</td>
<td>270,533</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$273,020</td>
<td>$9,771</td>
<td>$748</td>
<td></td>
<td>$0</td>
</tr>
</tbody>
</table>
Part I  Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

1 Total number at end of year  (a) Donor advised funds (b) Funds and other accounts
2 Aggregate value of contributions to (during year)  
3 Aggregate value of grants from (during year)  
4 Aggregate value at end of year  
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
   - Preservation of land for public use (e.g., recreation or education)
   - Preservation of a historically important land area
   - Protection of natural habitat
   - Preservation of a certified historic structure
   - Preservation of open space
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
   a Total number of conservation easements.  
   b Total acreage restricted by conservation easements.  
   c Number of conservation easements on a certified historic structure included in (a).  
   d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register.  
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  
4 Number of states where property subject to conservation easement is located  
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
   (i) Revenue included on Form 990, Part VIII, line 1  
   (ii) Assets included in Form 990, Part X  
2 If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
   a Revenue included on Form 990, Part VIII, line 1  
   b Assets included in Form 990, Part X
Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   a Public exhibition
   b Scholarly research
   c Preservation for future generations
   d Loan or exchange programs
   e Other

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

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

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

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

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

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

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

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

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

1a Beginning of year balance............. 16,880.

   b Contributions..........................
   c Net investment earnings, gains, and losses
   d Grants or scholarships
   e Other expenditures for facilities and programs
   f Administrative expenses

2 End of year balance.......................... 16,880.

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

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) unrelated organizations
   (ii) related organizations

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

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

Part VI  Land, Buildings, and Equipment.

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

   Description of property
   (a) Cost or other basis (investment)
   (b) Cost or other basis (other)
   (c) Accumulated depreciation
   (d) Book value

   1a Land
   b Buildings
   c Leasehold improvements
   d Equipment
   e Other

   Total, Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

   BAA Schedule D (Form 990) 2018
### Part VII Investments – Other Securities
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
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<tr>
<td>(3) Other</td>
<td></td>
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<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)</strong></td>
<td></td>
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</tbody>
</table>

### Part VIII Investments – Program Related
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
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</thead>
<tbody>
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<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IX Other Assets
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
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</thead>
<tbody>
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<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
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<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. **SEE PART XIII**.
### Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. N/A

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

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amounts Included on Form 990, Part VIII, line 12:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements.</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>a. Net unrealized gains (losses) on investments.</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>b. Donated services and use of facilities.</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>c. Recoveries of prior year grants.</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.).</td>
<td>2d</td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d.</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b.</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.).</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b.</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c.</td>
<td>5</td>
</tr>
</tbody>
</table>

### Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A

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

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amounts Included on Form 990, Part IX, line 25:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements.</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>a. Donated services and use of facilities.</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>b. Prior year adjustments.</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>c. Other losses.</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.).</td>
<td>2d</td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d.</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b.</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.).</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b.</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
</tr>
</tbody>
</table>

### Part XIII | Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

---

**PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND**

TO CREATE A RESERVE FUND THAT WILL EVENTUALLY PROVIDE INCOME TO SUPPORT GPFD PROGRAMS.

**PART X - FIN 48 FOOTNOTE**

INCOME TAX BENEFITS ARE RECOGNIZED FOR INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, ONLY WHEN IT IS DETERMINED THAT THE INCOME TAX POSITION WILL MORE-LIKELY-THAN-NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. GPFD HAS ANALYZED TAX POSITIONS TAKEN FOR FILING WITH THE INTERNAL REVENUE SERVICE AND THE
PART X - FIN 48 FOOTNOTE (CONTINUED)

STATE OF CALIFORNIA. GPFD BELIEVES THAT INCOME TAX FILING POSITIONS WOULD BE SUSTAINED UPON EXAMINATION AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN A MATERIAL ADVERSE EFFECT ON GPFD
**SCHEDULE F (Form 990)**

**Statement of Activities Outside the United States**

- Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.
- Attach to Form 990.
- Go to www.irs.gov/Form990 for instructions and the latest information.

**2018**

**Open to Public Inspection**

Name of the organization: **GLOBAL PARTNERS FOR DEVELOPMENT**

Employer identification number: **94-2537375**

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

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

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

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

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) SUB-SAHARAN AFRICA</td>
<td>GRANTMAKING/PROJECTS SUPPORT</td>
<td>WATER, EDUC, HLTH</td>
<td></td>
<td></td>
<td>596,116.</td>
</tr>
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</tbody>
</table>

3a Subtotal. ................................. 596,116.

b Total from continuation sheets to Part I. ............... 0

c Totals (add lines 3a and 3b) ……………… 596,116.

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>EDUC/HLTH/ WATER</td>
<td>514,436. WIRETRANSFER</td>
<td></td>
<td></td>
<td>ENGINEERING SER</td>
<td>FV</td>
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<tr>
<td>2</td>
<td></td>
<td></td>
<td>WATER DEV</td>
<td>81,680.</td>
<td></td>
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</tbody>
</table>

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

3 Enter total number of other organizations or entities.

---

2

3 2
### Part III Grants and Other Assistance to Individuals Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

BAA

Schedule F (Form 990) 2018

GLOBAL PARTNERS FOR DEVELOPMENT

94-2537375

TEEA3503L  11/02/18
### Part IV  Foreign Forms

1. **Was the organization a U.S. transferor of property to a foreign corporation during the tax year?**
   - If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).  
   - [ ] Yes  
   - [x] No

2. **Did the organization have an interest in a foreign trust during the tax year?**
   - If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990).  
   - [ ] Yes  
   - [x] No

3. **Did the organization have an ownership interest in a foreign corporation during the tax year?**
   - If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471).  
   - [ ] Yes  
   - [x] No

4. **Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year?**
   - If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).  
   - [ ] Yes  
   - [x] No

5. **Did the organization have an ownership interest in a foreign partnership during the tax year?**
   - If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).  
   - [ ] Yes  
   - [x] No

6. **Did the organization have any operations in or related to any boycotting countries during the tax year?**
   - If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).  
   - [ ] Yes  
   - [x] No
Supplemental Information

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

PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US

GPFD requires any organization that applies for funding to be fully certified by the government of its respective country. GPFD makes no grants to individuals. All organizations are required to complete our application form and submit a detailed budget. This application and budget along with any supplements are reviewed and approved by the board of directors. These reports are kept in the active files in our office both as hard copy and in electronic form during the reporting period of the grant. Once this period is ended, files are moved to the archives. GPFD has trusted representatives in-country who have been approved to disperse and monitor the expenditure of grant funds. They provide bank statements and other financial records on a regular basis. The programs coordinator travels to East Africa for the purpose of visiting the project sites to determine whether funds have been spent correctly and according to approved budget.
**Schedule G (Form 990 or 990-EZ) 2018**  
**OMB No. 1545-0047**  
**Open to Public Inspection**

#### Supplemental Information Regarding Fundraising or Gaming Activities

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

- [Attach to Form 990 or Form 990-EZ](https://www.irs.gov/Form990).

**Name of the organization**

**Employer identification number**

<table>
<thead>
<tr>
<th>Part I</th>
<th>Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Indicate whether the organization raised funds through any of the following activities. Check all that apply.</td>
</tr>
<tr>
<td>a</td>
<td>Mail solicitations</td>
</tr>
<tr>
<td>b</td>
<td>Internet and email solicitations</td>
</tr>
<tr>
<td>c</td>
<td>Phone solicitations</td>
</tr>
<tr>
<td>d</td>
<td>In-person solicitations</td>
</tr>
<tr>
<td>e</td>
<td>Solicitation of non-government grants</td>
</tr>
<tr>
<td>f</td>
<td>Solicitation of government grants</td>
</tr>
<tr>
<td>g</td>
<td>Special fundraising events</td>
</tr>
</tbody>
</table>

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  
- [Yes ] Yes  
- [No ] No

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

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in column (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
</tbody>
</table>

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

---

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  
 Schedule G (Form 990 or 990-EZ) 2018  
 TEEA3701L  07/02/18
**Part II Fundraising Events.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Event #1 (event type)</th>
<th>Event #2 (event type)</th>
<th>Other events (total number)</th>
<th>Total events (add column (a) through column (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fundraising Events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross receipts</td>
<td>81,800.</td>
<td></td>
<td>81,800.</td>
</tr>
<tr>
<td>Less: Contributions</td>
<td>81,800.</td>
<td></td>
<td>81,800.</td>
</tr>
<tr>
<td>Gross income</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(line 1 minus line 2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Noncash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food and beverages</td>
<td>19,839.</td>
<td></td>
<td>19,839.</td>
</tr>
<tr>
<td>Entertainment</td>
<td>2,150.</td>
<td></td>
<td>2,150.</td>
</tr>
<tr>
<td>Other direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct expense summary</td>
<td></td>
<td></td>
<td>21,989.</td>
</tr>
<tr>
<td>Net income summary</td>
<td></td>
<td></td>
<td>-21,989.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Bingo</th>
<th>Pull tabs/instant bingo/progressive bingo</th>
<th>Other gaming</th>
<th>Total gaming (add column (a) through column (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct expense summary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net gaming income summary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization conducts gaming activities:
   a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No
   b If 'No,' explain:

10 a Were any of the organization’s gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No
   b If 'Yes,' explain:
11. Does the organization conduct gaming activities with nonmembers? [Yes] [No]

12. Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? [Yes] [No]

13. Indicate the percentage of gaming activity conducted in:
   a. The organization’s facility [13a %]
   b. An outside facility [13b %]

14. Enter the name and address of the person who prepares the organization’s gaming/special events books and records:
   Name ▶
   Address ▶

15a. Does the organization have a contract with a third party from whom the organization receives gaming revenue? [Yes] [No]
   b. If ‘Yes,’ enter the amount of gaming revenue received by the organization $ and the amount of gaming revenue retained by the third party $.
   c. If ‘Yes,’ enter name and address of the third party:
      Name ▶
      Address ▶

16. Gaming manager information:
   Name ▶
   Gaming manager compensation $ ▶
   Description of services provided ▶
   □ Director/officer □ Employee □ Independent contractor

17. Mandatory distributions:
   a. Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? [Yes] [No]
   b. Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year $.

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art – Works of art</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Art – Historical treasures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Art – Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities – Publicly traded</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Securities – Closely held stock</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities – Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Securities – Miscellaneous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution – Historic structures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution – Other.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate – Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate – Commercial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Real estate – Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other► (PROFESSIONAL S 81,680. FV)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Other►</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Other►</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other►</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement .......................................................... 29

---

**30a** During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 

- Yes 
- No

30a X

**b** If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 

- Yes 
- No

X

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 

- Yes 
- No

X

**b** If 'Yes,' describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

GPFD’S MISSION IS TO TAKE AN AUTHENTIC AND SUSTAINABLE APPROACH TO COMMUNITY-DRIVEN DEVELOPMENT IN IMPOVERISHED REGIONS OF EAST AFRICA. THAT MEANS SUPPORTING SCHOOLS AND COMMUNITY-BASED ORGANIZATIONS TO MANAGE EDUCATION AND HEALTH INTERVENTIONS THAT GENERATE LASTING CHANGE FOR LOCAL PEOPLE.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

GPFD’S MISSION IS TO TAKE AN AUTHENTIC AND SUSTAINABLE APPROACH TO COMMUNITY-DRIVEN DEVELOPMENT IN IMPOVERISHED REGIONS OF EAST AFRICA. THAT MEANS SUPPORTING SCHOOLS AND COMMUNITY-BASED ORGANIZATIONS TO MANAGE EDUCATION AND HEALTH INTERVENTIONS THAT GENERATE LASTING CHANGE FOR LOCAL PEOPLE.

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

GLOBAL PARTNERS BELIEVES COMMUNITY LEADERSHIP IS THE KEY TO RESPONSIBLE AND SUSTAINABLE DEVELOPMENT AND THAT LOCAL PEOPLE HAVE THE RIGHT TO DRIVE CHANGE IN THEIR SCHOOLS AND COMMUNITIES. EDUCATION IS EXCEEDINGLY IMPORTANT IN THE FIGHT AGAINST POVERTY, AND, ACCORDINGLY, OUR COMMUNITY-DRIVEN EDUCATION (CDE) PROGRAM:

- MOBILIZES LOW PERFORMING PRIMARY SCHOOLS AND THEIR COMMUNITIES
- PLACES RESOURCES AND DECISION-MAKING POWER IN THE HANDS OF LOCAL PEOPLE THROUGH COMMUNITY MEETINGS FACILITATED BY GLOBAL PARTNERS STAFF
- BUILDS RELATIONSHIPS BETWEEN SCHOOLS AND LOCAL PEOPLE
- BETTERS COMMUNITIES’ PERCEPTIONS OF THE IMPORTANCE OF EDUCATION
- ENCOURAGES TEACHERS TO INTEGRATE INTO COMMUNITIES
- FUNDS PROJECTS THAT IMPACT ATTENDANCE AND OTHER EDUCATION AND HEALTH OUTCOMES THAT ARE IDENTIFIED, IMPLEMENTED, AND PLANNED BY COMMUNITIES

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

ALL CHILDREN HAVE THE RIGHT TO ATTEND SCHOOL IN A SAFE ENVIRONMENT THAT IS CONDUCIVE TO LEARNING. UNFORTUNATELY, MANY SCHOOLS THROUGHOUT EAST AFRICA LACK SUITABLE SPACES...
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

TO LEARN. LACK OF CLASSROOMS LEADS TO OVERCROWDING. POOR STRUCTURAL DESIGN LEADS TO CLASSROOMS THAT OVERHEAT, LEAK WATER, AND ARE POORLY VENTILATED. IN ADDITION, A SHORTAGE OF TEACHER HOUSING MEANS THAT TEACHERS HAVE TO TRAVEL FAR DISTANCES TO REACH THEIR SCHOOLS. AS A RESULT, WEATHER AND TRANSPORT PROBLEMS OFTEN PREVENT THEM FROM TEACHING THEIR CLASSES. GLOBAL PARTNERS RESPONDS TO SCHOOL INFRASTRUCTURE NEEDS IDENTIFIED BY SCHOOLS AND COMMUNITIES BY PARTNERING WITH THEM ON PROJECTS SUCH AS BUILDING AND RENOVATING CLASSROOMS AND CONSTRUCTING TEACHER HOUSING.

AT GLOBAL PARTNERS, WE UNDERSTAND THAT OUR PROJECT GRANTS ARE ONLY PART OF OUR IMPACT IN EAST AFRICA. WE EMPLOY A STRONG TEAM OF EAST AFRICANS TRAINED IN COMMUNITY DEVELOPMENT TO ENGAGE LOCAL PEOPLE AND GUIDE THEM THROUGH THE PROJECT DEVELOPMENT PROCESS. OUR PARTNERSHIPS WITH COMMUNITIES, LEADERS, AND GPFD STAFF PROVIDE OPPORTUNITIES TO HELP INCREASE LOCAL CAPACITY. BEFORE AND DURING PROJECT IMPLEMENTATION, WE HOLD MEETINGS WITH ENTIRE COMMUNITIES AND COMMUNITY LEADERS WHERE OUR STAFF TEACH PROJECT MANAGEMENT SKILLS BY EXAMPLE. THROUGH THIS PROCESS, LOCAL LEADERS ARE IDENTIFIED AND GROW IN THEIR ABILITIES TO SERVE THEIR COMMUNITIES.

MINOR PROJECTS

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE EXECUTIVE DIRECTOR REVIEWS THE FORM 990 WITH THE ACCOUNTANT WHO PREPARED IT. THE FINAL COPY IS REVIEWED BY THE BOARD OF DIRECTORS PRIOR TO FILING. ANY QUESTIONS OR CONCERNS OR CORRECTIONS ARE RESOLVED BEFORE FILING.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION'S GOVERNING DOCUMENTS, TAX RETURNS AND FINANCIAL INFORMATION ARE KEPT IN THE MAIN OFFICE. COPIES OF THESE DOCUMENTS ARE AVAILABLE UPON REQUEST. THE
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available (Continued)

Organization maintains a website and has provided contact information therein. In addition, the organization's financial information is available on our website and the tax return is available on the GuideStar website.
**California Exempt Organization Annual Information Return**

**Form 199  2019**

**TAXABLE YEAR**  2018

**California Exempt Organization Annual Information Return**

**Calendar Year 2018 or fiscal year beginning (mm/dd/yyyy) 4/01/2018**  and ending (mm/dd/yyyy) 3/31/2019

**GLOBAL PARTNERS FOR DEVELOPMENT**

**Addition information. See instructions.**

**City** Rohnert Park  **State** CA  **Zip code** 95928

**Additional information.**

**1101 College Avenue, Suite 240**

**Telephone** 707-542-4465

**Fax** 94-2537375

**Corporation/Organization name**

**GLOBAL PARTNERS FOR DEVELOPMENT**

**Part I**

**Address**

**Street address (suite or room)** 320 Professional Center Dr #120

**City** Rohnert Park  **State** CA  **Zip code** 95928

**Check accounting method:**

- Cash
- Accrual
- Other 990 Series

**Federal Return filed:**

- 990T
- 990-PF Sch H (990)

**Accounting method:**

- Cash
- Accrual
- Other

**Cost or other basis, and sales expenses of assets sold**

- 58,957.

**Gross contributions, gifts, grants, and similar amounts received**

- SEE Sch. B

**Gross sales or receipts from other sources.**

- 42,925.

**Gross dues and assessments from members and affiliates.**

- 2

**Gross sales or receipts from other sources.**

- 3

**Total gross income. Subtract line 7 from line 4**

- 1,199,689.

**Total expenses and disbursements. From Side 2, Part II, line 18**

- 8

**Total expenses and disbursements. From Side 2, Part II, line 18.**

- 1,140,732.

**Total payments**

- 11

**Total expenses and disbursements. From Side 2, Part II, line 18.**

- 10

**Payment balance. If line 11 is more than line 12, subtract line 12 from line 11.**

- 13

**Use tax.**

- 14

**Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12.**

- 15

**Penalties and Interest.**

- 16

**Penalties and Interest.**

- 17

**Filing fee $10 or $25. See General Information F**

**Excess of receipts over expenses and disbursements. Subtract line 9 from line 8.**

- 10

**Financial year beginning**

- 4/01/2018

**Financial year ending**

- 3/31/2019

---

**Firm’s name (or yours, if self-employed) and address**

**VM Accounting Services CPA**

**1101 College Avenue, Suite 240**

**Santa Rosa, CA 95404**

---

**Signature of officer**

**Title** Executive Dir.

**Date** 12/13/18

**Telephone** 707-542-4465

**Fax** 909-3090

---

**Firm's PTIN**

**P000129278**

---

**Signature of preparer**

**Date** 12/13/18

**Check if self-employed** Yes

---

**Fee** 1515

---

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

---

**Form 199  2018 Side 1**
**GLOBAL PARTNERS FOR DEVELOPMENT**

**Part II**

Organizations with gross receipts of more than $50,000 and private foundations
regardless of amount of gross receipts — complete Part II or furnish substitute information.

### Receipts from Other Sources

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gross sales or receipts from all business activities. See instructions.</td>
<td>5,205.</td>
</tr>
<tr>
<td>2. Interest</td>
<td>4,000.</td>
</tr>
<tr>
<td>3. Dividends</td>
<td>3,000.</td>
</tr>
<tr>
<td>4. Gross rents</td>
<td>4,000.</td>
</tr>
<tr>
<td>5. Gross royalties</td>
<td>5,000.</td>
</tr>
<tr>
<td>6. Gross amount received from sale of assets (See Instructions)</td>
<td>See Statement 1.</td>
</tr>
</tbody>
</table>

### Expenses and Disbursements

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Other income. Attach schedule</td>
<td>37,720.</td>
</tr>
<tr>
<td>8. Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1.</td>
<td>42,925.</td>
</tr>
<tr>
<td>10. Disbursements to or for members.</td>
<td>126,366.</td>
</tr>
<tr>
<td>12. Other salaries and wages</td>
<td>21,150.</td>
</tr>
<tr>
<td>13. Interest</td>
<td>12,963.</td>
</tr>
<tr>
<td>15. Rents</td>
<td>310,040.</td>
</tr>
<tr>
<td>16. Depreciation and depletion (See instructions).</td>
<td>1,140,732.</td>
</tr>
</tbody>
</table>

### Schedule L  Balance Sheet

<table>
<thead>
<tr>
<th>Assets</th>
<th>Beginning of taxable year</th>
<th>End of taxable year</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Net notes receivable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Inventories</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Federal and state government obligations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Investments in other bonds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Investments in stock</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Mortgage loans</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Other investments. Attach schedule</td>
<td>17,026.</td>
<td>17,026.</td>
</tr>
<tr>
<td>10a. Depreciable assets</td>
<td>16,011.</td>
<td>105,085.</td>
</tr>
<tr>
<td>10b. Less accumulated depreciation</td>
<td>1,015.</td>
<td>1,015.</td>
</tr>
<tr>
<td>11. Land</td>
<td>63,077.</td>
<td>22,429.</td>
</tr>
<tr>
<td>12. Other assets. Attach schedule</td>
<td>STM 4</td>
<td>2,429.</td>
</tr>
<tr>
<td>13. Total assets</td>
<td>747,142.</td>
<td>826,117.</td>
</tr>
</tbody>
</table>

### Liabilities and net worth

<table>
<thead>
<tr>
<th>Liabilities and net worth</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. Contributions, gifts, or grants payable</td>
<td>55,562.</td>
</tr>
<tr>
<td>16. Bonds and notes payable</td>
<td>37,720.</td>
</tr>
<tr>
<td>17. Mortgages payable</td>
<td>770,555.</td>
</tr>
<tr>
<td>18. Other liabilities. Attach schedule</td>
<td></td>
</tr>
<tr>
<td>19. Capital stock or principal fund</td>
<td>711,598.</td>
</tr>
<tr>
<td>21. Retained earnings or income fund</td>
<td></td>
</tr>
<tr>
<td>22. Total liabilities and net worth</td>
<td>747,142.</td>
</tr>
</tbody>
</table>

### Schedule M-1  Reconciliation of income per books with income per return

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Net income per books</td>
<td>58,957.</td>
</tr>
<tr>
<td>2. Federal income tax</td>
<td></td>
</tr>
<tr>
<td>3. Excess of capital losses over capital gains</td>
<td></td>
</tr>
<tr>
<td>4. Income not recorded on books this year. Attach schedule</td>
<td></td>
</tr>
<tr>
<td>5. Expenses recorded on books this year not deducted in this return. Attach schedule</td>
<td></td>
</tr>
<tr>
<td>6. Total. Add line 1 through line 5</td>
<td>58,957.</td>
</tr>
<tr>
<td>7. Income recorded on books this year not included in this return. Attach schedule</td>
<td></td>
</tr>
<tr>
<td>9. Total. Add line 7 and line 8</td>
<td></td>
</tr>
<tr>
<td>10. Net income per return. Subtract line 9 from line 6</td>
<td>58,957.</td>
</tr>
</tbody>
</table>
**STATEMENT 1**  
**FORM 199, PART II, LINE 7**  
OTHER INCOME

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Service Revenue</td>
<td>$37,720.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$37,720.</strong></td>
</tr>
</tbody>
</table>

**STATEMENT 2**  
**FORM 199, PART II, LINE 9**  
CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
<th>Method Used to Determine BV</th>
<th>Fair Market Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMOUNT GIVEN:</td>
<td>514,436.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DESCRIPTION OF PROPERTY:</td>
<td>ENGINEERING SER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>METHOD USED TO DETERMINE BV:</td>
<td>FV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAIR MARKET VALUE:</td>
<td>81,680.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$596,116.</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**STATEMENT 3**  
**FORM 199, PART II, LINE 17**  
OTHER EXPENSES

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounting fees</td>
<td>$21,874.</td>
</tr>
<tr>
<td>Advertising and Promotion</td>
<td>$18,354.</td>
</tr>
<tr>
<td>Event expenses</td>
<td>$15,835.</td>
</tr>
<tr>
<td>Insurance</td>
<td>$5,091.</td>
</tr>
<tr>
<td>Office expenses</td>
<td>$34,643.</td>
</tr>
<tr>
<td>Other Employee Benefit</td>
<td>$16,243.</td>
</tr>
<tr>
<td>Special Event Expenses</td>
<td>$21,989.</td>
</tr>
<tr>
<td>Training &amp; Education</td>
<td>$12,534.</td>
</tr>
<tr>
<td>Travel</td>
<td>$162,677.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$310,040.</strong></td>
</tr>
</tbody>
</table>

**STATEMENT 4**  
**FORM 199, SCHEDULE L, LINE 12**  
OTHER ASSETS

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prepaid expenses and deferred charges</td>
<td>$22,429.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$22,429.</strong></td>
</tr>
</tbody>
</table>
IN ANNUAL MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
(916) 210-6400
WEB SITE ADDRESS:
www.ag.ca.gov/charities/

ANNUAL REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA
Section 12586 and 12587, California Government Code
11 Cal. Code Regs. section 301-307, 311, and 312

Failure to submit this report annually no later than the 15th day of the 5th month after the
end of the organization’s accounting period may result in the loss of tax exemption and
the assessment of a minimum tax of $800, plus interest, and/or fines or filing penalties
as defined in Government Code section 12586.1. IRS extensions will be honored.

Check if:
☐ Change of address
☐ Amended report

Global Partners for Development
Gross Annual Revenue
Gross Annual Revenue
Gross Annual Revenue

State Charity Registration Number 034643

PART A – ACTIVITIES
For your most recent full accounting period (beginning 4/01/18 ending 3/31/19) list:
Gross annual revenue $1,177,700. Total assets $826,117.

PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest? [ ] Yes [ ] No

2. During this reporting period, were there any theft, embezzlement, diversion or misuse of the organization’s charitable property or funds? [ ] Yes [ ] No

3. During this reporting period, did non-program expenditures exceed 50% of gross revenue? [ ] Yes [ ] No

4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy. [ ] Yes [ ] No

5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If “yes,” provide an attachment listing the name, address, and telephone number of the service provider. [ ] Yes [ ] No

6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number. [ ] Yes [ ] No

7. During this reporting period, did the organization hold a raffle for charitable purposes? If “yes,” provide an attachment indicating the number of raffles and the date(s) they occurred. [ ] Yes [ ] No

8. Does the organization conduct a vehicle donation program? If “yes,” provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes. [ ] Yes [ ] No

9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period? [ ] Yes [ ] No

Organization's area code and telephone number 707 588 2550
Organization's e-mail address DCASANOVA@GPFD.ORG

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete.

D. CASANOVA EXECUTIVE DIR.

Signature of authorized officer 11/20/18
Printed Name
Title