

Growing global philanthropy

February 24, 2017

25 CALLANDS SALAR STATES SALAR SALAR

Angela Calvillo, Clerk of the Board Board of Supervisors City Hall, Room 244 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102

Dear Ms. Calvillo:

On behalf of our member charities, Global Impact requests participation in the 2017 San Francisco City and County Annual Joint Fundraising Drive. Enclosed for your review is the list showing those of our charity partners with representation in the counties of San Francisco, San Mateo, Santa Clara, Alameda, Contra Costa, and Marin. Also included is our complete list of all participating member charities, program description for each charity partner, Global Impact's IRS determination letter and current Audit.

Per section 16.93-2, Global Impact is in compliance with all criteria. Global Impact and its members are exempt under Section 501(c)(3) of the United State Internal Revenue Code of 1954. Global Impact serves as the fiscal representative for its members and will provide documentation supporting their eligibility upon request.

If you have questions or need additional information, please contact me at 703-717-5232 or Tom DeCoursey, Director of National Campaign Engagement, at 703-717-5217. We thank the campaign committee for their consideration of our application and look forward to a successful 2017 campaign.

Sincerely,

Priti Derrick

Director, Charity Services priti.derrick@charity.org

703-717-5232

Global Impact San Francisco Bay Area Members 2017 City and County of San Francisco Listing

Accion International

Mr. Ronald Hoge 1200 California St Unit 24C San Francisco, CA 94109 650-246-6002

American Himalayan Foundation

Erica Stone, President 909 Montgomery Street, Suite 400 San Francisco, CA 94133 415-288-7245

American Jewish World Service

Marina Javor, Development Officer 131 Steuart Street, Suite 200 San Francisco, CA 94105-1242 415-593-3286

American Near East Refugee Aid (ANERA)

Mr. Kamel Ayoub, Director 972 Mission Street San Francisco, CA 94103 640-347-4444

American Refugee Committee

Richard Voelbel 124 8th Avenue San Francisco, CA 94118 rvoelbel@zelle.com

Ashoka

Michael Zakaras 53 Yosemite Ave. Oakland, CA 94611 mzakaras@ashoka.org

CARE

Fredrick Anyanwu 465 California Street #475 San Francisco, CA 94104 415-874-4512

Church World Service

Rev. Patricia De Jong
1st Vice Chairperson, CWS Board of Directors
16331 Norrbom Road
Sonoma, CA 95476
patriciadejong@gmail.com

Compassion International

Ken McKinney 2419 42nd Avenue San Francisco, CA 94116 415-728-4446

Doctors Without Borders/Medécins Sans Frontières USA

Kassia Echavarri-Queen 1111 Wisconsin St San Francisco, CA 94107 415-312-4763

EngenderHealth

Theresa Kim
Communications & Marketing
486 Grizzly Peak Boulevard
Berkeley, CA 94708
tkim@engenderhealth.org

Episcopal Relief & Development

Sean McConnell
Senior Director, Engagement
154 Ignacio Valley Circle
Novato, CA 94949
smcconnell@episcopalrelief.org

Health Volunteers Overseas

San Francisco General Hospital Dr. Richard Coughlin 1001 Potrero Avenue, 3A36 San Francisco, CA 94110 415-206-8812

Heifer International

Connie George, Associate Director of Philanthropy

– Western Region
531 29th St
San Francisco, CA 94131
Connie.george@heifer.org

Helen Keller International

Bruce E. Spivey, MD, MS, MED President, International Council of Ophthalmology San Francisco, California 945 Green Street, No. 10 San Francisco, CA 94133-3601 415-409-8410

HIAS

Amy Weiss, Director of Refugee & Immigrant Services, HIAS Affiliate 2484 Shattuck Avenue, Ste. 210 Berkeley, CA 94704 925-927-2000 aweiss@jfcs-eastbay.org

International Center for Research on Women

Lareina Yee McKinsey Global Institute 555 California Street, Suite 4700 San Francisco, CA 94104 415-318-5374 lareina_yee@mckinsey.com

International Relief Teams

John Brown, M.D 397 Arlington Street San Francisco, CA 94131 415-584-9376

International Rescue Committee, Oakland

Karen Ferguson Executive Director 440 Grand Avenue, Suite 500 Oakland, CA 94610 Karen.Ferguson@rescue.org

International Orthodox Christian Charities

Steve Kreta Charities Metropolitan Committee 2754 Larkey Lane Walnut Creek, CA 94596 707-654-1019

KickStart International

Michael Mills Business Operations Manager 123 10th Street San Francisco, CA 94103 info@kickstart.org

Mercy Corps

Gisel Kordestani COO and Co-founder Crowdpac 11 Faxon Forest Atherton, CA 94027 415-994-6359

Opportunity International

Jennifer Mitrenga 460 Mariposa St Brisbane, CA 94005 jmitrenga@opportunity.org

Oxfam America

Brian Rawson
3121 Stone Cliff Court
Richmond, CA 94806
BRawson@OxfamAmerica.org

PATH

Bridget Brennan Sr. Manager, Outreach and Development 600 California Street, 11th floor San Francisco, CA 94108 USA 415-429-6061 bbrennan@path.org

Pact

Pamela Roussos Senior Director at Global Social Benefit Institute Santa Clara University 500 El Camino Real Santa Clara, CA 95053 pamela roussos@hotmail.com

Plan International USA

Mr. Tamer Rashad 545 San Antonio Rd Apt 315 Mountain View, CA 94040-1353 tamer@humtap.com

Refugees International

Mrs. Joy Alferness 658 Wisconsin St San Francisco, CA 94107-2734 415-596-7757 joy.lian@gmail.com

Rise Against Hunger formerly Stop Hunger Now

Karen Sanders Noe 2296 Tripaldi Way Hayward, CA 94545 (408) 781-6166 knoe@stophungernow.org

Save the Children USA

Ashley Snow Manager of Engagement 734 Bush Street, Apt. 33 San Francisco, CA 94108 916-218-9085 ASnow@savechildren.org

SEE International

Andrew Doraiswamy, Ph.D. Oculeve Inc. 395 Oyster Point, Suite 501 San Francisco, CA 94080 andyswamy@gmail.com

The Salvation Army World Service Office (SAWSO)

Lt. Col. Timothy Foley 832 Folsom Street San Francisco, CA 94107 415-553-3500

United Seamen's Service

Mr. David Heindel Secretary-Treasurer Seafarers International Union of N.A. 1121 7th Street Oakland, CA 94607-2601 510-444-2360

Unitarian Universalist Service Committee (UUSC)

Rev. John Buehrens 1333 Gough St 1-D San Francisco, CA 94109 415-814-2019

Water For People

Vicky Andersen c/o Brown & Caldwell 201 N. Civic Drive, Suite 300 Walnut Creek, CA 94596 925-210-2226

World Bicycle Relief

Mike McClure 245 Lytton Ave, Suite 250 Palo Alto, CA 94301 208-720-2763

World Vision

Mary Garcia 4808 Townsend Ave Los Angeles, CA 90041 323.246.8470 mgarcia@worldvision.org

GLOBAL IMPACT

2017 San Francisco City and County Annual Joint Fundraising Drive Participating Member Charities

- 1. Global Impact
- 2. Accion International
- 3. Africare
- 4. American Himalayan Foundation
- 5. American Jewish World Service
- 6. American Near East Refugee Aid (ANERA)
- 7. American Refugee Committee
- 8. AmeriCares
- 9. Ashoka
- 10. CARE
- 11. ChildFund International
- 12. Children International
- 13. Church World Service
- 14. Clinton Foundation
- 15. Compassion International
- 16. Doctors Without Borders/Medécins Sans Frontières USA
- 17. ECHO
- 18. EngenderHealth
- 19. Episcopal Relief & Development
- 20. FINCA International
- 21. Global Partners in Care
- 22. Handicap International
- 23. Healing the Children
- 24. Health Volunteers Overseas
- 25. Heifer International
- 26. Helen Keller International
- **27. HIAS**
- 28. Human Rights Watch
- 29. International Center for Research on Women
- 30. International Eye Foundation
- 31. International Medical Corps
- 32. International Orthodox Christian Charities
- 33. International Relief Teams
- 34. International Rescue Committee

- 35. Kickstart International
- 36. MAP International
- 37. Medical Team International
- 38. Mercy Corps
- 39. Operation Smile
- 40. Opportunity International
- 41. Oxfam America
- 42. Pact
- 43. Pan American Development Foundation
- 44. Partners In Health
- **45. PATH**
- 46. Plan International USA
- 47. Prison Fellowship International
- 48. Project HOPE
- 49. Refugees International
- 50. Rise Against Hunger formerly Stop Hunger Now
- 51. Rotary Foundation of Rotary International
- 52. The Salvation Army World Service Office (SAWSO)
- 53. Save the Children
- 54. SEE International
- 55. SOS Children's Villages USA
- 56. UNICEF, The U.S. Fund for
- 57. Unitarian Universalist Service Committee
- 58. United Methodist Committee on Relief (UMCOR)
- 59. United Seamen's Service
- 60. Water for People
- 61. Women for Women International
- 62. World Bicycle Relief
- 63. World Relief
- 64. World Renew
- 65. World Vision

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	Church World Service works with partners to eradicate hunger and poverty and promote peace and justice among the world's most		
Church World Service	vulnerable people.	800-297-1516	www.cwsglobal.org
	We convene businesses, governments, NGOs, and individuals to		
	improve global health and wellness, increase opportunity for		
	women and girls, reduce childhood obesity, create economic		
Clinton Foundation	opportunity.	646-775-9179	www.clintonfoundation.org
	Compassion International exists as a child-advocacy ministry to		
	release children from their spiritual, economic, social, and physical		
Compassion International	poverty to become responsible, fulfilled Christian adults.	800-336-7676	www.compassion.com
Doctors Without	An independent international medical humanitarian organization		
Borders/Médecins Sans	that delivers emergency aid to people affected by armed conflict,		
Frontières USA	epidemics and natural disasters in more than 70 countries.	888-392-0392	www.doctorswithoutborders.org
	ECHO fights world hunger by using science, technology and		
	training to develop agricultural solutions to aid farmers in		
ЕСНО	developing countries.	239-567-3319	www.echonet.org
	Women's health organization committed to the belief that sexual	eforementation (includes a construction of the	
	and reproductive health is a human right and vital for women to		
EngenderHealth	reach their full potential.	212-561-8021	www.engenderhealth.org
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	Works with more than 3 million people in nearly 40 countries to		
Episcopal Relief &	overcome poverty, hunger and disease through programs that		
Development	utilize local resources and expertise.	855-312-HEAL (4325)	www.episcopalrelief.org
	FINCA's mission is to alleviate poverty through lasting solutions	recommendation are constructed as a second construction of the con	innent mend med får val med kinnelsen om en skel i med kinnelsen om en skel
	that help people build assets, create jobs and raise their standard		
FINCA International	of living.	202-682-1510	www.finca.org
gas(1) = 2 + a + b + b + c + c + c + c + c + c + c + c	Improving access to hospice and palliative care worldwide where		
	the need is great and the resources are few through partnerships		
Global Partners in Care	between US and international organizations.	703-647-5176	www.globalpartnersincare.org
	Co-winner of the Nobel Peace Prize, we support people with	the account of the 19th at team of a country which with which and the start and add defined about the country and the 18th and 18	u neurodisch bindhol zu der ver aus die methodische die deutsche der entwerken werden eine deutsche deutsche der die deutsche der der der deutsche der deutsche der der der deutsche der deutsche der der deutsche der der deutsche der der deutsche deutsche der deutsche deutsche der deutsche der deutsche deutsche deutsche der deutsche de
	disabilities and other vulnerable groups in situations of conflict,		
Handicap International	natural disaster, exclusion, and poverty.	301-891-2138	www.handicap-international.us
		Chrysland Carlot	
	Is an international, nonprofit organization dedicated to helping underserved children around the world secure the medical care		

	Trains, mentors and provides critical professional support to more than 3000 healthcare providers who care for the neediest		
Health Volunteers Overseas	populations in over 25 countries.	202-296-0928	www.hvousa.org
Heifer International	Helps poor families worldwide become self-sufficient by providing livestock and training in animal management, environmentally-sound farming and community development.	888-548-6437	www.heifer.org
Helen Keller International	Saves the sight and lives of the vulnerable and disadvantaged; combats the causes and consequences of blindness, poor health and malnutrition.	877-535-5374	www.hki.org
HIAS	For more than 130 years, HIAS has been helping refugees rebuild their lives in safety and freedom.	212-613-1438	www.hias.org
Human Rights Watch	Defend the rights of people worldwide. We scrupulously investigate abuses, expose the facts widely, and pressure those with power to respect rights and secure justice.	212-216-1873	www.hrw.org
International Center for Research on Women (ICRW)	Create a brighter, more equitable future for women and girls. ICRW empowers women, advances gender equality and fights poverty through research, capacity building and advocacy.	202-742-1239	www.icrw.org
International Eye Foundation	A global leader in sustainability programming changing how eye care is delivered in the developing world through training, technical assistance, and investments in capacity building.	240-290-0263	www.iefusa.org
International Medical Corps	Global humanitarian organization saving lives and building self- reliance by providing vital medical care; training healthcare providers; rebuilding clinics; and improving water & sanitation.	424-252-6008	www.internationalmedicalcorps.org
International Orthodox Christian Charities	Provides humanitarian/development assistance to people in U.S., Africa, Asia, Europe and the Middle East who have been devastated by man-made and natural disasters.	877-803-4622	www.iocc.org
International Relief Teams	Alleviates human suffering by providing health services and other assistance to victims of disaster, poverty and neglect, in the United States and around the world.	619-284-7979	www.irteams.org
International Rescue Committee, Inc.	Responding to the world's worst humanitarian crises, helping people to survive, recover and reclaim control of their future.	855-973-7283	www.rescue.org

	Our mission is to get millions of people out of poverty quickly, cost-		
KickStart International	effectively and sustainably.	415-346-4820	www.kickstart.org
	A global health organization that partners with people living in		
	conditions of poverty to save lives and develop healthier families		
MAP International	and communities.	800-225-8550	www.map.org
	A humanitarian relief and development organization serving		
	vulnerable people impacted by disaster, conflict and poverty		
Medical Teams International	around the world.	800-959-4325	www.medicalteams.org
	Mercy Corps empowers people to survive through crisis, build		
Mercy Corps	better lives and transform their communities for good.	800-292-3355	www.mercycorps.org
	Driven by our compassion for children, we work to repair	for according to the second process control of the second process	
	childhood facial deformities by delivering safe, effective surgery		
Operation Smile	and related medical care directly to patients.	888-677-6453	www.operationsmile.org
	We unleash the power of entrepreneurs in the developing world.	the control of the co	
	Our services allow more people to expand their businesses, create		
Opportunity International	jobs and change the world.	312-487-5037	www.opportunity.org
	Oxfam America is a global organization working to right the wrong		autum enemana aan aan aan aan aan aan aan aan aan
Oxfam America	of poverty.	800-776-9326	www.oxfamamerica.org
	Pact enables systemic solutions allowing people to earn a dignified		
	living, be healthy, and benefit from their natural environment,		
	transforming lives in almost 30 countries.	•	
Pact		202-466-5666	www.pactworld.org
	Farmer Park and a second contact to the seco		
Dan Amaniana Davalana ant	Empowers disadvantaged people in Latin America and the		
Pan American Development	Caribbean to achieve economic and social progress, strengthen	202 450 2000	10
Foundation	civil society, and prepare for and respond to disasters.	202-458-3969	www.padf.org
Double and to the style	Our mission is to provide a preferential option for the poor in	057.000.5000	
Partners In Health	health care.	857-880-5600	www.pih.org
	PATH's mission is to improve the health of people around the		
DATI	world by advancing technologies, strengthening systems, and	200 202 4540	
PATH	encouraging healthy behaviors.	206-302-4510	www.path.org
	Plan International USA is part of a global organization that works		
Plan International USA	with communities in 52 developing countries to end the cycle of	900 EEG 7019	wayay planusa org
rian mæmauonai USA	poverty for children. Prison Fellowship International follows God's call to proclaim the	800-556-7918	www.planusa.org
	Gospel and to alleviate the suffering of prisoners and their families		
Prison Fellowship International		(702) 401 0000	unnu ofi ora
ruson renowship international	aivuiu liit Woilu.	(703) 481-0000	www.pfi.org

	Provides sustainable improvements in health around the globe		
	through education and humanitarian assistance with more than 92		
Project HOPE	percent of revenues dedicated to programs.	800-544-4673	www.projecthope.org
	Refugees receive food, shelter and protection; displaced families return home, stateless people obtain legal status, the weak		
Refugees International	protected. We advocate to resolve refugee crises.	1-800-REFUGEE	www.refugeesinternational.org
Rise Against Hunger formerly Stop Hunger Now	Provides food and life changing aid to the world's most vulnerable and supports the movement to end hunger in our lifetime.	919-839-0689	www.stophungernow.org
Rotary Foundation of Rotary International	Our mission is to advance world understanding, goodwill and peace through the improvement of health, the support of education and the alleviation of poverty.	866-976-8279	www.rotary.org
	Our Mission is to inspire breakthroughs in the way the world treats children, and to achieve immediate and lasting change in their		
Save the Children	lives.	800-728-3843	www.savethechildren.org
SEE International	Committed to restoring sight and transforming lives of blind people in developing countries. Since 1974, nearly half a million people have received free eye surgery.	877-937-3133	www.seeintl.org
SOS Children's Villages – USA	We provide loving, stable homes for orphaned and abandoned children, and education, medical, and community strengthening programs to help empower vulnerable families.	202-347-7920	www.sos-usa.org
The Salvation Army World Service Office (SAWSO)	With a presence in 127 countries, we work alongside communities to improve the health, economic and spiritual conditions of the world's most vulnerable.	703-684-5500	www.sawso.org
UNICEF, The U.S. Fund for	We believe in a world where ZERO children die from causes we can prevent. Join us, and we can get there.	800-367-5437	www.unicefusa.org
Unitarian Universalist Service	UUSC advances human rights and social justice. Our innovative approaches and impact are grounded in the belief that all people		
Committee	have inherent dignity and rights.	617-301-4350	www.uusc.org
United Methodist Committee on Relief (UMCOR)	To alleviate human suffering. We provide practical, proactive support to the most vulnerable survivors of chronic or temporary emergencies due to natural or civil causes.	888-252-6174	www.umcor.org

United Seamen's Service	Provides overseas health and welfare services to the American Merchant Marine, seafarers of allied nations, US Govt, military & civilian personnel.	201-369-1100	www.unitedseamensservice.org
Water For People	An international organization that supports the development of sustainable drinking water resources, sanitation facilities, and hygiene education programs in developing countries.	720-488-4590	www.waterforpeople.org
Women for Women International	Women for Women International helps women survivors of war and conflict rebuild their lives through a yearlong comprehensive social and economic empowerment program.	202-521-0016	www.womenforwomen.org
World Bicycle Relief	Our mission is to create access to education, healthcare, and economic opportunities in developing regions of the world where distance is a challenge.	312-664-3836	www.worldbicyclerelief.org
World Relief	Provides emergency relief and community-based solutions to alleviate poverty in 27 countries and provides assistance to refugees in the United States.	443-451-1900	www.worldrelief.org
	Fighting poverty, hunger and injustice through partnerships and locally originated community development programs; responding		
World Renew	to disasters with emergency supplies and reconstruction of homes and livelihoods.	800-552-7972	www.worldrenew.net
	Relief and development organization helping children worldwide by tackling causes of poverty and developing access to clean		
World Vision	water, food, health care, education and economic opportunity.	800-859-5437	www.worldvision.org



In reply refer to: 0752255943 July 02, 2014 LTR 4168C 0 52-1273585 000000 00

> 00048152 BODC: TE

GLOBAL IMPACT 1199 N FAIRFAX STE 300 ALEXANDRIA VA 22314



033502

Employer Identification Number: 52-1273585

Person to Contact: Customer Service
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your June 23, 2014, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in MAY 1983.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

Form 8879-EO

IRS e-file Signature Authorization

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_	2015	and ending	06	/30	2n 1

OMB No. 1545-1878

for an Exempt Organization
For calendar year 2015, or fiscal year beginning 07/01, 2015, and ending 0 ▶ Do not send to the IRS. Keep for your records. Department of the Treasury ▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo. Internal Revenue Service Name of exempt organization Employer identification number GLOBAL IMPACT 52-1273585 Name and title of officer SCOTT JACKSON, PRESIDENT AND CEO Part I Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I. 1a Form 990 check here ► X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . 1b 39486611. 2a Form 990-EZ check here ▶ b Total revenue, if any (Form 990-EZ, line 9) 2b b Total tax (Form 1120-POL, line 22) 3b 3a Form 1120-POL check here ▶ b Tax based on investment income (Form 990-PF, Part VI, line 5). 4b 4a Form 990-PF check here ▶ 5a Form 8868 check here ▶ b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) 5b **Declaration and Signature Authorization of Officer** Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only X lauthorize BDO USA, LLE to enter my PIN as my signature Enter five numbers, but do not enter all zeros on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature

Late Jackson

DN: cn=Scottt Jackson, o=Global Impact,
ou.email=scott jackson@charity.org.c=US

Date: 2017.02.17 10:50:02-05'00' 2/17/2017 ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. rice Underwood Date \triangleright 02/16/2017 ERO's signature ▶

ERO Must Retain This Form - See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2015)

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No. 1545-0047

A F	or th	e 2015 calendar year, or tax year beginning 07/01, 2015, and ending	g		06/	′30 ,20	16
_		C Name of organization		Employer ide	entifica	ition numbe	∍r
Bo	heck if ap	pplicable: GLOBAL IMPACT					
	Addre			52-1273	585		
	Name	change Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E	Telephone n	umber		
	Initial	return 1199 NORTH FAIRFAX ST, SUITE 300		(703) 71	7-52	200	
	Termi	City or town, state or province, country, and ZIP or foreign postal code					
	Amen return			Gross receipt	s \$	39 , 5	22,904.
	Applic pendi		н	I(a) Is this a grou		for \	res X No
		1199 NORTH FAIRFAX ST, #300 ALEXANDRIA, VA 22314	н	I(b) Are all subord		luded? \	res 🔲 No
1	Tax-ex	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	7	If "No," attac	h a list.	(see instructio	ns)
J		te: ▶ WWW.CHARITY.ORG	н	I(c) Group exem	otion nur	mber 🕨	
K	Form o	of organization: X Corporation Trust Association Other L Year of	f formation	n: 1981 M	State o	f legal domi	icile: DC
P	art I	Summary					
	1	Briefly describe the organization's mission or most significant activities: GLOBAL IMPACT	BUIL	DS PARTN	ERSH	IPS AN	D
9		RESOURCES FOR THE WORLD'S MOST VULNERABLE PEOPLE.					-
nar							-
Governance	i	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more that			3.		
ŏ		Number of voting members of the governing body (Part VI, line 1a)			3		19.
80		Number of independent voting members of the governing body (Part VI, line 1b)			4		18.
Activities &		Total number of individuals employed in calendar year 2015 (Part V, line 2a)			5		79.
cţi		Total number of volunteers (estimate if necessary)			6		18.
⋖		Total unrelated business revenue from Part VIII, column (C), line 12			7a		58,883
	b	Net unrelated business taxable income from Form 990-T, line 34			7b		0
Revenue				Prior Year			nt Year
	8	Contributions and grants (Part VIII, line 1h)		3,300,10			831,703
	9	Program service revenue (Part VIII, line 2g).		2,145,37		۷,۱	630,245
Ŗ.	יוו	investment income (Part VIII, column (A), lines 3, 4, and 7d)		70,76	0.		24,663
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,516,25		20	486,611
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,406,47			751,857
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	3,400,47	0.	30,	731,037
		Benefits paid to or for members (Part IX, column (A), line 4)		6,212,916.		6 .	190,790
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0,212,310.		0,.	100,700
beu	h	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 628,684.			-	***********	
Ä		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,809,96	2.	4 . (061,508
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		45,429,354.			004,155
	1	Revenue less expenses. Subtract line 18 from line 12		86,90			517,544
or es		Trovertide 1656 experience. Constitute to treat the first tree fig. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	Beginni	ng of Current Y		End of	
ets	20	Total assets (Part X, line 16)	_	5,760,93			891,112
Ass	21	Total liabilities (Part X, line 26)		9,904,23			555 , 776
Net Assets Fund Balanc	22	Net assets or fund balances. Subtract line 21 from line 20.		5,856,69			335,336
	rt II	Signature Block		· · · · · · · · · · · · · · · · · · ·			<u> </u>
Un	der per	nalties of perjury, I declare that I have examined this return, including accompanying schedules and statem	nents, and	to the best of	my kn	owledge ar	nd belief, it is
tru	e, corre	ect, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has T	s any kno	wledge.			
				02/1	7/20	17	
Sig		Signature of officer		Date			
He	re	SCOTT JACKSON PRESIDENT AND	CEO				
		Type or print name and title					
		Print/Type preparer's name Preparer's signature Date		Check	if PT	ΓIN	
Paid		JOYCE UNDERWOOD Quyee Underwood. 02/16.	/2017	self-employe	ed F	2000223	361
	parer Only	Firm's name ▶ BDO USA, LLP	F	irm's EIN 🕨	13-5	381590	
	Crity	Firm's address > 8401 GREENSBORO DRIVE, SUITE 800 MCLEAN, VA 22102	F	hone no.	703-	893-06	00
May	the l	RS discuss this return with the preparer shown above? (see instructions)				X Yes	
For	Pape	rwork Reduction Act Notice, see the separate instructions.				Form	990 (2015)

For Paperwork Reduction Act Notice, see the separate instructions.

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GLOBAL IMPACT Form 990 (2015) Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: GLOBAL IMPACT BUILDS PARTNERSHIPS AND RESOURCES FOR THE WORLD'S MOST VULNERABLE PEOPLE. (CONTINUED ON 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. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

 4a (Code:
) (Expenses \$ 30,448,197.
 including grants of \$ 26,768,755.
) (Revenue \$ 418,869.

 CAMPAIGN SOLUTIONS.
 (SEE SCHEDULE O FOR CONTINUATION.)

 4b (Code:) (Expenses \$ 6,215,942. including grants of \$ 3,983,102.) (Revenue \$ 2,152,493.) PARTNER SOLUTIONS. (SEE SCHEDULE O FOR CONTINUATION.) 4c (Code:) (Expenses \$ including grants of \$ _____) (Revenue \$ 4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ **4e** Total program service expenses ► 36,664,139.

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Part IV Checklist of Required Schedules Page 3

ı arı	One chist of Nequired Schedules		Yes	No
	In the consideration described in social EQA(-)(0) or 40.47(-)(4) (allow them consider to the consideration (0.15 lb)(-) lb		163	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		37	
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	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	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.	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	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>			
U	· · · · · · · · · · · · · · · · · · ·	8		Х
•	complete Schedule D, Part III	0		
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	_		37
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			**
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	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	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	i		
u	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		
J	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
		144		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	44.	Х	
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Λ	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		17	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		.,	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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 11e? If "Yes," complete Schedule G, Part I (see instructions)	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	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
		_	000	

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Form 990 (2015) Page 4

Part	Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		X
22	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated		v	
	employees? If "Yes," complete Schedule J	23	X	-
24 a	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
		ZJa		
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?			37
	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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	1.11		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
ь		206		Х
	Schedule L, Part IV	28b		- 21
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			37
	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		Х
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		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
34	or IV, and Part V, line 1	34	Х	
0.5 -			X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	27	
þ	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		X
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		Х
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	Х	
	The second secon			

Form 990 (2015)

Par		
	Check if Schedule O contains a response or note to any line in this Part V	
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	Yes No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	
	Did the organization comply with backup withholding rules for reportable payments to vendors and	
·	reportable gaming (gambling) winnings to prize winners?	1c X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 79	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1,44
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b X
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)?	4a X
b	If "Yes," enter the name of the foreign country: ▶	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	
	(FBAR).	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	0.0
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a X
h	organization solicit any contributions that were not tax deductible as charitable contributions?	- Ca
D	gifts were not tax deductible?	6b
7	Organizations that may receive deductible contributions under section 170(c).	
	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?	7a X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	
	required to file Form 8282?	7c X
d	If "Yes," indicate the number of Forms 8282 filed during the year	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f X
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8 X
_	sponsoring organization have excess business holdings at any time during the year?	8 X
	Sponsoring organizations maintaining donor advised funds.	9a X
	Did the sponsoring organization make any taxable distributions under section 4966?	9b X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	00
	Initiation fees and capital contributions included on Part VIII, line 12	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	
	Section 501(c)(12) organizations. Enter:	
	Gross income from members or shareholders	
b	Gross income from other sources (Do not net amounts due or paid to other sources	
	against amounts due or received from them.)	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a
	Note. See the instructions for additional information the organization must report on Schedule O.	
b	Enter the amount of reserves the organization is required to maintain by the states in which	
	the organization is licensed to issue qualified health plans	
	Enter the amount of reserves on hand	14a X
	Did the organization receive any payments for indoor tanning services during the tax year?	
Q	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b

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Form 990 (2015) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 19	3		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			3.7
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l		v
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	0-	Х	
а	The governing body?	8a 8b	X	
b	Each committee with authority to act on behalf of the governing body?	90	21	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue			
0001	on bit diales (The dedical broquette information about politice not required by the internal Nevenue		Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	4 -	Χ	
a	The organization's CEO, Executive Director, or top management official	15a 15b	X	
b	Other officers or key employees of the organization	100	**	
460	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	ERECEPTOR PRODUCT	TO A STATE OF THE PARTY OF THE
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 1			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	`	,, ,-	• • •
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record MARK MILLIGAN, MNG DIR-FINANCE 1199 N FAIRFAX ST #300 ALEXANDRIA, VA 22314 703-717-5200	ls:▶		

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

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

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

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

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

Check this	box if neither the	organization nor an	ny related organization	compensated any	current officer, dire	ctor, or trustee.
------------	--------------------	---------------------	-------------------------	-----------------	-----------------------	-------------------

(A) Name and Title	(B) Average hours per week (list any	box,	unles	Pos neck ss pe	rson	e than c is both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)SCOTT JACKSON	40.00									
PRESIDENT & CEO	0.	X		Х				375,251.	0.	38 , 357.
(2)STEVE POLO	2.00									
BOARD CHAIRMAN	 0.	Х		Х				0.	0.	0.
(3)NANCY KELLY	2.00									
BOARD VICE CHAIRMAN	0.	Х		Х				0.	0.	0.
(4) JAMES KANUCH, CPA	2.00									
BOARD SECRETARY/TREASURER	0.	X		Х				0.	0.	0.
(5)TIMOTHY BLOECHL	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(6)JOSEPH CRUPI	1.00									
BOARD MEMBER	0.	Χ						0.	0.	0.
(7)KENNETH SCHANER	1.00									
BOARD MEMBER	0.	X						0.	0.	0.
(8)MOUHAMED DJALO	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(9) PETER GRANT	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(10)STAN HARRELL	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(11)KAREN JOHNSON	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(12)MARYON DAVIES LEWIS	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(13) RABIH TORBAY	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.
(14)MAURICIO VIVERO	1.00									
BOARD MEMBER	0.	Х						0.	0.	0.

JSA 5E1041 1.000 Form **990** (2015)

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Form 990 (2015) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (B) (D) (A) (C) Position Reportable Reportable Estimated Name and title Average (do not check more than one amount of hours per compensation compensation from week (list any box, unless person is both an from related other officer and a director/trustee) compensation hours for the organizations Individual trustee or director from the Highest compensated employee related organization (W-2/1099-MISC) nstitutional trustee organization organizations (W-2/1099-MISC) employee and related below dotted organizations line) 15) DAVID WU 1.00 0. 0. 0 BOARD MEMBER Χ 0. 1.00 EDWARD ZELLEM 0. BOARD MEMBER 0. 0. 0. Χ CAROL REIG 1.00 BOARD MEMBER 0. Χ 0. 0. 0. KATHRYN COMPTON 1.00 BOARD MEMBER 0. Χ 0. 0. 0. PIERRE FERRARI 1.00 0. 0. BOARD MEMBER 0 0 Χ CHRISTINE SOW 40.00 EXECUTIVE DIRECTOR, GHC 0. 0 179,436. 0. Χ ANN CANELA 40.00 VP, PARTNER SOLUTIONS 0. Χ 173,964. 0. 13,656. 40.00 JOSEPH METTIMANO VP, MKTG & CAMPAIGN ENGAGEMENT 0. Χ 172,928. 0. 22,983. STEPHANIE SCHOLZ 40.00 MANAGING DIRECTOR, 0. HR & ADMIN 0. X 145,531. 23,609. MARK MILLIGAN 24) 40.00 MANAGING DIRECTOR, FINANCE 0. 0. 149,157. 15,603. Χ 375,251. 0. 38,357. 1b Sub-total 821,016. 0. 75,851. 1,196,267. 0. 114,208. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated Χ 3 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 Χ 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual Χ

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

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

Form	990 (2	015)	GLOBAL IMPA	CT			52-12735	85 Page 9
Par	t VIII							
	10	Check if Schedule O co	ontains a respon	se or note to ar	ny line in this Part \ (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Giffs, Grants and Other Similar Amounts	d e f	Federated campaigns Membership dues	1b 1d 1d tions) 1e grants, labove . 1f n lines 1a-1f: \$					
	h	Total. Add lines 1a-1f			36,831,703.			
Program Service Revenue	2a b c	ADV SVCS/PR GR/REL REV MEMBER STATE REGISTRATION COOPERATIVE ADVERTISING	1	900099 900099 900099	2,211,376. 283,069. 135,800.	2,152,493. 283,069. 135,800.	58,883.	
E	е							
ogra	f	All other program service rev	enue				1	
<u> </u>	g	Total. Add lines 2a-2f			2,630,245.			
	3 4 5	Investment income (income and other similar amounts). Income from investment of Royalties	tax-exempt bond	proceeds .	29,510.			29,510.
	6a b c	Gross rents			0.			
		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	С	Less: cost or other basis and sales expenses Gain or (loss)	36,293. -4,847.		-4,847.			-4,847.
Other Revenue		Gross income from fundra events (not including \$ of contributions reported on See Part IV, line 18	line 1c).					
ŏ	b	Less: direct expenses						
	9a	Net income or (loss) from fu Gross income from gaming See Part IV, line 19	activities.		0.			
		Less: direct expenses		L				
	10a	Net income or (loss) from g Gross sales of inventor returns and allowances	ory, less		0.			
	b c	Less: cost of goods sold Net income or (loss) from sal Miscellaneous Revenu	les of inventory		0.			
	11a b c							
	d	All other revenue						
	e	Total. Add lines 11a-11d .		▶	0.	1 04		
JSA	12	Total revenue. See instruction			39,486,611.	2,571,362.	58,883.	24,663

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GLOBAL IMPACT Form 990 (2015)

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	onse or note to any li	ne in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	28,591,658.	28,591,658.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0.		A	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,160,199.	2,160,199.	a de la composição de la Composição de la composição de l	en ang ang ang ang ang ang ang ang ang an
4 5	Benefits paid to or for members	0.	F10 (F2)	166.700	40.020
6	trustees, and key employees	727,475.	518,653.	166,790.	42,032.
7	Other salaries and wages	4,063,807.	2,647,392.	1,156,452.	259,963.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	394,732.	271,232.	103,259.	20,241.
9 10	Other employee benefits	643,239. 361,537.	391,204. 261,561.	201,012. 84,972.	51,023. 15,004.
11	Fees for services (non-employees): Management	665,942.	408,362.	183,160.	74,420.
b	Legal	169,369. 91,447.	24,750.	169,369. 66,697.	
е	Lobbying Professional fundraising services. See Part IV, line 17. Investment management fees	0. 0.			
	Other. (If line 11g amount exceeds 10% of line 25, column	70,523.	70,523.		
12	(A) amount, list line 11g expenses on Schedule O.)	674,707.	590,379.	32,658.	51,670.
13 14	Office expenses	502,268. 199,775.	297,182. 60,171.	175,048. 139,604.	30,038.
15 16 17	Royalties	324,867. 310,130.	197,789. 157,967.	105,787. 92,175.	21,291.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 20	Conferences, conventions, and meetings Interest	28,316. 9,410.	5,707. 9,410.	19,595.	3,014.
21	Payments to affiliates	203,685. 56,535.		203,685. 56,535.	
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column	30,333.			Special metrics
a	(A) amount, list line 24e expenses on Schedule O.) BAD DEBT EXPENSE	754,534.		754,534.	
d	·				
25	All other expenses Add lines 1 through 24e Joint costs. Complete this line only if the	41,004,155.	36,664,139.	3,711,332.	628,684.
	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)	0.			
JSA					Form 990 (2015)

JSA 5E1052 1.000

Form **990** (2015)

Form 990 (2015)
Part X Balance Sheet

Page **11**

Part X				
	Check if Schedule O contains a response or note to any line in this P			1
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	200.	1	200.
2	Savings and temporary cash investments	3,531,543.	2	3,062,755.
3	Pledges and grants receivable, net	19,306,907.	3	16,709,704.
4	Accounts receivable, net	469,778.	4	504,053
5	Loans and other receivables from current and former officers, directors,		43.64	
	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L	0.	5	0
6	Loans and other receivables from other disqualified persons (as defined under section		688	
	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	0.	6	0
\$ 7	Notes and loans receivable, net	0.	7	0
Assets 8 4	Inventories for sale or use	0.	8	0
9	Prepaid expenses and deferred charges	106,031.	9	162,123.
10 a	Land, buildings, and equipment: cost or		NOW	
	other basis. Complete Part VI of Schedule D 2,503,775.			
k	Less: accumulated depreciation	1,106,615.	10c	965,650.
11	Investments - publicly traded securities	1,086,905.	11	1,108,393.
12	Investments - other securities. See Part IV, line 11	0.		0
13	Investments - program-related. See Part IV, line 11	0.	13	0
14	Intangible assets	0.	14	0
15	Other assets. See Part IV, line 11	152,953.		1,378,234
16	Total assets. Add lines 1 through 15 (must equal line 34)	25,760,932.	16	23,891,112.
17	Accounts payable and accrued expenses	1,310,559.		1,163,773
18	Grants payable	0.	18	0
19	Deferred revenue	895,330.	19	930,325
20	Tax-exempt bond liabilities	0.	20	0
21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0
	Loans and other payables to current and former officers, directors,		, in	
Liabilities	trustees, key employees, highest compensated employees, and			
īg	disqualified persons. Complete Part II of Schedule L	0.	22	0
تا ₂₃	Secured mortgages and notes payable to unrelated third parties	83,642.	23	1,164,574.
24	Unsecured notes and loans payable to unrelated third parties	0.		0
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	17,614,706.	25	16,297,104.
26	Total liabilities. Add lines 17 through 25	19,904,237.	26	19,555,776.
(0	Organizations that follow SFAS 117 (ASC 958), check here 🕨 🐰 and			era non la composiçõe de la composiçõe de La composiçõe de la compo
90 E 27	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	5,856,695.	27	4,335,336.
28 28	Temporarily restricted net assets	0.	28	0
g 29	Permanently restricted net assets	0.	29	0
Net Assets or Fund Balances 2 2 2 8 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Organizations that do not follow SFAS 117 (ASC 958), check here		23	
130 gr	complete lines 30 through 34. Capital stock or trust principal, or current funds	* *.	20	
30 31			30	
ξ 31 V 32	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥ 32	Retained earnings, endowment, accumulated income, or other funds	5,856,695.	32	4,335,336
	Total net assets or fund balances	25,760,932.	33	23,891,112.
34	Total liabilities and net assets/fund balances	23,100,932.	34	Form 990 (2015

Form **990** (2015)

GLOBAL IMPACT 52-1273585

Form 990 (2015) Page **12** Part XI **Reconciliation of Net Assets** Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12) 39,486,611. 1 1 Total expenses (must equal Part IX, column (A), line 25) 41,004,155. 2 -1,517,544. 3 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5,856,695. 4 4 -3,815. 5 5 0. 6 6 0. 7 7 8 0. 8 Other changes in net assets or fund balances (explain in Schedule O) 0. 9 9 Net assets or fund balances at end of year, Combine lines 3 through 9 (must equal Part X, line 4,335,336. 10 Part XII **Financial Statements and Reporting** Check if Schedule O contains a response or note to any line in this Part XII X Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Χ 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: Both consolidated and separate basis Separate basis Consolidated basis Χ 2b b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight Χ 2c of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in За Χ b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

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

2015

Employer identification number

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

GLC	DBAL IMPACT					52.	-1273585
Pai	rt I Reason for Public Cl	harity Status (All o	organizations must o	omplete	e this pa	art.) See instructions	
The	organization is not a private for	oundation because it	t is: (For lines 1 through	gh 11, ch	eck only	one box.)	
1	A church, convention of c	hurches, or associa	tion of churches desc	ribed in s	ection 1	70(b)(1)(A)(i).	
2	A school described in sec	tion 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990)-EZ).)	
3	A hospital or a cooperative						
4	A medical research organ	·	~				(iii). Enter the
	hospital's name, city, and		•	•		()()(•
5	An organization operated		a college or universit	v owne	d or ope	erated by a governme	ntal unit described in
-	section 170(b)(1)(A)(iv).			.,			
6	A federal, state, or local	•	rnmental unit describe	d in sect	ion 170(h)(1)(Δ)(γ)	
7	X An organization that nor	-					om the general nublic
•	described in section 170(•		ipport in	om a go	vernmentar unit or me	on the general public
0	A community trust descri			Dort II \			
8 9		•		-		contributions mamb	arabin food, and aroos
9	An organization that nor	*					
	receipts from activities r						
	support from gross inve						tax) ironi businesses
40	acquired by the organizat				•	•	
10	An organization organize	•	•	-			
11	An organization organize		=""	· · · · · · · · · · · · · · · · · · ·			
	one or more publicly supp	=					
	the box in lines 11a throu	_				•	_
а		- '	•	-		- , ,	.,
	the supported organiza			elect a m	ajority o	f the directors or trus	tees of the supporting
	organization. You must	-					
b		_					
	control or managemen	t of the supporting o	organization vested in	the sam	e persor	ns that control or man	age the supported
	organization(s). You mu	st complete Part IV	, Sections A and C.				
С	Type III functionally in	t <mark>egrated</mark> . A supporti	ing organization opera	ated in co	onnectio	n with, and functional	ly integrated with,
	its supported organizati	on(s) (see instruction	ns). You must comple	te Part l	V, Section	ons A, D, and E.	
d	Type III non-functional	ly integrated. A sup	porting organization o	perated	in conn	ection with its suppor	ted organization(s)
	that is not functionally in	ntegrated. The orga	nization generally mus	st satisfy	a distrib	oution requirement and	d an attentiveness
	requirement (see instru	ctions). You must co	omplete Part IV, Sect	ions A a	nd D, an	d Part V.	
е	Check this box if the or	ganization received	a written determination	n from t	he IRS t	hat it is a Type I, Type I	I, Type III
	functionally integrated,	or Type III non-funct	tionally integrated sup	porting o	organizat	tion.	
f	Enter the number of support	ed organizations					
g	Provide the following informa	ition about the supp	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
			(described on lines 1-9 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
			,			,	,
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
				54, 57.5			
Tota	al						

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

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Sche	GLODA dule A (Form 990 or 990-EZ) 2015	L IMPACI				32-12/3	Page 2
Par	Complete only if you checke Part III. If the organization fai	ed the box on	line 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua	
Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	100,508,279.	98,081,574.	38,186,920.	43,300,109.	36,831,703.	. 316,908,585.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	100,508,279.	98,081,574.	38,186,920.	43,300,109.	36,831,703.	316,908,585.
5	The portion of total contributions by each person (other than a governmental unit or publicly	erren de la servicio April de la servicio de La composição	enditario della constituta di la constituta	a san a seje Sejetha hasak Tepah pepadesa			
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					alignings was being as	1,697,796.
6	Public support. Subtract line 5 from line 4.	a stant	3 2 3 34	11 - 11 - 11		Appendant of	315,210,789.
	tion B. Total Support		,	T	1		
Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	100,508,279.	98,081,574.	38,186,920.	43,300,109.	36,831,703.	316,908,585.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	24,045.	22,078.	32,109.	36,953.	29,510.	144,695.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10	Stageton Land				Santa and	317,053,280.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	8,772,882.
13	First five years. If the Form 990 is forganization, check this box and stop here			nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Sup						00.40
14	Public support percentage for 2015 (li					14	99.42%
15	Public support percentage from 2014					15	99.96%
16a	331/3% support test - 2015. If the o						
	this box and stop here . The organization						> X
b	331/3% support test - 2014. If the co	_					
	check this box and stop here. The orga	anization qualifi	es as a publicly	supported orga	nization		🗀

17a 10%-facts-and-circumstances test - 2015. 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.....

b 10%-facts-and-circumstances test - 2014. 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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

GLOBAL IMPACT 52-1273585

Schedule A (Form 990 or 990-EZ) 2015 Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

500	tion A. Public Support			• •			
		(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2011	(6) 2012	(0) 2010	(4) 2014	(6) 2010	(i) rotai
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5				-		
	Amounts included on lines 1, 2, and 3						
, u	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b			to a constant the same of the		Table 1 and 1 and 1 and 1	
8	Public support. (Subtract line 7c from		建程序的图片		and the second		
	line 6.)						
	tion B. Total Support				T		
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						·
• • •	activities not included in line 10b.						
	whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is f	for the organizat	tion's first, seco	nd, third, fourth	ı, or fifth tax y	ear as a section	501(c)(3)
	organization, check this box and stop here	<i>.</i>					▶
Sec	tion C. Computation of Public Sup	port Percenta	age				
15	Public support percentage for 2015 (line 8	, column (f) divide	ed by line 13, colur	nn (f))		15	%
16	Public support percentage from 2014 Sche					16	%
Sec	tion D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2015 (li	ne 10c, column (f) divided by line 1	3, column (f))		17	%
18	Investment income percentage from 2014					18	%
	331/3% support tests - 2015. If the or					L	
	17 is not more than 331/3%, check th	=					
h	331/3% support tests - 2014. If the orga	-	_	•	•		
S	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		-	-	• •		
JSA	a. Touridation if the organization	a.a not oncolt	~ 20x OII IIIO	, 10u, 01 101		Schedule A (Form 9	

Page 4

Yes No

Supporting Organizations Part IV

(Complete only if you checked a box in line 11 of Part I, If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I. complete Sections A and C. If you checked 11c of Part I. complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes." explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1		
5	:	
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1	No.	
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GLOBAL IMPACT 52-1273585

Schedule A (Form 990 or 990-EZ) 2015

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		1 .	
	below, the governing body of a supported organization?	11a		ļ
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
		100	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			- A.
	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	28,700	Vigae.	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	14.VA		West.
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		13.3	100
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		A SANS	
Sooti	on C. Type II Supporting Organizations	2		
Secu	on C. Type ii Supporting Organizations		Yes	No
			162	IVO
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			(6.5)
	the supported organization(s).	1	12475.00	
Section	on D. All Type III Supporting Organizations			
OCCUI.	on b. An Type in Supporting Organizations		Yos	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1.465	.00	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	2.5		
	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	1.13		
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	5/5/5/5	No.	1477
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		A 0744 No 1441	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			1,500
-	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		100	
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	ons):	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru		
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	17, -		
	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			1
	activities but for the organization's involvement.	2b	1 1	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	`		1
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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uctions. All
(B) Current Year
(optional)
(B) Current Year
(optional)
(optional)
a vajelovino
_

1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must con			
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Yea (optional)	
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			*
instructions for short tax year or assets held for part of year):	- 11 11		A NEW YORK
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1 c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	ABABA 3.1.1.1.1.4 A.1.1.1.	
2 Enter 85% of line 1	2	基础设计 经自由证券	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5	Name and State of Sta	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions) 7	6 y-inte	I grated Type III supporting (l organization (see

Page 7

Part	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)	
Secti	on D - Distributions	Current Year		
1	1 Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
;	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:		er se ez din gülülük elektek i	
а				
b				
С				
d	From 2013		in the me enclosed with	
е	From 2014			
f	Total of lines 3a through e		The transfer of the transfer of	NEEDS STATES
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount	the season of all the seasons of		
i	Carryover from 2010 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carry over to 2016. Add lines 3j	i		
	and 4c.			
8	Breakdown of line 7:	The state of the Section of the Section		
а				
b				
С	Excess from 2013			
d	Excess from 2014			
е	Excess from 2015			Tarlable Appendiction

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

OMB No. 1545-0047

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Employer identification number

GLOBAL IMPACT		52-1273585				
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ion				
	501(c)(3) taxable private foundation					
Note. Only a section 501(c)(7), instructions. General Rule For an organization f	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule and a Sp	tions totaling \$5,000				
Special Rules						
regulations under sed 13, 16a, or 16b, and \$5,000 or (2) 2% of For an organization of	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1. ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 of that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Collections of the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received the section 501(c)(7), (8), or (10) filing Form 990 o	or 990-EZ), Part II, line of the greater of (1) complete Parts I and II. eceived from any one				
	contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
contributor, during th contributions totaled during the year for ar General Rule applies	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file So answer "No" on Part IV, line 2, of its Form 990; or check the box on line h certify that it does not meet the filing requirements of Schedule B (Form 99	d of its Form 990-EZ or on its				

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Employer identification number 52-1273585

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1		\$\$.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$ 1,490,868.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization GLOBAL IMPACT

Employer identification number 52-1273585

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

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

Name of organization GLOBAL IMPACT

Employer identification number

52-1273585

	(10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additi	ons completing Par e year. (Enter this in	t III, enter the total formation once. S	of exclusively religious, charitable, etc.,	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
Parti				- :	
	1	(e) Transf	er of gift		
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee			nship of transferor to transferee	
		-			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee			nship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee	

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

If the Tax)	e organization answered "Yes," (see separate instructions), ther				
	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.		F!:	
	e of organization			1 ' -	ntification number
_	BAL IMPACT		4: F04(-)	52-12	
		rganization is exempt under			nization.
1	-	organization's direct and indirect p			
2					
3	Volunteer nours				
Par		rganization is exempt under s			
1	Enter the amount of any exc	ise tax incurred by the organizatio	n under section 495	5 ▶ \$	
2		ise tax incurred by organization m			
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?.		Yes No
					Yes No
	If "Yes," describe in Part IV.				
Pai	t I-C Complete if the c	rganization is exempt under	section 501(c), ex	cept section 501(c)(3).
1		xpended by the filing organization			
2		ng organization's funds contributed es			
3		enditures. Add lines 1 and 2. En			
4 5	Did the filing organization file Enter the names, addresses organization made payment the amount of political conf	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en ributions received that were prom nd or a political action committee (l	er (EIN) of all section ter the amount paid aptly and directly de	on 527 political organiza I from the filing organizative Silivered to a separate po	ations to which the filing cation's funds. Also enter plitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2015

Pa	art II-A Complete if the org	ganization is exer	npt under sectior	1 501(c)(3) and 1	iled Form 5768 (ele	ction under
	name, address, I	ΞIN, expenses, and	I share of excess I	obbying expendi	•	roup member's
В		nization checked		control" provisio	ns apply.	!
	Limits (The term "expendit	on Lobbying Expen ures" means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to	influence public opin	ion (grass roots lobb	oving)		
	Total lobbying expenditures to					
c	Total lobbying expenditures (ac	ld lines 1a and 1b) .				
	d Other exempt purpose expendi				41,004,155.	
	Total exempt purpose expendit				41,004,155.	
	Lobbying nontaxable amount.					
	columns.		_		1,000,000.	
	If the amount on line 1e, column (a	a) or (b) is: The lobbyin	ng nontaxable amount	is:		Marketin Server
	Not over \$500,000	20% of the	amount on line 1e.			
	Over \$500,000 but not over \$1,000	0,000 \$100,000 p	lus 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,5	00,000 \$175,000 p	lus 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17	,000,000 \$225,000 p	lus 5% of the excess of	ver \$1,500,000.		HERE RESERVE
	Over \$17,000,000	\$1,000,000	•			SEAL ENDERSON IN
ç	g Grassroots nontaxable amount	(enter 25% of line 1f)		250,000.	
ŀ	n Subtract line 1g from line 1a. If				0.	0.
i	Subtract line 1f from line 1c. If				0.	0.
j	If there is an amount other the			•		
	reporting section 4911 tax for t					Yes No
			raging Period Unde			
	(Some organizations tha)1(h) election do no te instructions for I			nns below.
			nditures During 4-Yo			
		Lobbying Exper	lattares Burning 4 11	Jan Averaging For		
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000	1,000,000.	4,000,000.
_ k	Lobbying ceiling amount (150% of line 2a, column (e))		de George States (Section 1988)		By Region &	6,000,000.
_	Total lobbying expenditures					
	d Grassroots nontaxable amount	250,000.	250,000.	250,000	250,000	1,000,000.
	Grassroots ceiling amount (150% of line 2d, column (e))	:				1,500,000.
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

Page 3

(election under section 501(h)).	, (a)		(b)	
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No		Amou	nt
During the year, did the filing organization attempt to influence foreign, national, state or loca legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i) 	. —	-	4.7		
		ļ	-		
c Media advertisements?	•	-			
d Mailings to members, legislators, or the public?	.	ļ			
e Publications, or published or broadcast statements?f Grants to other organizations for lobbying purposes?	.	-	<u> </u>		
	•	-			
 g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 					
i Other activities? j Total. Add lines 1c through 1i	• -	1			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	•				
b If "Yes," enter the amount of any tax incurred under section 4912	-				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5). or s	section	n	
501(c)(6).	\ - / \ -	,,			
					Yes N
1 Were substantially all (90% or more) dues received nondeductible by members?				1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year Part III-B Complete if the organization is exempt under section 501(c)(4), section 5	? <u></u>			3	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."			art III-		3, is
1 Dues, assessments and similar amounts from members			1		
 Section 162(e) nondeductible lobbying and political expenditures (do not include am political expenses for which the section 527(f) tax was paid). a Current year 					
			2a		
			2b 2c		
c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) of nondeductible section 1			3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what port	-		3		
excess does the organization agree to carryover to the reasonable estimate of nondeductible					
	-	-	4		
and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)		· · ·	5		
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affilia 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.	ited gro	up lis	t); Par	t II-A, lir	ies 1 ai

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Schedule C (Form 990 or 990-EZ) 2015

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Part IV Supplemental Information (continued)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

GLO	BAL IMPACT		52-1273585
Pa	rt I Organizations Maintaining Donor Adv	ised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	5.	
2	Aggregate value of contributions to (during year)	3,534,438.	
3	Aggregate value of grants from (during year)	3,534,438.	
4	Aggregate value at end of year	197,330.	
5	Did the organization inform all donors and donor	advisors in writing that the assets held i	in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?	<u></u>	Yes No
Pa	rt II Conservation Easements.	Weell on Form 000 Bort IV line 7	
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the		of a bistoriaally insurantant land and
	Preservation of land for public use (e.g., rec	· []	of a historically important land area of a certified historic structure
	Protection of natural nabitat Preservation of open space	Freservation C	or a certified filstoric structure
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution in	the form of a conservation
2	easement on the last day of the tax year.	eld a qualified conservation contribution in	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified		2c
d	Number of conservation easements included in (c	* *	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, train		ated by the organization during the
	tax year >	•	
4	Number of states where property subject to conse	ervation easement is located 🕨	
5	Does the organization have a written policy re-	garding the periodic monitoring, inspecti	on, handling of
	violations, and enforcement of the conservation ea	sements it holds?	Yes 🗀 No
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing cons	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enforcing co	onservation easements during the year
	> \$		
8	Does each conservation easement reported on line	· ·	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of		·
	organization's accounting for conservation easeme		ar statements that describes the
Pa	rt III Organizations Maintaining Collections		Similar Assets.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8.	
 1а	If the organization elected, as permitted under S	FAS 116 (ASC 958), not to report in its r	evenue statement and balance sheet
	works of art, historical treasures, or other simile public service, provide, in Part XIII, the text of the formal services are serviced by the serviced b	ar assets held for public exhibition, educ	cation, or research in furtherance of
b	If the organization elected, as permitted under		
	works of art, historical treasures, or other similar		
	public service, provide the following amounts relat	ing to these items:	
	(i) Revenue included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a	•	
	following amounts required to be reported under S		
a	Revenue included in Form 990, Part VIII, line 1		· · · · · · · · P \$

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

Schedule D (Form 990) 2015

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GLOBAL IMPACT

Sched	fule D (Form 990) 2015								Page 2
Par	t III Organizations Maintainir	ng Collections of	Art, Hist	orical Tre	easures,	or Other Si	imilar Asse	ts (conti	nued)
3	Using the organization's acquisition	n, accession, and	other recor	ds, check	any of the	following th	at are a sign	nificant us	e of its
	collection items (check all that app	ly):							
а	Public exhibition		d	Loan or	exchange	programs			
b	Scholarly research		е	Other					
С	Preservation for future gene	rations	\ <u></u>						
4	Provide a description of the organ		s and expla	ain how the	ey further	the organiza	tion's exemp	t purpose	in Part
	XIII.				•	J	•		
5	During the year, did the organization	on solicit or receive	donations o	f art. histor	ical treasu	res, or other s	similar		
	assets to be sold to raise funds rath							Yes	No
Par	t IV Escrow and Custodial Ar						<u> </u>		
	Complete if the organizat		s" on Form	990, Pari	t IV, line 9), or reported	d an amoun	t on Form	1
	990, Part X, line 21.			, ,	,	,			
1a	Is the organization an agent, truste	e. custodian or oth	er intermed	iary for cor	ntributions	or other asset	s not		
	included on Form 990, Part X?							Yes	X No
b	If "Yes," explain the arrangement in	n Part XIII and com	olete the fol	lowing table	,				
-		The same of the sa	p. 10 to 1		· _		Amount		
С	Beginning balance				10		71110011		
q	Additions during the year								
e	Distributions during the year						····		
f	Ending balance								
-	Did the organization include an am					l etodial accou	nt liability2	Yes	No
	If "Yes," explain the arrangement i	·	·				, _		H"
	t V Endowment Funds.	I Fait Alli. Check it	ere ii tile ez	Apianation n	as been pi	Ovided on Fai	· XIII		
rai	Complete if the organizat	ion answered "Ye	s" on Form	1990 Par	f IV line 1	10			
	Complete if the organization	(a) Current year	(b) Prio		(c) Two yea		nree years back	(e) Four ye	agre hack
		(a) Ourient your	(6) 1 110	i you	(6) 1110 you	15 Edok (4) 11	nec years back	(C) i dai ye	- Duok
1a	Beginning of year balance		1						
b	Contributions						_		
С	Net investment earnings, gains,								
	and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	-							
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage	of the current year	end balance	e (line 1g, c	olumn (a))	held as:			
а	Board designated or quasi-endown	nent ▶	%						
b	Permanent endowment	%							
С	Temporarily restricted endowment								
	The percentages on lines 2a, 2b, a	·							
3 a	Are there endowment funds not in	the possession of t	he organiza	ition that ar	e held an	d administered	d for the		
	organization by:								es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the relate	∍d organizations list∈	ed as require	ed on Sched	dule R?			3b	
4	Describe in Part XIII the intended t		tion's endo	wment fund	s				
Par	t VI Land, Buildings, and Equ Complete if the organiza	ipment.	on For	n 000 Bo	rt IV/ line	110 Soo Eo	rm 000 Bai	+ V line 1	10
	Description of property		r other basis	(b) Cost or o		(c) Accumulate		t ∧, IIIIਦ d) Book value	
		`(inves	stment)	(othe		depreciation	(a, Dook value	
1 a	Land					<u> </u>			
b	Buildings								
C	Leasehold improvements	[8,668.	190,6			3,059.
d	Equipment				8,080.	339,4			3,633.
е	Other			1,01	7,027.	1,008,0	69.		3,958.
Tota	I. Add lines 1a through 1e. (Column		т 990, Part	X, column (B), line 10	c.)	. ▶	965	5,650.

Schedule D (Form 990) 2015

GLOBAL IMPACT

	FOIII 990) 2013			raye J
Part VII	Investments - Other Securities. Complete if the organization answered	"Yes" on Form 990	D. Part IV. line 11b. See Form 990. Pa	art X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market v	
(1) Financi	al derivatives			
	r-held equity interests			
/A\				
(B)				
<u>(C)</u>				
<u>(D)</u>				
<u>(E)</u>				
(G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related. Complete if the organization answered	"Yes" on Form 990	0, Part IV, line 11c. See Form 990, Pa	art X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market v	: value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered	"Yes" on Form 990	D, Part IV, line 11d. See Form 990, Pa	art X, line 15.
	(a) Des	cription		(b) Book value
	TO/FROM OVERSEAS			206,039.
	TO/FROM CFCNCA			1,079,896.
	TO/FROM CFC NYC TO/FROM CFC CENTRAL VA			59,058. 33,241.
(5)	10/FROM CFC CENTRAL VA			33,241.
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B) lir	ne 15.)	>	1,378,234.
Part X	Other Liabilities. Complete if the organization answered line 25.	"Yes" on Form 990	0, Part IV, line 11e or 11f. See Form	990, Part X,
1.	(a) Description of liability	(b) Book valu	ue	
(1) Fede	ral income taxes			
	AIGN FUNDS PAYABLE-MEMBER	14,751,		
	R ADVISED FUNDS PAYABLE	197,		
	R DISTRIBUTIONS PAYABLE	1,347,	801.	
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)	16,297,	104.	

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

GLOBAL IMPACT 52-1273585

Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d Subtract line 2e from line 1	15.
Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
1 1 1 4 0 0 0 0	67.
M NOOM COARDIE AE HOUR BUE I AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	44.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	11.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	11.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	<u> 11.</u>
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	55.
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.	9
SEE PAGE 5	
SEE PAGE 3	

Schedule D (Form 990) 2015

Page 4

Schedule D (Form 990) 2015 GLOBAL IMPACT 52-1273585 Page 5

Part XIII Supplemental Information (continued)

PART X, LINE 2:

UNDER ACCOUNTING STANDARDS CODIFICATION (ASC) 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, GLOBAL IMPACT MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WILL BE SUSTAINED. GLOBAL IMPACT DOES NOT BELIEVE THERE ARE ANY UNRECOGNIZED TAX BENEFITS OR LIABILITIES THAT SHOULD BE RECORDED. FOR THE YEARS ENDED JUNE 30, 2016 AND 2015, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN THE STATEMENTS OF ACTIVITIES. GLOBAL IMPACT IS STILL OPEN TO EXAMINATION BY TAXING AUTHORITIES FROM FISCAL YEAR 2013 FORWARD.

PART XI, LINE 4B:

OTHER AMOUNTS INCLUDED ON RETURN NOT IN FINANCIALS REVENUE:

GLOBAL IMPACT DISTRIBUTION TO MEMBER CHARITIES 18,910,100

CFC-O REVENUE NET OF SHRINKAGE 5,683,644

TOTAL 24,593,744

PART XII, LINE 4B:

OTHER AMOUNTS INCLUDED ON RETURN NOT IN FINANCIALS EXPENSES:

GLOBAL IMPACT DISTRIBUTION TO MEMBER CHARITIES 18,910,100

CFC-O DISTRIBUTION TO CHARITIES 4,218,552

CFC-O EXPENSES 1,465,092

TOTAL 24,593,744

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.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

In the internation about scriedule is provided in the instructions is at www.iis.gov/io/iiisso.

	BAL IMPACT				52-1273585	
Par			Outside the l	Jnited States. Complete	if the organization answe	
1	For grantmakers. Does the organssistance, the grantees' eligibil grants or assistance?	anization mainta ity for the gran	ts or assistance	e, and the selection criter	ia used to award the	X Yes No
2	For grantmakers. Describe in assistance outside the United St	ates.			-	and other
3	Activities per Region. (The followal)	wing Part I, line (b) Number of offices in the region	3 table can be (c) Number of employees, agents, and independent contractors in region	e duplicated if additional sp (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
_(1)	EAST ASIA AND THE PACIFIC			GRANTMAKING	GRANTS	44,418.
(2)	EUROPE			GRANTMAKING	GRANTS	2,063,146.
(3)	NORTH AMERICA			GRANTMAKING	GRANTS	15,000.
_(4)	SOUTH AMERICA			GRANTMAKING	GRANTS	14,635.
_(5)	SOUTH ASIA			GRANTMAKING	GRANTS	23,000.
(6)		-				
_(7)	1	-				
(8)	1					
_(9)						
<u>(10)</u>		-				
(11)	1					
(12)						
<u>(13)</u>						
<u>(14)</u>						
<u>(15)</u>						
<u>(16)</u>						
(17)						
3a b						2,160,199.

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

Schedule F (Form 990) 2015

2,160,199.

Schedule F (Form 990) 2015

Part	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
(1)	And the second s		EAST ASIA/PACIFIC	GENERAL SUPP	15,000.	CHECK & WIRE				
(2)			EAST ASIA/PACIFIC	GENERAL SUPP	20,000.	CHECK & WIRE				
(3)	A Market Marchite Control of the market and the control of the con		EAST ASIA/PACIFIC	GENERAL SUPP	8,918.	CHECK & WIRE				
(4)			EUROPE/ICELAND/GREENLAND	GENERAL SUPP	6,650.	CHECK & WIRE				
(5)			EUROPE/ICELAND/GREENLAND	GENERAL SUPP	249,552.	CHECK & WIRE				
(6)			EUROPE/ICELAND/GREENLAND	GENERAL SUPP	253,243.	CHECK & WIRE				
(7)			EUROPE/ICELAND/GREENLAND	GENERAL SUPP	1,553,701.	CHECK & WIRE				
(8)			NORTH AMERICA	GENERAL SUPP	15,000.	CHECK & WIRE				
(9)			SOUTH AMERICA	GENERAL SUPP	14,635.	CHECK & WIRE				
(10)		The Property of the Control of the C					***************************************			
(11)										
(12)										
(13)										
(14)										
(15)		despective of the second secon								
(16)										
	Enter total number of recipient of the lRS, or for which the gran								6.	
	Enter total number of other orga								4.	

Schedule F (Form 990) 2015

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 Part III can be duplicated if additional space is needed. (e) Manner of (f) Amount of non-cash (g) Description of non-cash (h) Method of (c) Number of recipients valuation (book, FMV, appraisal, other) (d) Amount of cash grant (a) Type of grant or assistance (b) Region cash disbursement assistance assistance (1) INDIVIDUAL EAST ASIA/PACIFIC CHECK/WIRE (4) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)(15)(16)

Schedule F (Form 990) 2015

(17)

(18)

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GLOBAL IMPACT

Schedule F (Form 990) 2015

Part	V 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; do not 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; do not file with Form 990)	Yes	X	No

Schedule F (Form 990) 2015

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Part V Supplemental Information

Complete this part to 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).

PARTS I, II AND III:

THE ORGANIZATION USES THE ACCRUAL BASIS OF ACCOUNTING TO ACCOUNT FOR

EXPENDITURES AND GRANTS REPORTED UNDER PARTS I, II AND III.

PART I DESCRIPTION OF PROCEDURE FOR MONITORING USE OF FUNDS

THE ORGANIZATION USES A COMBINATION OF AN ANNUAL RECERTIFICATION PROCESS

AND THIRD PARTY VENDORS TO ENSURE COMPLIANCE.

Department of the Treasury

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

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

Open to Public Inspection

OMB No. 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

Employer identification number

GLOBAL IMPACT Part I General Information on Grants an	d Assistanc	e				52-1273585)
Does the organization maintain records to s			e grants or assista	nce the grantees	' eligibility for the gran	ts or assistance and	
the selection criteria used to award the gran							X Yes No
2 Describe in Part IV the organization's proce							
					plete if the organiz	ation answered "V	ee" on Form
Part II Grants and Other Assistance to D 990, Part IV, line 21, for any recip		_			•		es official
930, I art IV, line 21, for any recip	dent that let	elved more tri	an \$5,000. 1 ait ii	can be duplicat	ed ii additioriai spa	ice is needed.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) 360 YOUTH SVCS							
1305 W. OSWEGO RD NAPERVILLE, IL 60540	36-2936229	501(C)(3)	7,990.				GENERAL SUPPORT
(2) ACCION INTL							
10 FAWCETT ST CAMBRIDGE, MA 02138	13-2535763	501(C)(3)	7,489.				GENERAL SUPPORT
(3) AFRICAN MEDICAL							
4 W. 43RD ST, 2ND FLR NEW YORK, NY 10036	13-1867411	501(C)(3)	17,890.				GENERAL SUPPORT
(4) AFRICARE							
440 R ST, N. W. WASHINGTON, DC 20001	23-7116952	501(C)(3)	56,292.				GENERAL SUPPORT
(5) AID FOR AFRICA							
P.O. BOX 8734 TOPEKA, KS 66608	06-1703295	501(C)(3)	31,900.				GENERAL SUPPORT
(6) ALCOA							
201 ISABELLA ST PITTSBURGH, PA 15212	25-1128857	501(C)(3)	291,251.				GENERAL SUPPORT
(7) ALSAC/ST. J CHILDREN'S RES HOSP							
501 ST. JUDE'S PL MEMPHIS, TN 38105	35-1044585	501(C)(3)	5,728.				GENERAL SUPPORT
(8) ALZHEIMER'S ASSOC CTR OHIO CHPT							
1379 DUBLIN RD COLUMBUS, OH 43215	31-0996236	501(C)(3)	8,004.				GENERAL SUPPORT
(9) AMERICAN DIABETES ASSOC INC							
1701 N. BEAUREGARD ST ALEXANDRIA, VA 22311	13-1623888	501(C)(3)	8,028.				GENERAL SUPPORT
(10) AMERICAN HEART ASSOCIATION							
7272 GREENVILLE AVE DALLAS, TX 75231	13-5613797	501(C)(3)	12,544.				GENERAL SUPPORT
(11) AMERICAN HIMALAYAN FOUNDATION							
909 MONTGOMERY ST SAN FRANCISCO, CA 94133	94-2951480	501(C)(3)	12,096.				GENERAL SUPPORT
(12) AMERICAN JEWISH WORLD SERVICE							
45 W 36TH ST NEW YORK, NY 10018	22-2584370	501(C)(3)	44,182.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) ar	nd governmen	t organizations	listed in the line 1 t	able			
3 Enter total number of other organizations	listed in the li	ne 1 table	<i></i>				

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

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

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

OMB No. 1545-0047 2015

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

Open to Public Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

GLOBAL IMPACT						52-1273585	
Part I General Information on Grants an	d Assistanc	:e					
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's process 	ubstantiate the ts or assistand dures for mo	ne amount of the ce?	of grant funds in the	United States.			X Yes N
Part II Grants and Other Assistance to D 990, Part IV, line 21, for any recip							es" on Form
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICAN NATIONAL RED CROSS							
P.O. BOX 37295 WASHINGTON, DC 20013	53-0196605	501 (C) (3)	161,046.				GENERAL SUPPORT
(2) AMERICAN NEAR EAST REFUGEE AID							
1111 14TH ST., NW WASHINGTON, DC 20005	52-0882226	501(C)(3)	14,544.				GENERAL SUPPORT
(3) AMERICAN REFUGEE COMMITTEE							
615 1ST AVE NE STE 500	36-3241033	501(C)(3)	34,578.				GENERAL SUPPORT
(4) AMER. SOCTY FOR THE PREV. OF CRLTY TO ANIMA							
424 E. 92ND ST NEW YORK, NY 10128	13-1623829	501(C)(3)	9,142.				GENERAL SUPPORT
(5) AMERICARES FOUNDATION							
88 HAMILTON AVE STAMFORD CT, CT 06902	06-1008595	501(C)(3)	144,253.				GENERAL SUPPORT
(6) AMERICA'S CHARITIES							
PO BOX 75083 BALTIMORE, MD 21275	54-1517707	501(C)(3)	135,941.				GENERAL SUPPORT
(7) ANIMAL CHARITIES OF AMERICA							
PO BOX 45754 SAN FRANCISCO, CA 94145	94-3193389	501(C)(3)	269,809.				GENERAL SUPPORT
(8) ARCHDIOCESE FOR MILITARY SVC USA							
1025 MICHIGAN AVE., NE WASHINGTON, DC 20017	13-1624090	501(C)(3)	29,310.				GENERAL SUPPORT
(9) ASHOKA						****	
1700 N. MOORE ST # 2000 ARLINGTON, VA 22209	51-0255908	501(C)(3)	8,224.				GENERAL SUPPORT
(10) ATCHISON UNITED WAY BOARD							
625 COMMERCIAL ST #7 ATCHISON, KS 66002	48-6107689	501(C)(3)	16,222.				GENERAL SUPPORT
(11) ATLANTA COMMUNITY FOOD BANK INC							
732 JOSEPH E LOWERY BLVD ATLANTA, GA 30318	58-1376648	501(C)(3)	6,720.				GENERAL SUPPORT
(12) BARAT ACADEMY							
17815 WILD HORSE CREEK RD	20-2666579	501(C)(3)	7,000.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) an	d governmer	t organizations	listed in the line 1 t	able			

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

Schedule I (Form 990) (2015)

5E1288 1.000

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

OMB No. 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

GLOBAL IMPACT						52-1273585	
Part I General Information on Grants an	d Assistanc	е					
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce 	ts or assistand dures for mor	ce?	of grant funds in the	United States.			X Yes No
Part II Grants and Other Assistance to D 990, Part IV, line 21, for any recip							S OII FOIIII
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BARTLETT ARBORETUM ASSOC INC							
151 BROOKDALE RD STAMFORD, CT 06903	06-6079591	501(C)(3)	7,155.				GENERAL SUPPORT
(2) BICYCLES AGAINST POVERTY							
244 FIFTH AVE NEW YORK, NY 10001	27-1175814	501(C)(3)	18,187.				GENERAL SUPPORT
(3) BOURBON COUNTY UNITED WAY	_						
PO BOX 286 FORT SCOTT, KS 66701	23-7299984	501(C)(3)	9,045.				GENERAL SUPPORT
(4) BOY SCOUTS OF AMERICA							
1020 SE MONROE TOPEKA, KS 66612	48-0543748	501(C)(3)	18,565.				GENERAL SUPPORT
(5) BOY SCOUTS OF AMERICA - ALOHA	_						
1325 WALNUT HILL LN IRVING, TX 75015	99-0073482	501(C)(3)	15,588.				GENERAL SUPPORT
(6) BOY SCOUTS OF AMERICA - TRANSATLANTIC							
UNIT 31301 BOX 25 APO, AE 09613	98-0000121	501(C)(3)	17,547.				GENERAL SUPPORT
(7) BOYS & GIRLS CLUB OF LAWRENCE							
1520 HASKELL AVE LAWRENCE, KS 66044	23-7296824	501(C)(3)	5,670.				GENERAL SUPPORT
(8) BOYS & GIRLS CLUB OF HARFORD COUNTY MD INC							
100 EAST BEL AIR AVE ABERDEEN, MD 21001	52-1701612	501(C)(3)	7,920.				GENERAL SUPPORT
(9) BOYS AND GIRLS CLUB OF TOPEKA							
550 SE 27TH ST TOPEKA, KS 66605	48-0636732	501(C)(3)	36,053.				GENERAL SUPPORT

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

06-1362705 501(C)(3)

20-1348415 501(C)(3)

81-0648432 501(C)(3)

Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2015)

GENERAL SUPPORT

GENERAL SUPPORT

GENERAL SUPPORT

13,245.

6,033.

198,264.

(11) BUILD A BETTER WORLD

(10) BRIDGEPORT RESCUE MISSION INC

481 PEQUONNOCK ST BRIDGEPORT, CT 06604

125 WASHINGTON ST. #201 SALEM, MA 01970

(12) CANCERCURE OF AMERICA- CARE UNDERSTAND RESE PO BOX 45754 SAN FRANCISCO, CA 94145

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

2015

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
GLOBAL IMPACT

Part I. General Information on Grants and Assistance

Employer identification number
52-1273585

Part II Grants and Other Assistance to I 990, Part IV, line 21, for any recip					plete if the organiz ed if additional spa		es" on Form
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran
(1) CAPITAL AREA HUMANE SOCIETY							
3015 SCIOTO-DARBY EXEC CT	31-4379492	501(C)(3)	7,812.				GENERAL SUPPORT
(2) CAPITAL UNIVERSITY							
1 COLLEGE & MAIN COLUMBUS, OH 43209	31-4379435	501(C)(3)	10,338.				GENERAL SUPPORT
(3) CAPPER FOUNDATION							
3500 SW 10TH AVE TOPEKA, KS 66604	48-0543745	501(C)(3)	15,432.				GENERAL SUPPORT
(4) CARE							
GIFT CENTER MERRIFIELD, VA 22116	13-1685039	501(C)(3)	360,330.				GENERAL SUPPORT
(5) CATHOLIC CHARITIES OF FAIRFIELD							
238 JEWETT AVE BRIDGEPORT, CT 06606	06-0653053	501(C)(3)	10,970.				GENERAL SUPPORT
(6) CATHOLIC COMMUNITY FOUNDATION							
1404 E 9TH ST 8TH FL CLEVELAND, OH 04414	34-1908579	501(C)(3)	10,000.				GENERAL SUPPORT
(7) CATHOLIC MEDICAL MISSION BOARD							
10 WEST 17TH ST NEW YORK, NY 10011	13~5602319	501(C)(3)	9,778.				GENERAL SUPPORT
(8) CATHOLIC RELIEF SERVICES							
228 WEST LEXINGTON ST BALTIMORE, MD 21201	13-5563422	501(C)(3)	26,498.				GENERAL SUPPORT
(9) CATHOLIC SERVICE ORGANIZATIONS OF AMERICA				****			
PO BOX 45754 SAN FRANCISCO, CA 94145	45-1679647	501(C)(3)	143,194.				GENERAL SUPPORT
10) CENTER OF HOPE INC							
400 N EMPORIA ST WICHITA, KS 67202	48-0578624	501(C)(3)	15,259.				GENERAL SUPPORT
11) AMERICAS MOST COST-EFFECTIVE CHARITIES				-			
PO BOX 45754 SAN FRANCISCO, CA 94145	27-3132554	501(C)(3)	100,356.	:			GENERAL SUPPORT
12) CHARITIES UNDER 5% OVERHEAD							
PO BOX 45754 SAN FRANCISCO, CA 94145	27-3132492	501 (C) (3)	27,843.				GENERAL SUPPORT

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

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

2015

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

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Employer identification number

GLOBAL IMPACT	-l A					52-1273585)
Part I General Information on Grants an							
1 Does the organization maintain records to s							
the selection criteria used to award the grant					• • • • • • • • • • • • • • • • • • •		X Yes No
2 Describe in Part IV the organization's proced	dures for mo	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to D		-			•		es" on Form
990, Part IV, line 21, for any recip	ient that red	ceived more th	an \$5,000. Part II	can be duplicat	ed if additional spa	ce is needed.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) DO UNTO OTHERS AMERICAS: EMERGENCY RELIEF E							
PO BOX 45754 SAN FRANCISCO, CA 94145	94-3148590	501(C)(3)	67,665.				GENERAL SUPPORT
(2) CHILD AID USA							
125 WASHINGTON ST, STE 201 SALEM, MA 01970	26-3061082	501(C)(3)	5,296.				GENERAL SUPPORT
(3) CHILDAID INTERNATIONAL							
125 WASHINGTON ST, STE 201 SALEM, MA 01970	20-1358458	501(C)(3)	19,773.				GENERAL SUPPORT
(4) CHILDFUND INTERNATIONAL							
2821 EMERYWOOD PKWY RICHMOND, VA 23294	54-0536100	501(C)(3)	7,943.				GENERAL SUPPORT
(5) CHILDREN FIRST-AMERICA'S CHARITIES							
PO BOX 75083 BALTIMORE, MD 21275	30-0186795	501(C)(3)	141,330.				GENERAL SUPPORT
(6) CHILDREN INTERNATIONAL							
2000 E. RED BRIDGE RD KANSAS CITY, MO 64131	44-6005794	501(C)(3)	25,065.				GENERAL SUPPORT
(7) CHILDREN'S CHARITIES AMERICA							
PO BOX 45754 SAN FRANCISCO, CA 94145	94-3148588	501(C)(3)	175,532.				GENERAL SUPPORT
(8) CHILDREN'S MEDICAL CHARITIES OF AMERICA							
PO BOX 45754 SAN FRANCISCO, CA 94145	27-0093393	501(C)(3)	118,633.				GENERAL SUPPORT
(9) CHRISTIAN AID USA							
125 WASHINGTON ST. STE 201 SALEM, MA 01970	26-3070569	501(C)(3)	5,825.				GENERAL SUPPORT
(10) CHRISTIAN CHARITIES USA							
PO BOX 45754 SAN FRANCISCO, CA 94145	94-3255961	501(C)(3)	134,183.				GENERAL SUPPORT
(11) CHRISTIAN CHILDREN'S CHARITIES							
PO BOX 45754 SAN FRANCISCO, CA 94145	45-2919697	501(C)(3)	33,863.	_			GENERAL SUPPORT
(12) CHRISTIAN LIFE SCHOOL FDN INC							
10700 75TH ST KENOSHA, WI 53142	39-2003070	501(C)(3)	21,667.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 to	able			
3 Enter total number of other organizations I	isted in the li	ne 1 table	<i></i>		<i></i>		

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

2015

OMB No. 1545-0047

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

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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Inspection
Employer identification number

GLOBAL IMPACT						52-127358	5
Part I General Information on Grants an	d Assistanc	е					
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the gran	ts or assistand	æ?					X Yes No
2 Describe in Part IV the organization's proceed	dures for moi	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to D 990, Part IV, line 21, for any recip							es" on Form
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CHRISTIAN SERVICE CHARITIES							
P.O. BOX 79704 BALTIMORE, MD 21279	94-3193374	501(C)(3)	314,622.				GENERAL SUPPORT
(2) CHURCH WORLD SERVICE/CROP							
P.O. BOX 968 ELKHART, IN 46515	13-4080201	501(C)(3)	13,922.				GENERAL SUPPORT
(3) CLEVELAND MUSEUM OF ART							
11150 EAST BLVD CLEVELAND, OH 44106	34-0714336	501(C)(3)	9,752.				GENERAL SUPPORT
(4) COLUMBUS COUNCIL ON WORLD AFFAIRS							
51 JEFFERSON AVE COLUMBUS, OH 43215	51-0180760	501(C)(3)	5,228.				GENERAL SUPPORT
(5) COLUMBUS MUSEUM OF ART							
480 E BROAD ST COLUMBUS, OH 43215	31-4379447	501(C)(3)	5,932.				GENERAL SUPPORT
(6) COMMUNITY HEALTH CHARITIES							
PO BOX 758858 BALTIMORE, MD 21275	13-6167225	501(C)(3)	518,746.				GENERAL SUPPORT
(7) COMMUNITY HEALTH CHARITIES OF CA							
PO BOX 758858 BALTIMORE, MD 21275	94-1732873	501(C)(3)	5,765.				GENERAL SUPPORT
(8) COMMUNITY HEALTH MINISTRY							
407 ASH ST WAMEGO, KS 66547	75-2974854	501(C)(3)	14,870.				GENERAL SUPPORT
(9) COMPASSION INTERNATIONAL							
12290 VOYAGER PKWY	36-2423707	501(C)(3)	18,606.				GENERAL SUPPORT
(10) CONNECTICUT HUMANE SOCIETY							
701 RUSSELL RD NEWINGTON, CT 06111	06-0667605	501(C)(3)	6,908.				GENERAL SUPPORT
(11) CONNECTICUT SCIENCE CENTER INC							
250 COLUMBUS BLVD HARTFORD, CT 06103	06-1538101	501 (C) (3)	14,600.				GENERAL SUPPORT
(12) CONSERVATION&PRESERVATION CHARITIES OF AMER							
PO BOX 45754 SAN FRANCISCO, CA 94145	94-3217738	501(C)(3)	74,707.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) an	d governmer	t organizations	listed in the line 1 t	able			

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

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

3 Enter total number of other organizations listed in the line 1 table

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

2015

OMB No. 1545-0047

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Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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Employer identification number

 Does the organization maintain records to si the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistant	ce?					X Yes No
Part II Grants and Other Assistance to D 990, Part IV, line 21, for any recip		_			,		es" on Form
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COUNTERPART INTERNATIONAL							
2345 CRYSTAL DR,#301 ARLINGTON, VA 22202	13-6183605	501(C)(3)	35,439.				GENERAL SUPPORT
(2) COVENANT DAY SCHOOL INC							
800 FULLWOOD RD MATTHEWS, NC 28105	56-1656570	501(C)(3)	7,500.				GENERAL SUPPORT
(3) DAVIS PHINNEY FOUNDATION							
1722 14TH ST., #150 BOULDER, CO 80302	20-0813566	501(C)(3)	5,500.				GENERAL SUPPORT
_(4) DESERT RESEARCH INSTITUTE CTR FOR INT'L WAT							
2215 RAGGIO PKWY RENO, NV 89512	43-1526946	501(C)(3)	6,202.				GENERAL SUPPORT
_(5) DIABETES CHARITIES AMERICA							
125 WASHINGTON ST, # 201 SALEM, MA 01970	20-1468898	501(C)(3)	17,037.				GENERAL SUPPORT
(6) DIAMOND BASEBALL FOUNDATION							
200 CENTER PARK DR KNOXVILLE, TN 37922	45-4443436	501(C)(3)	10,500.				GENERAL SUPPORT
(7) DIRECT RELIEF							-
27 S. LA PATERA LN SANTA BARBARA, CA 93117	95-1831116	501(C)(3)	6,506.				GENERAL SUPPORT
(8) DOCTORS WITHOUT BORDERS USA INC							
P.O. BOX 5030 HAGERSTOWN, MD 21741	13-3433452	501(C)(3)	3,057,993.				GENERAL SUPPORT
(9) DRAKE UNIVERSITY							
2507 UNIV AVE DES MOINES, IA 50311	42-0680460	501(C)(3)	19,601.				GENERAL SUPPORT
(10) EARTHSHARE							
DEPT. 4011 WASHINGTON, DC 20042	52-1601960	501(C)(3)	101,564.				GENERAL SUPPORT
(11) ECPAT-USA END CHILD PROSTITUTION, PORNOGRAPH							
30 3RD AVE. BROOKLYN, NY 11217	13-3755580	501(C)(3)	8,727.				GENERAL SUPPORT
(12) EDUCATE AMERICA THE EDUCATION SCHOOL SUPPOR							
PO BOX 45754 SAN FRANCISCO, CA 94145	94-3193387	501(C)(3)	50,771.				GENERAL SUPPORT

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

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

2015

OMB No. 1545-0047

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▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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Employer identification number

1 Does the organization maintain records to	substantiate th	ne amount of the	e grants or assistar	nce, the grantees	' eligibility for the grant	ts or assistance. and					
the selection criteria used to award the gra							X Yes				
2 Describe in Part IV the organization's proc											
Part II Grants and Other Assistance to					unlote if the erganize	ation answered "V	os" on Form				
							28 011 F01111				
990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance				
(1) ENGINEERS WITHOUT BORDERS USA											
1021 33RD ST DENVER, CO 80205	84-1589324	501(C)(3)	10,132.				GENERAL SUPPORT				
(2) EPISCOPAL HIGH SCHOOL											
1200 N QUAKER LN ALEXANDRIA, VA 22302	54-0506326	501(C)(3)	7,500.				GENERAL SUPPORT				
(3) EPISCOPAL RELIEF AND DEVELOPMENT											
815 2ND AVE NEW YORK, NY 10017	73-1635264	501(C)(3)	52,855.				GENERAL SUPPORT				
(4) FAITH MISSION INC				-							
500 W WILSON BRIDGE RD	31-0809759	501(C)(3)	5,131.				GENERAL SUPPORT				
(5) FAMILY LIFE CENTER OF BUTLER COUNTY INC											
115 S WASHINGTON ST EL DORADO, KS 67042	48-1087496	501(C)(3)	6,421.				GENERAL SUPPORT				
(6) FEED MY STARVING CHILDREN											
401 93RD AVE NW COON RAPIDS, MN 55433	41-1601449	501(C)(3)	11,090.				GENERAL SUPPORT				
(7) FEEDING CHILDREN EVERYWHERE											
830 S. RONALD REAGAN BLVD	27-3274349	501(C)(3)	6,315.				GENERAL SUPPORT				
(8) FINCA INTERNATIONAL, INC.											
1201 15TH ST, NW 8TH FL	13-3240109	501(C)(3)	21,835.				GENERAL SUPPORT				
(9) FLINTHILLS BREADBASKET INC											
905 YUMA ST MANHATTAN, KS 66502	48-0952757	501(C)(3)	14,104.				GENERAL SUPPORT				
(10) FOOD FOR THE POOR INC											
6401 LYONS RD COCONUT CREEK, FL 33073	59-2174510	501(C)(3)	21,375.				GENERAL SUPPORT				
11) FREEDOM FROM HUNGER											
PO BOX 2000 DAVIS, CA 95617	95-1647835	501(C)(3)	17,088.				GENERAL SUPPORT				
(12) FRIENDS OF HOSPICE OF JEFFERSON COUNTY											
PO BOX 101 VALLEY FALLS, KS 66088	74-2824423	501 (C) (3)	5,678.				GENERAL SUPPORT				

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

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

2015

OMB No. 1545-0047

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

Open to Public Inspection

Employer identification number

52-1273585

Department of the Treasury Internal Revenue Service Name of the organization

GLOBAL IMPACT

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

General Information on Grants and Assistance Part I 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (g) Description of (h) Purpose of grant (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(book, FMV, appraisal, or government if applicable cash assistance non-cash assistance or assistance grant other) (1) FULBRIGHT ASSOCIATION INC 52-1821935 | 501(C)(3) 1320 19TH ST, #350 WASHINGTON, DC 20036 5,880. GENERAL SUPPORT (2) GEORGE WASHINGTON UNIVERSITY 2033 K ST NW #300 WASHINGTON, DC 20052 53-0196584 501(C)(3) 5,395. GENERAL SUPPORT (3) GLOBAL IMPACT P.O. BOX 409616 ATLANTA, GA 30384 52-1273585 501(C)(3) 491,093. GENERAL SUPPORT (4) GOODCITY 36-3467921 |501(C)(3) 5049 W HARRISON CHICAGO, IL 60644 75,800. GENERAL SUPPORT (5) GRACE UNITED METHODIST CHURCH 501(C)(3) 300 E GARTNER RD NAPERVILLE, IL 60540 36-2340309 6,200. GENERAL SUPPORT (6) HACKLEY SCHOOL 293 BENEDICT AVE TARRYTOWN, NY 10591 13-1740452 501(C)(3) 7,500. GENERAL SUPPORT (7) HANDICAP INTERNATIONAL 6930 CARROLL AVE TAKOMA PARK, MD 20912 55-0914744 501(C)(3) 21,532. GENERAL SUPPORT (8) HANDS OFFERING HOPE FOUNDATION INC 3 PARKLANDS DR #103 DARIEN, CT 06820 45-3798076 501(C)(3) 6,800. GENERAL SUPPORT (9) HARDIN VALLEY ACADEMY ATHLETIC COUNCIL 11345 HARDIN VALLEY RD KNOXVILLE, TN 37932 51-0670175 |501(C)(3) 5,500. GENERAL SUPPORT (10) HARVESTERS 215 SE QUINCY TOPEKA, KS 66603 43-1208665 501(C)(3) 40,893. GENERAL SUPPORT (11) HEALTH & MEDICAL RESEARCH CHARITIES OF AMER PO BOX 45754 SAN FRANCISCO, CA 94145 94-3217739 501(C)(3) 276,104. GENERAL SUPPORT

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

Schedule I (Form 990) (2015)

GENERAL SUPPORT

(12) HEALTH FIRST - AMERICA'S CHARITIES
PO BOX 75083 BALTIMORE, MD 21275

30-0186796 501(C)(3)

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

65,720.

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Inspection Employer identification number

						52-1273585	
Part I General Information on Grants ar	d Assistanc	<u>e</u>					
 Does the organization maintain records to see the selection criteria used to award the grant Describe in Part IV the organization's process. 	ts or assistand	æ?					X Yes No
Part II Grants and Other Assistance to I 990, Part IV, line 21, for any recip	Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com			es" on Form
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HEIFER PROJECT INTERNATIONAL							
1 WORLD AVE LITTLE ROCK, AR 72202	35-1019477	501(C)(3)	361,100.				GENERAL SUPPORT
(2) HELEN KELLER INTERNATIONAL							
352 PARK AVE S. NEW YORK, NY 10010	13-5562162	501(C)(3)	8,193.				GENERAL SUPPORT
(3) HELPAGE USA							
601 E ST, NW WASHINGTON, DC 22249	27-1071179	501(C)(3)	30,899.				GENERAL SUPPORT
(4) HELPING HANDS HUMANE SOCIETY INC							
5720 SW 21ST ST TOPEKA, KS 66604	48-0597124	501(C)(3)	46,553.				GENERAL SUPPORT
(5) HILLIARD BASEBALL ASSOCIATION INC							
P.O. BOX 202 HILLIARD, OH 43026	31-1022221	501(C)(3)	9,000.				GENERAL SUPPORT
(6) HIMALAYAN CATARACT PROJECT							
PO BOX 55 WATERBURY, VT 05676	03-0362926	501(C)(3)	14,270.				GENERAL SUPPORT
(7) HISPANIC & LATINO CHARITIES TH							
PO BOX 45754 SAN FRANCISCO, CA 94145	68-0455509	501(C)(3)	26,799.				GENERAL SUPPORT
(8) HUMAN & CIVIL RIGHTS							
125 WASHINGTON ST #201 SALEM, MA 01970	94-3193388	501(C)(3)	27,297.				GENERAL SUPPORT
(9) HUMAN SERVICE CHARITIES AMERIC							
44330 PREMIER PL, #220 ASHBURN, VA 20147	94-3240353	501(C)(3)	25,617.				GENERAL SUPPORT
10) INSPIRICA INC							
141 FRANKLIN ST STAMFORD, CT 06901	06-1172535	501(C)(3)	8,725.				GENERAL SUPPORT
11) INTERNATIONAL CENTER FOR RESEARCH ON WOMEN							
1120 20TH ST NW #500 N WASHINGTON, DC 20036	52-1081455	501(C)(3)	6,934.				GENERAL SUPPORT
12) INTERNATIONAL JUSTICE MISSION							
PO BOX 58147 WASHINGTON, DC 20037	54-1722887	501(C)(3)	25,175.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) as	nd governmen	t organizations	listed in the line 1 t	able		>	

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

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

2015

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number GLOBAL IMPACT 52-1273585 **General Information on Grants and Assistance** Part I 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (a) Description of (c) IRC section (d) Amount of cash (e) Amount of non (h) Purpose of grant (book, FMV, appraisal, other) if applicable or government grant cash assistance non-cash assistance or assistance (1) INTERNATIONAL MEDICAL CORPS 501 (C) (3) 1919 SANTA MONICA BLVD 95-3949646 16,814. GENERAL SUPPORT (2) INTERNATIONAL ORTHODOX 110 WEST RD BALTIMORE, MD 21204 25-1679348 501(C)(3) 45,933 GENERAL SUPPORT (3) INTERNATIONAL RELIEF TEAMS 501(C)(3) 4560 ALVARADO CANYON RD SAN DIEGO, CA 92120 33-0412751 11,825. GENERAL SUPPORT (4) INTERNATIONAL RESCUE COMMITTEE 122 E. 42ND ST.12TH FL NEW YORK, NY 10168 13-5660870 501(C)(3) 86,422. GENERAL SUPPORT (5) JUNIOR ACHIEVEMENT OF KANSAS 3735 SW WANAMAKER RD TOPEKA, KS 66610 48-0731855 501(C)(3) 14,806. GENERAL SUPPORT (6) K9S FOR WARRIORS 260 SROSCOE BLVD PONTE VEDRA BCH, FL 32082 27-5219467 501(C)(3) 20,364. GENERAL SUPPORT (7) KANSAS CHILDREN'S SERVICE LEAGUE 215 W 6TH EMPORIA, KS 66801 48-0543749 501(C)(3) 9,447. GENERAL SUPPORT (8) KANSAS FOOD BANK WAREHOUSE INC 1919 E DOUGLAS AVE WICHITA, KS 67211 48-0959213 501 (C) (3) 29,445. (9) KANSAS HUMANE SOCIETY OF WICHITA INC 3313 N. HILLSIDE WICHITA, KS 67219 48-0554339 501(C)(3) 28,284. (10) KANSAS STATE UNIVERSITY FOUNDATION 2323 ANDERSON AVE MANHATTAN, KS 66502 501(C)(3) 7,890. GENERAL SUPPORT (11) KIDS IN NEED INC 3457 SW JARDINE TER TOPEKA, KS 66611 48-1248446 501(C)(3) 18,875. GENERAL SUPPORT (12) KIDS SAVING THE RAINFOREST 06-1594980 501(C)(3) 3790 EL CAMINO REAL #206 5,427. GENERAL SUPPORT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Inspection
Employer identification number

GLOBAL IMPACT						52-1273585)
Part I General Information on Grants an	d Assistanc	е					
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce Part II Grants and Other Assistance to D 	ts or assistand dures for mor Domestic Or	ce? nitoring the use ganizations ar	of grant funds in the	e United States.	plete if the organiz	ation answered "Ye	X Yes No
990, Part IV, line 21, for any recip 1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	an \$5,000. Part II (d) Amount of cash grant	(e) Amount of non- cash assistance	ted if additional spa (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LANDESA							
1424 FOURTH AVE SEATTLE, WA 98101	91-1158970	501(C)(3)	5,113.				GENERAL SUPPORT
(2) LAWRENCE COMMUNITY SHELTER INC							
3655 E. 25TH ST. LAWRENCE, KS 66046	74-2848203	501(C)(3)	10,578.				GENERAL SUPPORT
(3) LAWRENCE HUMANE SOCIETY INC							
1805 E 19TH ST LAWRENCE, KS 66046	48-0641821	501(C)(3)	8,017.				GENERAL SUPPORT
(4) LETS HELP INC							
200 S. KANSAS AVE. TOPEKA, KS 66603	48-0800447	501(C)(3)	9,805.				GENERAL SUPPORT
(5) LEUKEMIA & LYMPHOMA SOCIETY/SOUTH OHIO CHAP							
4370 GLENDALE MILFORD RD	13-5644916	501(C)(3)	6,675.				GENERAL SUPPORT
(6) LIFEHOUSE CHILD ADVOCACY CENTER INC							
303 S KANSAS AVE TOPEKA, KS 66603	48-1234465	501(C)(3)	8,711.				GENERAL SUPPORT
(7) LIFETIME ASSISTANCE FOUNDATION INC							
425 PAUL RD ROCHESTER, NY 14624	13-3754497	501(C)(3)	5,820.				GENERAL SUPPORT
(8) LUTHERAN WORLD RELIEF							
PO BOX 17061 BALTIMORE, MD 21298	13-2574963	501(C)(3)	278,685.				GENERAL SUPPORT
(9) MAESTRO CARES NFP							
1459 W. HUBBARD ST CHICAGO, IL 60642	45-3706112	501(C)(3)	79,603.				GENERAL SUPPORT
(10) MAP INTERNATIONAL							
4700 GLYNCO PKWY BRUNSWICK, GA 31525	36-2586390	501(C)(3)	7,270.				GENERAL SUPPORT
(11) MEALS ON WHEELS SHAWNEE & JEFFERSON COUNTY							
2701 SW E. CIRCLE DR TOPEKA, KS 66606	48-0792685	501(C)(3)	24,958.				GENERAL SUPPORT
(12) MEDICAL MISSIONARIES INC							
9590 SURVEYOR CT MANASSAS, VA 20110	54-1990595	501(C)(3)	10,000.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		 •	
3 Enter total number of other organizations	listed in the li	ne 1 table		<u> </u>		.	

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

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

OMB No. 1545-0047
2015

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number GLOBAL IMPACT 52-1273585 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (a) Description of (c) IRC section (d) Amount of cash (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal. or government if applicable cash assistance non-cash assistance or assistance orant other) (1) MEDICAL RESEARCH CHARITIES 125 WASHINGTON ST, 201 SALEM, MA 01970 94-3148591 501 (C) (3) 86,892. GENERAL SUPPORT (2) MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVE NEW YORK, NY 10065 13-1924236 501(C)(3) 5,209. GENERAL SUPPORT (3) MENTAL HEALTH & ADDICTION NETW 125 WASHINGTON ST. 201 SALEM, MA 01970 20-1358397 501(C)(3) 17,359. GENERAL SUPPORT (4) MERCY CORPS INTERNATIONAL 501 (C) (3) 45 ANKENY ST PORTLAND, OR 97201 91-1148123 63,578. GENERAL SUPPORT (5) METRO EARLY COLLEGE HIGH SCHOOL 1929 KENNY RD COLUMBUS, OH 43210 90-0838465 501 (C) (3) 5,563. GENERAL SUPPORT (6) METROPOLITAN GOLF ASSOCIATION FOUNDATION 49 KNOLLWOOD RD ELMSFORD, NY 10523 13-3637689 501(C)(3) 5,460. GENERAL SUPPORT (7) MIDLAND CARE CONNECTION INC 200 SW FRAZIER CIR TOPEKA, KS 66606 48-0883888 501(C)(3) 30,730 GENERAL SUPPORT (8) MID-OHIO FOODBANK 3960 BROOKHAVEN DR GROVE CITY, OH 43123 31-0865343 501(C)(3) 29,248 GENERAL SUPPORT (9) MILITARY VETERANS & PATRIOTIC SERVICE ORG O PO BOX 45754 SAN FRANCISCO, CA 94145 94-3193418 501(C)(3) 430,085. GENERAL SUPPORT (10) MILITARY OFFICERS ASSOC OF AMERICA SCHLSP F 201 N WASHINGTON ST ALEXANDRIA, VA 22314 54-1659039 501(C)(3) 9,600. GENERAL SUPPORT (11) MILITARY SUPPORT GROUPS OF AMERICA P.O. BOX 45754 SAN FRANCISCO, CA 94145 27-2242752 501(C)(3) 129,833. GENERAL SUPPORT (12) NATIONAL BLACK FEDERATION CHAR 22-3596098 501(C)(3) 11,792. 17 ACADEMY ST NEWARK, NJ 07102 GENERAL SUPPORT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

OMB No. 1545-0047

2015

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

 Does the organization maintain records to set the selection criteria used to award the grant Describe in Part IV the organization's process. 	its or assistand	œ?					X Yes No
Part II Grants and Other Assistance to I 990, Part IV, line 21, for any recip		•					es" on Form
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NATIONAL PUBLIC RADIO							
PO BOX 79540 BALTIMORE, MD 21279	52-0907625	501(C)(3)	21,060.				GENERAL SUPPORT
(2) NEAR EAST FOUNDATION					-		
430-432 CROUSE HINDS HALL	13-1624114	501(C)(3)	6,938.				GENERAL SUPPORT
(3) NORTH COBB CHRISTIAN SCHOOL INC							
4500 LAKEVIEW DR KENNESAW, GA 30144	58-1519089	501(C)(3)	10,000				GENERAL SUPPORT
(4) NORTHWESTERN UNIVERSITY							
1201 DAVIS ST EVANSTON, IL 60208	36-2167817	501(C)(3)	6,000.				GENERAL SUPPORT
(5) OHIO STATE UNIVERSITY FOUNDATION							
1480 W LANE AVE COLUMBUS, OH 43221	31-1145986	501(C)(3)	45,853.				GENERAL SUPPORT
(6) ONE IN CHRIST INC							
12311 W RIDGE CIR INDIANAPOLIS, IN 46236	45-5212818	501(C)(3)	15,893.				GENERAL SUPPORT
(7) OPEN DOOR MISSION							
2828 N 23TH ST E OMAHA, NE 68110	47-0411375	501(C)(3)	6,240.				GENERAL SUPPORT
(8) OPERATION SMILE							
3641 FACULTY BLVD VIRGINIA BEACH, VA 23453	54-1460147	501(C)(3)	67,549.				GENERAL SUPPORT
(9) OPPORTUNITY INTERNATIONAL							
550 W. VAN BUREN CHICAGO, IL 60607	54-0907624	501(C)(3)	8,161.				GENERAL SUPPORT
(10) OTTERBEIN UNIVERSITY							
1 S GROVE ST WESTERVILLE, OH 43081	31-4379532	501(C)(3)	6,132.				GENERAL SUPPORT
(11) OXFAM AMERICA							
226 CAUSEWAY ST,5TH FL BOSTON, MA 02114	23-7069110	501 (C) (3)	156,011.		·		GENERAL SUPPORT
(12) PARTNERS IN FOOD SOLUTIONS							
9000 PLYMOUTH AVE N MINNEAPOLIS, MN 55427	27-5097190	501(C)(3)	6,868.				GENERAL SUPPORT

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

Schedule I (Form 990) (2015)

5E1288 1.000

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number GLOBAL IMPACT 52-1273585

Part I General Information on Grants ar	nd Assistanc	е					
1 Does the organization maintain records to s	substantiate th	ne amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grar	nts or assistand	œ?			<i></i>		X Yes No
2 Describe in Part IV the organization's proce	dures for mo	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to I 990, Part IV, line 21, for any recip							es" on Form
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) PARTNERS IN HEALTH							
888 COMMONWEALTH AVE BOSTON, MA 02215	04-3567502	501(C)(3)	90,024.				GENERAL SUPPORT
(2) PATH							
P.O. BOX 900922 SEATTLE, WA 98109	91-1157127	501(C)(3)	8,804.				GENERAL SUPPORT
(3) PAUL TAYLOR DANCE FOUNDATION INC							
551 GRAND ST NEW YORK, NY 10002	13-2665475	501(C)(3)	7,800.				GENERAL SUPPORT
(4) PITNEY BOWES RELIEF FUND INC							
3001 SUMMER ST,6TH FL STAMFORD, CT 06926	27-3398652	501(C)(3)	93,014.				GENERAL SUPPORT
(5) PLAN USA							
155 PLAN WAY WARWICK, RI 02886	13-5661832	501(C)(3)	19,773.				GENERAL SUPPORT
(6) PROJECT HOPE							
255 CARTER HALL LN MILLWOOD, VA 22646	53-0242962	501(C)(3)	45,559.				GENERAL SUPPORT
(7) PROJECT TOPEKA					-		
1315 SW ARROWHEAD RD TOPEKA, KS 66604	30-0596254	501(C)(3)	21,168.				GENERAL SUPPORT
(8) REALIZED WORTH							
185 SOUTH 8TH ST NOBLESVILLE, IN 46060	27-3417347	501(C)(3)	102,500.				GENERAL SUPPORT
(9) RISE RECOVERY							
PO BOX 15322 SAN ANTONIO, TX 78212	74-2216041	501(C)(3)	8,630.				GENERAL SUPPORT
(10) RONALD MCDONALD HOUSE CHARITIES OF WICHITA				"			
1110 N. EMPORIA ST WICHITA, KS 67214	48-0918101	501(C)(3)	26,029.				GENERAL SUPPORT
(11) ROTARY #4795345							
ONE ROTARY CTR EVANSTON, IL 60201	36-3245072	501(C)(3)	21,390.				GENERAL SUPPORT
(12) ROUNDABOUT THEATRE COMPANY INC							
231 W 39TH ST #1200 NEW YORK, NY 10018	13-6192346	501(C)(3)	10,000.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) as	-	-	listed in the line 1 to	able			•

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

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

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

OMB No. 1545-0047

2015

Department of the Treasury Internal Revenue Service Name of the organization

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

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Open to Public Inspection

Employer identification number

GLOBAL IMPACT						52-1273585	<u> </u>
Part I General Information on Grants a	nd Assistanc	е					
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grai	nts or assistanc	æ?					X Yes No
2 Describe in Part IV the organization's proce	edures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to							es" on Form
990, Part IV, line 21, for any recip	olent that rec	eivea more th	an \$5,000. Paπ II	can be duplicat		T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SACRED HEART UNIVERSITY							
5151 PARK AVE FAIRFIELD, CT 06825	06-0776644	501(C)(3)	5,607.				GENERAL SUPPORT
(2) SALVATION ARMY - COLUMBUS							
PO BOX 06324 COLUMBUS, OH 43206	13-5562351	501(C)(3)	9,863.				GENERAL SUPPORT
(3) SALVATION ARMY WORLD SERVICE OFFICE							
PO BOX 269 ALEXANDRIA, VA 22313	13-2923701	501(C)(3)	182,852.				GENERAL SUPPORT
(4) SANKARA EYE FOUNDATION USA							
1900 MCCARTHY BLVD MILPITAS, CA 95035	77-6141976	501(C)(3)	14,180.				GENERAL SUPPORT
(5) SAVE THE CHILDREN							
501 KINGS HIGHWAY E. #400	06-0726487	501(C)(3)	181,176.				GENERAL SUPPORT
(6) SCOVILLE MEMORIAL LIBRARY ASSOC INC							
38 MAIN ST SALISBURY, CT 06068	06-0653164	501(C)(3)	7,550.				GENERAL SUPPORT
(7) SECOND CHANCE SHELTER							
130 COUNTY RD 398 BOAZ, AL 35957	26-2717351	501(C)(3)	10,000.				GENERAL SUPPORT
(8) SIGHTLIFE							
221 YALE AVE. N.# 450 SEATTLE, WA 98109	23-7051021	501(C)(3)	5,199.				GENERAL SUPPORT
(9) SILICON VALLEY COMMUNITY FDN							
2440 W. EL CAMINO REAL	20-5205488	501(C)(3)	88,502.				GENERAL SUPPORT
(10) SMILE TRAIN							
41 MADISON AVE 28TH FL NEW YORK, NY 10010	13-3661416	501(C)(3)	34,004.				GENERAL SUPPORT
(11) SMOKY ROW BRETHREN CHURCH							
7260 SMOKY ROW RD COLUMBUS, OH 43235	31-0992807	501(C)(3)	22,000.				GENERAL SUPPORT
(12) SOS CHILDREN'S VILLAGES- USA							
1620 I ST NW, #900 WASHINGTON, DC 20006	13-6188433	501(C)(3)	23,123.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) a	nd governmer	t organizations	listed in the line 1 t	able		 >	
3 Enter total number of other organizations	listed in the li	ne 1 table					

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

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

2015

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service
Name of the organization

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

GLOBAL IMPACT 52-1273585 General Information on Grants and Assistance Part I 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (g) Description of (d) Amount of cash (h) Purpose of grant (e) Amount of non-(book, FMV, appraisal, other) or government if applicable cash assistance non-cash assistance or assistance (1) SOUTHERN NEW HAMPSHIRE UNIVERSITY 2500 N RIVER RD MANCHESTER, NH 03106 02-0274509 501(C)(3) 10,000. GENERAL SUPPORT (2) SPORTS CHARITIES USA PO BOX 45754 SAN FRANCISCO, CA 94145 47-0863988 501(C)(3) 33,676. GENERAL SUPPORT (3) ST GABRIELS CHURCH CORPORATION 1 TUDOR RD MILFORD, CT 06460 501 (C) (3) 5,200. GENERAL SUPPORT (4) ST JUDE CHILDRENS RESEARCH HOSPITAL INC 501 ST. JUDE PL MEMPHIS, TN 38105 62-0646012 501 (C) (3) 128,198. GENERAL SUPPORT (5) ST. PATRICKS CATHOLIC ELEMENTARY SCHOOL 20500 W. MAPLE RD ELKHORN, NE 68022 47-0379377 501 (C) (3) 5,600. GENERAL SUPPORT (6) STOP HUNGER NOW 615 HILLSBOROUGH ST #200 RALEIGH, NC 27603 16-1541024 501 (C) (3) 22,957. GENERAL SUPPORT (7) SUSAN G. KOMEN FOR THE CURE - COLUMBUS 929 EASTWIND DR WESTERVILLE, OH 43081 75-2844651 501(C)(3) 5,103. GENERAL SUPPORT (8) TARC INC 2701 SW RANDOLPH AVE TOPEKA, KS 66611 48-6086732 501(C)(3) 54,544. GENERAL SUPPORT (9) THAT NEWFOUNDLAND PLACE INC 554 PUCKER ST COVENTRY, CT 06238 27-2176439 501(C)(3) 5,400. GENERAL SUPPORT (10) THE CLOUDBASE FOUNDATION 501 (C) (3) 677 W PINE RD MELBOURNE, FL 32904 27-1359927 14,835. GENERAL SUPPORT (11) THE GLOBAL HUNGER PROJECT 94-2443282 501(C)(3) 5 UNION SQUARE W. NEW YORK, NY 10003 18,752. GENERAL SUPPORT (12) THE HOMELESS FAMILIES FOUNDATION 33 N. GRUBB ST COLUMBUS, OH 43215 31-1179492 501(C)(3) 5,347. GENERAL SUPPORT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . .

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

Schedule I (Form 990) (2015)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Schedule I (Form 990) (2015)

PAGE 58

Employer identification number

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization	GLOBAL IMPACT						52-1273585	5
Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government	Part I General Information on Grants and	d Assistanc	е					
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization (b) EIN (c) RC session (d) Amount of cash (e) Amount of row or government) (f) THE MANULI CLA PORIMATION 1269 VICTORY WARK EAGURA BEACK, CA 92651 24-2141264 501 (C) (3) 42,166. 2 THE WILLIAM DOMESTIC VIOLENCE CENTER TINC 1920 MODEL RD LANKSHER, KE 6446 49-0853356 501 (C) (3) 7,142. 3 THE YOUNG MOSE CENTER ARE SEGUE, KE 6446 49-0853356 501 (C) (3) 5,450. 49-088368 901 (C) (3) 5,450. 40 TOPERA RESCUE MISSION SINC 500 490-088068 901 (C) (3) 95,316. 40 TOPERA RESCUE MISSION SINC 500 490-088068 901 (C) (3) 95,316. 50 DOK 1962 EAN MARKOO, KT 78667 41-222779 901 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS OF MOINT BOLYOUX COLLEGE 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS FUND FOR ORICEF 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS FUND FOR ORICEF 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS FUND FOR ORICEF 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS FUND FOR ORICEF 50-091307 31-201 (C) (3) 5,200. 6) TRUSTERS FUND FOR ORICEF 50-091307 31-201 (C) (3) 50-091307	1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
Part	the selection criteria used to award the grant	ts or assistand	æ?					X Yes No
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(7) TRUSTEES OF PURDUE UNIVERSITY 403 W WOOD ST W. LAFAYETTE, IN 47907 35-6002041 501(C)(3) 6,250. (8) UNITED STATES FUND FOR UNICEF 125 MAIDEN LN NEW YORK, NY 10038 13-1760110 501(C)(3) 201,148. (9) UNION RESCUE MISSION OF WICHITA INC 2800 N HILLSIDE ST WICHITA, KS 67219 48-0625837 501(C)(3) 14,370. (10) UNIQUE & NOTEWORTHY CHARITIES P.O. BOX 45754 SAN FRANCISCO, CA 94145 46-3016556 501(C)(3) 59,061. (11) UNITARIAN UNIVERSALIST SERVICE COMMITTEE SVC COMMITTEE BOSTON, MA 02284 04-6186012 501(C)(3) 32,877. (12) UTD JEWISH APPEAL FED OF JEWISH PHILANTHROP 130 E 59TH ST NEW YORK, NY 10022 51-0172429 501(C)(3) 7,450. GENERAL SUPPORT	(6) TRUSTEES OF MOUNT HOLYOKE COLLEGE							
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(8) UNITED STATES FUND FOR UNICEF 125 MAIDEN IN NEW YORK, NY 10038 13-1760110 501(C)(3) 201,148. GENERAL SUPPORT (9) UNION RESCUE MISSION OF WICHITA INC 2800 N HILLSIDE ST WICHITA, KS 67219 48-0625837 501(C)(3) 14,370. GENERAL SUPPORT (10) UNIQUE & NOTEWORTHY CHARITIES P.O. BOX 45754 SAN FRANCISCO, CA 94145 46-3016556 501(C)(3) 59,061. GENERAL SUPPORT (11) UNITARIAN UNIVERSALIST SERVICE COMMITTEE SVC COMMITTEE BOSTON, MA 02284 04-6186012 04-6186012 501(C)(3) 32,877. GENERAL SUPPORT (12) UTD JEWISH APPEAL FED OF JEWISH PHILANTHROP 130 E 59TH ST NEW YORK, NY 10022 51-0172429 501(C)(3) 7,450.	(7) TRUSTEES OF PURDUE UNIVERSITY							
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(9) UNION RESCUE MISSION OF WICHITA INC 2800 N HILLSIDE ST WICHITA, KS 67219 48-0625837 501(C)(3) 14,370. (10) UNIQUE & NOTEWORTHY CHARITIES P.O. BOX 45754 SAN FRANCISCO, CA 94145 46-3016556 501(C)(3) 59,061. (11) UNITARIAN UNIVERSALIST SERVICE COMMITTEE SVC COMMITTEE BOSTON, MA 02284 04-6186012 501(C)(3) 32,877. (12) UTD JEWISH APPEAL FED OF JEWISH PHILANTHROP 130 E 59TH ST NEW YORK, NY 10022 51-0172429 501(C)(3) 7,450. GENERAL SUPPORT	(8) UNITED STATES FUND FOR UNICEF							
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(10) UNIQUE & NOTEWORTHY CHARITIES P.O. BOX 45754 SAN FRANCISCO, CA 94145 46-3016556 501(C)(3) 59,061. GENERAL SUPPORT SVC COMMITTEE BOSTON, MA 02284 04-6186012 501(C)(3) 32,877. GENERAL SUPPORT (12) UTD JEWISH APPEAL FED OF JEWISH PHILANTHROP 130 E 59TH ST NEW YORK, NY 10022 51-0172429 501(C)(3) 7,450. GENERAL SUPPORT	(9) UNION RESCUE MISSION OF WICHITA INC							
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(11) UNITARIAN UNIVERSALIST SERVICE COMMITTEE SVC COMMITTEE BOSTON, MA 02284 04-6186012 501(C)(3) 32,877. (12) UTD JEWISH APPEAL FED OF JEWISH PHILANTHROP 130 E 59TH ST NEW YORK, NY 10022 51-0172429 501(C)(3) 7,450. GENERAL SUPPORT	(10) UNIQUE & NOTEWORTHY CHARITIES							
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(12) UTD JEWISH APPEAL FED OF JEWISH PHILANTHROP 130 E 59TH ST NEW YORK, NY 10022 51-0172429 501(C)(3) 7,450. GENERAL SUPPORT	(11) UNITARIAN UNIVERSALIST SERVICE COMMITTEE							
130 E 59TH ST NEW YORK, NY 10022 51-0172429 501(C)(3) 7,450. GENERAL SUPPORT	SVC COMMITTEE BOSTON, MA 02284	04-6186012	501(C)(3)	32,877.				GENERAL SUPPORT
	(12) UTD JEWISH APPEAL FED OF JEWISH PHILANTHROP							
	130 E 59TH ST NEW YORK, NY 10022	51-0172429	501(C)(3)	7,450.				GENERAL SUPPORT
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	2 Enter total number of section 501(c)(3) an	d governmer	t organizations	listed in the line 1 t	able			

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

10:07:18 AM V 15-7.18

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

2015

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number GLOBAL IMPACT 52-1273585 General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X Yes 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant (book, FMV, appraisal, other) or government if applicable cash assistance non-cash assistance or assistance grant (1) UNITED METHODIST 475 RIVERSIDE DR, 1520 NEW YORK, NY 10115 13-5562279 501(C)(3) 184,478. GENERAL SUPPORT (2) UNITED NEGRO COLLEGE FUND 229 PEACHTREE ST NE, 2350 ATLANTA, GA 30303 13-1624241 501(C)(3) 5.984 GENERAL SUPPORT (3) UNITED SERVICE ORGANIZATIONS, INC. 2111 WILSON BLVD, 1200 ARLINGTON, VA 22201 13-1610451 501(C)(3) 140,111. GENERAL SUPPORT (4) UNITED WAY OF CENTRAL MARYLAND 100 S CHARLES ST BALTIMORE, MD 21203 52-0591543 501(C)(3) 9,989. GENERAL SUPPORT (5) UNITED WAY OF CENTRAL OHIO INC 360 S 3RD ST COLUMBUS, OH 43215 31-4393712 501(C)(3) 30,493 GENERAL SUPPORT (6) UNITED WAY OF COASTAL FAIRFIELD COUNTY INC 855 MAIN ST BRIDGEPORT, CT 06604 06-0864341 |501(C)(3) 17,678. GENERAL SUPPORT (7) UNITED WAY OF DOUGLAS COUNTY INC 2518 RIDGE CT LAWRENCE, KS 66046 501(C)(3) 30,642. GENERAL SUPPORT (8) UNITED WAY OF EL DORADO KANSAS INC 116 W. PINE ST EL DORADO, KS 67042 23-7199368 501(C)(3) 6,064. GENERAL SUPPORT (9) UNITED WAY OF GREATER KANSAS CITY INC 801 W. 47TH ST #500 KANSAS CITY, MO 64112 44-0545812 | 501(C)(3) 16,923. GENERAL SUPPORT (10) UNITED WAY OF GREATER TOPEKA INC 1315 SW ARROWHEAD RD TOPEKA, KS 66604 48-0561978 501 (C) (3) 68,806. GENERAL SUPPORT (11) UNITED WAY OF LEAVENWORTH COUNTY INC PO BOX 21 LEAVENWORTH, KS 66048 48-0622408 501 (C) (3) 7,036. GENERAL SUPPORT (12) UNITED WAY OF NEW YORK CITY 205 E 42ND ST NEW YORK, NY 10017 13-2617681 501(C)(3) 10,840. GENERAL SUPPORT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . .

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

Schedule I (Form 990) (2015)

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

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
GLOBAL IMPACT

S2-1273585

Part L General Information on Grants and Assistance

Part II Grants and Other Assistance to 990, Part IV, line 21, for any recip					plete if the organiz ed if additional spa		es" on Form
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNITED WAY OF RENO COUNTY							
P.O. BOX 2230 HUTCHINSON, KS 67504	48-0833061	501(C)(3)	10,974.				GENERAL SUPPORT
(2) UNITED WAY OF THE PLAINS							
245 N WATER ST WICHITA, KS 67202	48-0547688	501(C)(3)	68,912.				GENERAL SUPPORT
(3) UNITED WAY OF WESTERN CONNECTICUT							
85 W ST DANBURY, CT 06810	06-0646577	501(C)(3)	27,003.				GENERAL SUPPORT
(4) UNIVERSITY OF NOTRE DAME DU LAC						110	
1100 GRACE HALL NOTRE DAME, IN 46556	35-0868188	501(C)(3)	9,460.				GENERAL SUPPORT
(5) USA GIRL SCOUTS OVERSEAS							
420 5TH AVE NEW YORK, NY 10018	13-1624016	501 (C) (3)	8,375.				GENERAL SUPPORT
(6) UW OF THE NATIONAL CAPITAL AREA				- CRIA CRIANTO			
1577 SPRING HILL RD 420 VIENNA, VA 22182	53-0234290	501 (C) (3)	5,195.				GENERAL SUPPORT
(7) VALLEY OF THE SUN UNITED WAY							
3200 E CAMELBACK RD #375 PHOENIX, AZ 85018	86-0104419	501(C)(3)	8,703.				GENERAL SUPPORT
(8) VALLEY UNITED WAY INCORPORATED							
54 GROVE ST SHELTON, CT 06484	06-0847098	501(C)(3)	5,424.				GENERAL SUPPORT
(9) WATER FOR PEOPLE							
100 E TENNESSEE AVE DENVER, CO 80209	84-1166148	501(C)(3)	86,126.				GENERAL SUPPORT
(10) WESTPORT COUNTRY PLAYHOUSE INC							
25 POWERS CT WESTPORT, CT 06880	23-7357943	501(C)(3)	17,920.				GENERAL SUPPORT
(11) WICHITA HABITAT FOR HUMANITY							
130 E MURDOCK, 102 WICHITA, KS 67214	58-1735540	501 (C) (3)	9,918.				GENERAL SUPPORT
(12) WILD ANIMALS WORLDWIDE			-				
PO BOX 45754 SAN FRANCISCO, CA 94145	20-8774272	501 (C) (3)	46,225.				GENERAL SUPPORT

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

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

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

2015

OMB No. 1545-0047

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number GLOBAL IMPACT 52-1273585 Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant (book, FMV, appraisal, or government non-cash assistance or assistance if applicable cash assistance grant other) (1) WILLIAM J. CLINTON PRESIDENTIAL FDN 1271 AVE OF THE AMERICAS 42ND FL 501 (C) (3) 31-1580204 34,486. GENERAL SUPPORT (2) WOLF TRAP FDN FOR THE PERFORMING ARTS 1645 TRAP RD VIENNA, VA 22182 23-7011544 501(C)(3) 10,000. GENERAL SUPPORT (3) WOMEN FOR WOMEN INTERNATL 2000 M ST, NW #200 WASHINGTON, DC 20036 52-1838756 501(C)(3) 40,456. GENERAL SUPPORT (4) WOMEN, CHILDREN& FAMILY SERVICE CHARITIES OF PO BOX 45754 SAN FRANCISCO, CA 94145 94-3193386 501(c)(3) 84,095. GENERAL SUPPORT (5) WORLD CHILDHOOD FOUNDATION, INC. 183 MADISON AVE #715 NEW YORK, NY 10016 16-1559586 501(C)(3) 8,505. GENERAL SUPPORT (6) WORLD RELIEF 23-6393344 501(C)(3) 7 EAST BALTIMORE ST BALTIMORE, MD 21202 7,974. GENERAL SUPPORT (7) WORLD RENEW RELIEF COMMITTEE GRAND RAPIDS, MI 49560 20-5080679 501(C)(3) 24,690 GENERAL SUPPORT (8) WORLD VISION PO BOX 9716 FEDERAL WAY, WA 98063 95-1922279 501(C)(3) 46,418. SENERAL SUPPORT (9) WOUNDED WARRIOR PROJECT INC 4899 BELFORT RD JACKSONVILLE, FL 32256 20-2370934 501(C)(3) 337,802. GENERAL SUPPORT (10) WOUNDED WARRIORS FAMILY SUPPORT 920 S. 107TH AVE # 250 OMAHA, NE 68114 20-1407520 501(C)(3) 19,794. GENERAL SUPPORT (11) WYCLIFFE BIBLE TRANSLATORS INC P.O. BOX 628200 ORLANDO, FL 32832 95-1831097 | 501(C)(3) 20,048. (12)262. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

GLOBAL IMPACT 52-1273585

Schedule I (Form 990) (2015) Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance			

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

PART I DESCRIPTION OF PROCEDURE FOR MONITORING USE OF FUNDS

THE ORGANIZATION USES A COMBINATION OF AN ANNUAL RECERTIFICATION PROCESS

AND THIRD PARTY VENDORS TO ENSURE COMPLIANCE.

Part III

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Employees

Compensated Employees

Attach to Form 990.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization GLOBAL IMPACT

Employer identification number

52-1273585

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	,,,,,,,			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	10.00 P 100 H 200 C 200	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2015

52-1273585

Schedule J (Form 990) 2015

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

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

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

		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
SCOTT JACKSON	(i)	303,633.	56,668.	14,950.	13,250.	25,107.	413,608.	0.
1PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
CHRISTINE SOW	(i)	179,436.	0.	0.	0.	0.	179,436.	0.
2EXECUTIVE DIRECTOR, GHC	(ii)	0.	0.	0.	0.	0.	0.	0.
ANN CANELA	(i)	136,387.	21,982.	15,595.	7,798.	5,858.	187,620.	0.
3 PARTNER SOLUTIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
JOSEPH METTIMANO	(i)	143,687.	21,443.	7,798.	7,798.	15,185.	195,911.	0.
4 ^{VP} , MKTG & CAMPAIGN ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
STEPHANIE SCHOLZ	(i) _	116,400.	21,955.	7,176.	7,176.	16,433.	169,140.	0.
5 MANAGING DIRECTOR, HR & ADMIN	(ii)	0.	0.	0.	0.	0.	0.	0.
MARK MILLIGAN	(i) _	123,493.	16,201.	9,463.	9,463.	6,140.	164,760.	0.
6 MANAGING DIRECTOR, FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i) _							
7	(ii)							
	(i) _							
8	(ii)							
	(i)							
9	(ii)							
	(i) _							
10	(ii)							
	(i)							
11	(ii)							
	(i) _							
12	(ii)							
	(i) _							
13	(ii)							
	(i) _							
14	(ii)							
	(i) _							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2015

GLOBAL IMPACT 52-1273585

Schedule J (Form 990) 2015

Page 3

Part III Supplemental Information

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2015

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization
GLOBAL IMPACT

Employer identification number 52-1273585

FORM 990, PART III, LINE 1 - MISSION:

(CONTINUED) GLOBAL IMPACT IS A LEADER IN GROWING GLOBAL PHILANTHROPY. THE ORGANIZATION BUILDS PARTNERSHIPS AND RAISES RESOURCES THAT HELP THE WORLD'S MOST VULNERABLE PEOPLE. GLOBAL IMPACT PROVIDES A CONTINUUM OF SERVICES INCLUDING: 1) INTEGRATED, PARTNER- SPECIFIC ADVISORY AND BACKBONE SERVICES; 2) CAMPAIGN DESIGN, MARKETING AND IMPLEMENTATION FOR WORKPLACE AND SIGNATURE FUNDRAISING CAMPAIGNS; AND 3) FISCAL AGENCY, TECHNOLOGY SERVICES AND INTEGRATED GIVING PLATFORMS. GLOBAL IMPACT WORKS WITH APPROXIMATELY 450 PUBLIC AND PRIVATE SECTOR WORKPLACE GIVING CAMPAIGNS TO GENERATE FUNDING FOR THE GLOBAL IMPACT ALLIANCE INCLUDING CARE, DOCTORS WITHOUT BORDERS, HEIFER INTERNATIONAL, SAVE THE CHILDREN, THE U.S. FUND FOR UNICEF AND WORLD VISION. GLOBAL IMPACT EQUIPS PRIVATE SECTOR AND NONPROFIT SECTOR ORGANIZATIONS TO ACHIEVE THEIR PHILANTHROPIC GOALS BY PROVIDING REVENUE DIVERSIFICATION STRATEGIES, EMPLOYEE ENGAGEMENT PROGRAMS, CSR STRATEGIES, AND CUSTOM PHILANTHROPIC FUNDS. SINCE 1956, GLOBAL IMPACT HAS GENERATED MORE THAN \$1.7 BILLION TO HELP THE WORLD'S MOST VULNERABLE PEOPLE. LEARN MORE AT CHARITY.ORG.

FORM 990, PART III, LINE 4A - CAMPAIGN SOLUTIONS:

GLOBAL IMPACT CREATES AND IMPLEMENTS A FULL SUITE OF WORKPLACE

FUNDRAISING CAMPAIGN SOLUTIONS THAT INCLUDES CAMPAIGN DESIGN, THE OVERALL

AND ONGOING MANAGEMENT OF A CAMPAIGN, AND ONGOING REPRESENTATION WITH

EMPLOYEES, DONORS AND INSTITUTIONS. DURING THIS YEAR, GLOBAL IMPACT

ADMINISTERED THE COMBINED FEDERAL CAMPAIGN-OVERSEAS, WHICH RAISED OVER \$7

MILLION IN GROSS PLEDGES. ON BEHALF OF ITS ALLIANCE OF 128 INTERNATIONALLY-FOCUSED CHARITIES, GLOBAL IMPACT ENGAGED NEARLY 450 PUBLIC AND PRIVATE-SECTOR WORKPLACE GIVING CAMPAIGNS, WHICH COLLECTIVELY RAISED NEARLY \$21.7 MILLION IN GROSS PLEDGES IN FISCAL YEAR 2016. GLOBAL IMPACT ALSO PROVIDES IMPACT FUNDS, WHICH CURRENTLY ARE BUILT AROUND TEN THEMATIC AREAS: DISASTER RELIEF, ECONOMIC DEVELOPMENT, EDUCATION, CLEAN WATER, GLOBAL HEALTH AND CHILD SURVIVAL, HUMAN TRAFFICKING, HUNGER, MALARIA, WOMEN AND GIRLS AND THE SYRIAN REFUGEE FUND. THESE FUNDS ARE DESIGNED FOR THE DONOR WHO IS CONCERNED ABOUT A PARTICULAR ISSUE, AND CAN BE PROVIDED AS A GIVING OPTION WITHIN AN EXISTING WORKPLACE GIVING CAMPAIGN OR CAN BE TAILORED TO THE SPECIFIC PHILANTHROPIC NEEDS OF A CORPORATION OR FOUNDATION. BY LEVERAGING A BROAD AND LONG-STANDING NETWORK OF MEDIA ALLIANCES, GLOBAL IMPACT PROVIDES CHARITIES THE MEANS OF PARTICIPATING IN PRINT AND ELECTRONIC COOPERATIVE ADVERTISING CAMPAIGNS. FOR NEARLY 10 YEARS GLOBAL IMPACT HAS SERVED AS FIDUCIARY FOR DONOR ADVISED FUNDS ON BEHALF OF CORPORATE FOUNDATIONS. THROUGH THESE EFFORTS, \$3.5 MILLION WAS RAISED AND DISTRIBUTED TO CHARITIES DURING THE YEAR. THROUGH ITS WORK TO ANNUALLY RECERTIFY THE 128 MEMBERS OF ITS CHARITY ALLIANCE, GLOBAL IMPACT USES ITS EXTENSIVE EXPERIENCE TO VET AND CERTIFY BOTH DOMESTIC AND INTERNATIONAL CHARITABLE ORGANIZATIONS. USING ITS PROPRIETARY MODEL, GLOBAL IMPACT HAS BUILT A SUCCESSFUL CHARITY VETTING, CERTIFICATION AND STATE REGISTRATION PRACTICE AREA THAT INCORPORATES IRS REQUIREMENTS, FINANCIAL ANALYSIS AND MONITORING.

FORM 990, PART III, LINE 4B - PARTNER SOLUTIONS:
THE PARTNER SOLUTIONS TEAM BRINGS CUSTOMIZED CONSULTING SERVICES TO THE

52-1273585

PRIVATE AND NON-PROFIT SECTORS INCLUDING STRATEGY, IMPLEMENTATION AND ON-GOING ORGANIZATIONAL SUPPORT. THE TEAM PROVIDES INTEGRATED, CROSS-SECTOR AND COLLABORATIVE APPROACHES ALONG A CONTINUUM OF GLOBAL RESOURCE DEVELOPMENT AND PARTNERSHIP NEEDS. MOBILIZING THE NEXUS OF PRIVATE AND NON-PROFIT SECTORS, WE CREATE STRATEGIES, LAUNCH GLOBAL CAMPAIGNS AND PROVIDE SUPPORTING MECHANISMS TO GROW RESOURCES, RESPONSIBLE BUSINESS, AND SOCIAL IMPACT. SERVICES INCLUDE RESEARCH, STRATEGY, ACTIVATION, MARKETING VISIBILITY AND EVALUATION. ADDITIONALLY, THE PARTNER SOLUTIONS TEAM HAS FOUR TURN-KEY SERVICE SUITES: FUNDRAISING STRATEGY AND CAMPAIGNS, LOCAL TO GLOBAL, STORYTELLING FOR DEVELOPMENT AND BACKBONE/ FISCAL SERVICES.

FORM 990, PART VI, SECTION B, LINE 11:

THE ORGANIZATION'S FORM 990 UNDERGOES A NUMBER OF INTERNAL AND EXTERNAL REVIEWS BEFORE IT IS FILED WITH THE IRS. THE RETURN IS PREPARED BY THE ORGANIZATION'S PUBLIC ACCOUNTING FIRM, BDO USA, AND IS REVIEWED BY THE ORGANIZATION'S MANAGING DIRECTOR, FINANCE AND THE PRESIDENT AND CHIEF EXECUTIVE OFFICER. FORM 990 IS THEN REVIEWED BY THE AUDIT COMMITTEE PRIOR TO A BOARD MEETING. THE FORM IS PRESENTED TO THE BOARD BY THE AUDIT COMMITTEE CHAIR OR THE MANAGING DIRECTOR, FINANCE. INDIVIDUALLY, BOARD MEMBERS ARE PROVIDED AN ELECTRONIC VERSION OF THE FORM, SO THAT EACH CAN REVIEW IT AND RAISE QUESTIONS BEFORE THE FORM IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

A CONFLICT OF INTEREST IS EXECUTED AND SIGNED ON AN ANNUAL BASIS BY ALL MEMBERS OF THE BOARD AND STAFF. WHEN ANY EXPRESSION OF CONFLICT OF

Employer identification number 52-1273585

INTEREST SEEMS EVEN REMOTELY POSSIBLE, THE PERSON(S) POTENTIALLY INVOLVED SHALL REMOVE HIMSELF/HERSELF (THEMSELVES) FROM ANY PROCESS LEADING TO RECOMMENDATIONS OR DECISION MAKING RELATING TO MATTERS IN WHICH A CONFLICT MAY EXIST.

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

THE BOARD'S EXECUTIVE COMMITTEE SERVES AS THE COMPENSATION COMMITTEE AND MAKES THE DECISION ON EXECUTIVE COMPENSATION. THE COMMITTEE OVERSEES

MANAGEMENT TO CONDUCT AND PROVIDE COMPENSATION REVIEWS AND PRESENTS

COMPARABLE SALARIES FOR EACH POSITION.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

ADDITIONALLY, THE FINANCIAL STATEMENTS ARE POSTED ON ITS WEBSITE.

FORM 990, PART XII, LINE 2C - OVERSIGHT OF AUDIT:
THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS FOR OVERSIGHT
OF THE AUDIT OF THE FINANCIAL STATEMENTS.

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,

DC, FL, GA, HI, IL, IN, KS, KY, ME, MD, MI,

MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, TX, UT, VT, VA, WA, WV, WI,

Schedule O (Form 990 or 990-EZ) 2015 Page **2**

Name of the organization
GLOBAL IMPACT

Employer identification number
52-1273585

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

SCHANER & LUBITZ, PLLC LEGAL 183,305. 6931 ARLINGTON ROAD

BETHESDA, MD 20814

RACKSPACE MANAGED HOSTING INTERNET HOSTING 117,297.

P.O. BOX 730759 DALLAS, TX 75373

52-1273585 GLOBAL IMPACT

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

Department of the Treasury ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

OMB No. 1545-0047

Open to Public Inspection

GLOBAL IMPACT

Employer identification number 52-1273585

(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct co enti	ntrolling
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during	Complete if the or the tax year.	ganization answe	ered "Yes" on Fo	orm 990, Part IV,	line 34 because i	t had	
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during (a) Name, address, and EIN of related organization	Complete if the ore the tax year. (b) Primary activity	(c) Legal domicile (state or foreign country)	(d)	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
one or more related tax-exempt organizations during (a) Name, address, and EIN of related organization	the tax year.	(c) Legal domicile (state	(d)	(e) Public charity status	(f) Direct controlling	Section 5	512(b)(13) rolled
one or more related tax-exempt organizations during (a) Name, address, and EIN of related organization	the tax year.	(c) Legal domicile (state	(d)	(e) Public charity status	(f) Direct controlling	Section 5 cont ent	512(b)(13) rolled tity?
ne or more related tax-exempt organizations during (a) Name, address, and EIN of related organization (1) CAMPAIGN ACCELERATOR, INC, 26-3265577	the tax year. (b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont ent Yes	512(b)(13) rolled tity?
one or more related tax-exempt organizations during (a) Name, address, and EIN of related organization (1) CAMPAIGN ACCELERATOR, INC, 26-3265577 1199 N FAIRFAX ST., SUITE 300 ALEXANDRIA, VA 22314	the tax year. (b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont ent Yes	512(b)(13) rolled tity?
ne or more related tax-exempt organizations during (a) Name, address, and EIN of related organization (1) CAMPAIGN ACCELERATOR, INC, 26-3265577 1199 N FAIRFAX ST., SUITE 300 ALEXANDRIA, VA 22314 (2)	the tax year. (b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont ent Yes	512(b)(13) rolled tity?
ne or more related tax-exempt organizations during (a) Name, address, and EIN of related organization (1) CAMPAIGN ACCELERATOR, INC, 26-3265577 1199 N FAIRFAX ST., SUITE 300 ALEXANDRIA, VA 22314 (2) (3)	the tax year. (b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont ent Yes	512(b)(13) rolled tity?

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

Schedule R (Form 990) 2015

(7)

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	n) portionate prioris?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ner?	(k) Percentage ownership
				,			Yes	No		Yes	No	
<u>(1)</u>]		
(2)									<u> </u>			
(3)												
(4)												
(5)			, , , , , , , , , , , , , , , , , , , ,			-		,				
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
								Yes No
(1)								
(2)			***************************************					
(3)				***************************************				
(4)								
(5)								
(6)								
(7)								

JSA 5E1308 1.000 Schedule R (Form 990) 2015

0011001	10 17 (1011100) 2010	***************************************							
Par	Transactions With Related Organizations Complete if the organization answered "	Yes" on Form 990, Par	t IV, line 34, 35b, or 36.						
Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No				
1	During the tax year, did the organization engage in any of the following transactions with one or mo	re related organizations lis	ted in Parts II-IV?						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	_		1a	a X				
	Gift, grant, or capital contribution to related organization(s)) X				
С	Gift, grant, or capital contribution from related organization(s)			10	3 X				
d	Loans or loan guarantees to or for related organization(s)			1c	X				
	Loans or loan guarantees by related organization(s)				X				
f	Dividends from related organization(s)		. <i></i>	11					
g	Sale of assets to related organization(s)			1g					
h	Purchase of assets from related organization(s)			<u>1</u> 1	ı X				
i	i Exchange of assets with related organization(s) 1i								
j	Lease of facilities, equipment, or other assets to related organization(s)			<u> 1</u> j	i X				
				1.2					
k	Lease of facilities, equipment, or other assets from related organization(s)			<u>1</u> k					
I	Performance of services or membership or fundraising solicitations for related organization(s)				 				
	Performance of services or membership or fundraising solicitations by related organization(s)								
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)			10) X				
-	Reimbursement paid to related organization(s) for expenses				-				
q	Reimbursement paid by related organization(s) for expenses		· · · · · · · · · · · · · · · · · · ·	10	7 ^				
_	Other transfer of each or man out, to related expenientian(a)			11	, X				
r -	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)		· · · · · · · · · · · · · · · · · · ·	15	<u> </u>				
	If the answer to any of the above is "Yes," see the instructions for information on who must comple	te this line including cove	red relationshins and trans	saction thresho	·				
	(a)	(b)	(c)	(d)					
	Name of related organization	Transaction	Amount involved	Method of de	etermining				
		type (a-s)		amount ir	nvolved				
<u>(1)</u>									
(2)									
(3)									
<u>(4)</u>				-					
/=:									
(5)									
(6)									
70)									

JSA 5E1309 1.000 Schedule R (Form 990) 2015

Page **4**

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

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

(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant income (related, unrelated, excluded from tax under	organizations?		(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			sections 512-514)	Yes	No			Yes	No		Yes	No	
											<u></u>		
											-		
	To black to	<u> </u>											
		3								1			
				_									

JSA

5E1310 1.000

Schedule R (Form 990) 2015

GLOBAL IMPACT 52-1273585

Schedule R (Form 990) 2015

Page 5

Part VII **Supplemental Information**

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

PART II, LINE (1):

COLUMN (B) - PRIMARY ACTIVITY: CAMPAIGN ACCELERATOR, INC. PROVIDES FINANCIAL AND TECHNOLOGY SERVICE AND PLATFORM TO SUPPORT CAMPAIGN FOR INCREASING THE VISIBILITY AND PROGRAMMATIC SUPPORT OF HUMANITARIAN CAUSES.

COLUMN (F) - DIRECT CONTROLLING ENTITY: GLOBAL IMPACT

50m 8868

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

	filing for an Automatic 3-Month Extension, o				X		
•	filing for an Additional (Not Automatic) 3-Mo			, , -			
Do not comp	llete Part II unless you have already been gra	nted an aut	tomatic 3-month extens	sion on a previously filed Form 8868	3.		
a corporation 8868 to req Return for instructions)	ling (e-file). You can electronically file Form n required to file Form 990-T), or an addition uest an extension of time to file any of the Transfers Associated With Certain Personal. For more details on the electronic filing of the	nal (not aut forms liste Il Benefit (nis form, vis	omatic) 3-month exten d in Part I or Part II wi Contracts, which must sit www.irs.gov/efile and	ision of time. You can electronicall ith the exception of Form 8870, I t be sent to the IRS in paper for d click on <i>e-file for Charities & Nong</i>	y file Form nformation ormat (see		
	tomatic 3-Month Extension of Time. Or						
A corporatio	n required to file Form 990-T and requesting	an automa	atic 6-month extension	- check this box and complete			
Part I only .					▶ 🔲		
•	porations (including 1120-C filers), partnersh	ips, REMIC	s, and trusts must use F	Form 7004 to request an extension o	of time		
to file incom				Enter filer's identifying number, see			
Type or print CLOBAL TMPACT Employer identification number (EIN) or 52-1273585							
-	GLOBAL IMPACT			52-1273585			
File by the due date for	Number, street, and room or suite no. If a P.O. bo		tions.	Social security number (SSN)			
1199 NORTH FAIRFAX ST, SUITE 300 City, town or post office, state, and ZIP code. For a foreign address, see instructions. ALEXANDRIA, VA 22314							
Enter the Re	eturn code for the return that this application	is for (file a	separate application fo	or each return)	0 1		
Application		Return	Application	·	Return		
is For		Code	Is For		Code		
	Form 990-EZ	01	Form 990-T (corporat	ion)	07		
Form 990-Bl		02	Form 1041-A		08		
Form 4720 (03	Form 4720 (other tha	n individual)	09		
Form 990-PF		04	Form 5227		10		
	(sec. 401(a) or 408(a) trust)	05	Form 6069	11			
Form 990-1	(trust other than above)	06	Form 8870		12		
Telephone If the orga If this is for	MARK MILLIGAN, s are in the care of ► 1199 N FAIRFAX No. ► 703 717-5200 Anization does not have an office or place of or a Group Return, enter the organization's fo	ST #300 Fousiness in ur digit Gro	ALEXANDRIA, VA FAX No. ► 703 717 the United States, checup Exemption Number (7-5215 ck this box	is is		
	e group, check this box		irt of the group, check t	this box ▶ 💹 and atta	ach		
1 I reque until for the	e names and EINs of all members the extens st an automatic 3-month (6 months for a cor	poration re exempt org	ganization return for the	organization named above. The example of the control of the contro	xtension is		
c	ax year entered in line 1 is for less than 12 m hange in accounting period						
	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the	tentative tax, less any			
	undable credits. See instructions.			3a \$	0.		
	application is for Form 990-PF, 990-T,			F 1	^		
	ted tax payments made. Include any prior yea				0.		
	e due. Subtract line 3b from line 3a. Include onic Federal Tax Payment System). See instru		ent with this form, if re	quired, by using EFTPS 3c \$	0.		
	are going to make an electronic funds withdrawa		t) with this Form 8868, se				
instructions.							

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2014)

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box	Form 8868 (R	ev. 1-2014)				Page 2		
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8888. If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1) Name of exempt organization or other filer, see instructions. Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or	If you are	e filing for an Additional (Not Automatic) 3-Me	onth Exten	sion, complete only Part I	and check this box			
• If you are filling for an Automatic 3-Month Extension, complete only Part I (on page 1). Part III Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). Enter filer's identifying number, see instructions. Type or print GLOBAL IMPACT S2-1273595 GLOBAL IMPACT GLOBAL IMPACT S0-1273595 City, town or post office, state, and ZiP code. For a foreign address, see instructions. Social security number (SSN) 1199 NORTH FAIRERY ST, SUITE 300 City, town or post office, state, and ZiP code. For a foreign address, see instructions. AleXANDRIA, VA 22314 Enter the Return code for the return that this application is for (file a separate application for each return) Is For Code Form 990 or Form 990-EZ O1 Form 990 or Form 990-EZ O2 Form 1041-A O8 Form 4720 (individual) O3 Form 4720 (individual) O3 Form 990-T (see. 401(a) or 408(a) trust) STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8858. • The books are in the care of ▶ 348 € 11 k 158	-	· · · · · · · · · · · · · · · · · · ·		•	•			
Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	-	· · · · · · · · · · · · · · · · · · ·						
Name of exempt organization or other filer, see instructions. CLOBAL IMPACT Surface Succide security number (EIR) or print Number, street, and room or sulte no. If a P.O. box, see instructions. Sucide security number (SSN)	Part II	Additional (Not Automatic) 3-Month Ex	xtension c	of Time. Only file the orig	ginal (no copies needed).			
Type or print SLOBAL IMPACT S0.000 Social security number (SSN)				E	nter filer's identifying number, se	e instructions		
Distribution Dis		Name of exempt organization or other filer, see in	nstructions.		Employer identification number (i	EIN) or		
Distribution Dis	Type or							
City, town or post office, state, and ZIP code. For a foreign address, see instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. City, town or post office, state, and ZIP code. For many application for each return) City Code Service Code Code Service Code Code Service Code Code Service Code		GLOBAL IMPACT			52-1273585			
due date for lifely sever return. Sees. 1199 MORPH FAIRFAX ST, SUTTE 300. Tritle year return. Sees. ALEXANDRIA, VA 22314 Enter the Return code for the return that this application is for (file a separate application for each return). Separate Application Form 990 or Form 990-EZ Form 990 or Form 990-EZ Form 990-BL Code Form 990-BL Code Form 990-PF O4 Form 5227 Form 990-PF O5 Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (rust other than above) The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of ▶ TASE NOTE 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in the care of Note 1800. The books are in th	Eile by the	Number, street, and room or suite no. If a P.O. bo	x, see instruc	ctions,	Social security number (SSN)			
Enter the Return code for the return that this application is for (file a separate application for each return)		1199 NORTH FAIRFAX ST, SUITE	300					
ALEXANDRIA, VA 22314		City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions.				
Return Seror Code Return Seror Code Seror Code Seror Sero		ALEXANDRIA, VA 22314						
Section Sec	Enter the R	Return code for the return that this application	is for (file a	a separate application for ea	ach return)	0 1		
Form 990-Form 990-EZ Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 111 Form 990-T (trust other than above) 06 Form 8670 12 STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8858. The books are in the care of ▶ 145 N 144 FORM 105 A 115 N 145 N 1	Applicatio	n ,	Return	Application-		Return		
Form 990-BI. 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (cother than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8670 12 STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8888. The books are in the care of ▶ 115	ls For		Code			Code		
Form 990-BL Form 4720 (individual) Form 990-PF O4 Form 5227 O5 Form 6069 O5 Form 6069 O5 Form 8700 O5 Form 8700 O5 Form 6069 O5 Form 8700 O5 Form 8	Form 990	or Form 990-EZ	01					
Form 990-PF	Form 990-	·BL	02	Form 1041-A				
Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. The books are in the care of ▶ MASK MILE FARK STOPE IN TAXABLETTA, VA 22314 Telephone No ▶ 703 717-5200 Fax No ▶ 703 717-5215 If the organization does not have an office or place of business in the United States, check this box ▶	Form 472	0 (individual)	03	Form 4720 (other than in	ndividual)	- 09		
Form 990-T (trust other than above) 06 Form 8870	Form 990-	PF	04	Form 5227		10		
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. The books are in the care of ▶ 1435 NI FATERIX SIG BARTA, VA 22.314 Telephone No. ▶ 703 717-5200 FaXNO. ▶ 703 717-5215 If the organization does not have an office or place of business in the United States, check this box ▶ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. 4 I request an additional 3-month extension of time until 05/15 , 20 17 5 For calendar year or other tax year beginning 07/01 , 20 15 , and ending 06/30 , 20 16 6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Final return Ghange in accounting period 7 State in detail why you need the extension DUE TO THE COMPLEXITY OF THE RETURN, ADDITIONAL TIME IS NECESSARY TO COMPILE THE INFORMATION NEEDED FOR A COMPLETE AND ACCURATE RETURN. 8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 8a \$ 0 b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 8b \$ 0 c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions 8c \$ 0 Signature and Verification must be completed for Part II only. Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, a	Form 990-	-T (sec. 401(a) or 408(a) trust)	-05	Form 6069		11		
The books are in the care of ▶ MARS NITATION NOT STATE AND TAXABLETA. WA 22314 Telephone No. ▶ 703 717-5200 Fax No. ▶ 703 717-5215 If the organization does not have an office or place of business in the United States, check this box ▶	Form 990-	-T (trust other than above)	06	Form 8870		12		
Telephone No. ▶ 703 717-5200 Fax No. ▶ 703 717-5215 • If the organization does not have an office or place of business in the United States, check this box ▶ □ • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	STOP! Do i	not complete Part II if you were not already	granted ar	n automatic 3-month exter	nsion on a previously filed For	m 8868.		
Telephone No. ▶ 703 717-5200 Fax No. ▶ 703 717-5215 • If the organization does not have an office or place of business in the United States, check this box ▶ □ • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	The bool	ks are in the care of ▶ MARK MILLIGAN	MNG DIR- ST #300	-FINANCE ALEXANDRIA, VA 223	314			
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. I request an additional 3-month extension of time until 05/15 , 20 17 For calendar year _ , or other tax year beginning 07/01 , 20 15 , and ending 06/30 , 20 16 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Change in accounting period State in detail why you need the extension DUE TO THE COMPLEXITY OF THE RETURN, ADDITIONAL TIME IS NECESSARY TO COMPILE THE INFORMATION NEEDED FOR A COMPLETE AND ACCURATE RETURN. ACCURATE RETURN. 8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Signature and Verification must be completed for Part II only. Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.								
for the whole group, check this box ▶	• If the org	ganization does not have an office or place of	business ir	n the United States, check the	his box	▶ 🔙		
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4 I request an additional 3-month extension of time until	for the who	ole group, check this box ▶ 🔝 . I	f it is for pa	art of the group, check this	box▶ and at	tach a		
For calendar year, or other tax year beginning	list with the	names and EINs of all members the extension	n is for.					
If the tax year entered in line 5 is for less than 12 months, check reason:	4 I requ	est an additional 3-month extension of time u	ntil		05/15 _, 20_17 _.			
Change in accounting period State in detail why you need the extension DUE TO THE COMPLEXITY OF THE RETURN, ADDITIONAL TIME IS NECESSARY TO COMPILE THE INFORMATION NEEDED FOR A COMPLETE AND ACCURATE RETURN. 8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 8a \$ 0. b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. 8b \$ 0. c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 8c \$ 0. Signature and Verification must be completed for Part II only. Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form. Signature CARL Completed State Carlot Carlo	5 For ca	alendar year, or other tax year beginni	ing	<u>07/01</u> , 2 <u>0</u> 15, ar	nd endi <u>ng 06/30</u>	20 16 .		
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TIME IS NECESSARY TO COMPILE THE INFORMATION NEEDED FOR A COMPLETE AND ACCURATE RETURN. 8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 8a \$ 0. b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. 8b \$ 0. c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 8c \$ 0. Signature and Verification must be completed for Part II only. Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form. Signature CPA Date 02/01/2017								
ACCURATE RETURN. 8.a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 8.a \$ 0. b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. 8.	7 State					<u></u>		
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estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Signature and Verification must be completed for Part II only. Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form. Signature Caree Undersol. Title CPA Date 02/01/2017						0.		
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(Electronic Federal Tax Payment System). See instructions. Signature and Verification must be completed for Part II only. Under penalties of perjury, I declare that I have examined this form, Including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form. Signature ▶ CPA Date ▶ 02/01/2017						0.		
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knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form. Signature ► CPA Date ► 02/01/2017		Signature and Verifica	ation mu	st be completed for P	Part II only.			
Signature ► CPA Date ► 02/01/2017 Form 8868 (Rev. 1-2014)					dules and statements, and to the	e best of my		
Form 8868 (Rev. 1-2014)	Signature >	Oorsee Undensoool		Title ▶ CPA	Date ▶ 02/01,	/2017		
					Form 8868	(Rev. 1-2014)		

Form	990-T	Ex	empt Organization					rn	ОМЕ	3 No. 1545-0687		
FUIII	000 1	For caler	(and proxy tax ndar year 2015 or other tax year begin					, 16	a)M15		
Denarti	ment of the Treasury		formation about Form 990-T and				, -		4	40 IJ		
	Revenue Service		not enter SSN numbers on this form a				_		Open to 501(c)(3	Public Inspection for Organizations Only		
A	Check box if		Name of organization (Check bo	x if na	me changed and see in	struction	s.)		oyer identi	fication number		
	address changed							(Emplo	oyees' trust, s	see instructions.)		
В Ехе	mpt under section		GLOBAL IMPACT									
X	501(C <u>)(</u> 3)	Print	Number, street, and room or suite no. I	faP.O	. box, see instructions.			52-1273585				
	408(e) 220(e)	or Type						E Unrelated business activity code (See instructions.)				
	408A530(a)	.,,,,,	1199 NORTH FAIRFAX S	ST,	SUITE 300			(See ii	istructions.)			
	529(a)	·	City or town, state or province, country	/, and 2	ZIP or foreign postal co	de						
	k value of all assets		ALEXANDRIA, VA 2231	4				5412	00			
	nd of year		up exemption number (See instructi		·							
	3,891,112.		ck organization type 🕨 🐰 501			501(c) trust	401(a)	trust	Other trust		
			rimary unrelated business activity.									
			corporation a subsidiary in an affili	_	•	sidiary c	controlled group?		▶[Yes X No		
			identifying number of the parent co	·				100 81	7 5000			
	e books are in car		MARK MILLIGAN, MNG D	LK-E			T THE THE T	03-71	7-5200			
Par		-	or Business Income	I	(A) Income		(B) Exper	ises		(C) Net		
1a	Gross receipts or											
b	Less returns and allows		c Balance ▶				to the case for the said	Additional	2 2 4 6 4	<u>tan da di Artenda di I</u>		
2			ule A, line 7)	2					<u> </u>	Line Report State of the A		
3			2 from line 1c	3				<u> 3. 37 Agra.</u>				
4a			ttach Schedule D)	4a				<u>. [] [] [] [] [] [] [] [] [] [</u>				
b	- ' '		Part II, line 17) (attach Form 4797)	4b				<u> </u>	-			
C			rusts	4c	COPY FOR	$\neg \neg$	A NAME OF THE PARTY OF THE PART	<u> </u>				
5	` '		os and S corporations (attach statement)	5	HPUBLIC INSPEC	TION H		<u>la manda asta </u>				
6	•			6								
7			come (Schedule E)	7								
8	-		nts from controlled organizations (Schedule F)	8					 			
9			1(c)(7), (9), or (17) organization (Schedule G)	9 10	58,8	883	3	8,908		19,975.		
10	•	-	ncome (Schedule I)	11	30,0	000.		0,000	' -	10,010.		
11 12			lule J)	12			* * * * * * * * * * * * * * * * * * *		+			
13	`		ough 12	13	58,8	883.	3	8,908		19,975.		
Par			Taken Elsewhere (See instr		·							
ı aı			be directly connected with t				, ,	<u> </u>	0. 00	ibationo,		
14			directors, and trustees (Schedule K)					14				
15												
16												
17												
18												
19												
20			See instructions for limitation rules)									
21			4562)		1	1	•					
22			on Schedule A and elsewhere on re					22b				
23	Depletion							23				
24			compensation plans									
25			3 ,									
26			Schedule I)					- 1				
27	Excess readership	costs (S	chedule J)					27				
28			chedule)									
29			s 14 through 28									
30			le income before net operating							19,975.		
31			on (limited to the amount on line 30							19,975.		
32			e income before specific deductior									
33			ally \$1,000, but see line 33 instruc							1,000.		
34	Unrelated busine	ess taxa	ble income. Subtract line 33 fr	om lir	ne 32. If line 33	is grea	iter than line 3	2,	1			

Form **990-T** (2015)

52-1273585 Page **2**

Par		Tax Computation	1							
35	Organi	zations Taxable as	Corporations.	See instructio	ns for tax com	putation.	Controlled gr	oup		
	member	rs (sections 1561 and 1	563) check here	See ins	tructions and:					
а	Enter y	our share of the \$50,0	000, \$25,000, and	\$9,925,000	axable income b	rackets (in	that order):	N. G.		
	(1) \$		(2)		(3)	•				
b	Enter or	rganization's share of: (1)	Additional 5% tax (r	not more than :	\$11,750)	\$				
		tional 3% tax (not more t						1,774		
С	Income	tax on the amount on line	пе 34					. ▶ 35c		
36	Trusts		_		for tax comp		Income tax			
	the amo	ount on line 34 from:	Tax rate schedule	or S	chedule D (Form 1	041)		. ▶ 36		
37	Proxy ta	ax. See instructions						. ▶ 37		
		ive minimum tax								
		dd lines 37 and 38 to line		ver applies		* * * * * *		39	VIII.	
		Tax and Payment				140		112.4		
		tax credit (corporations								
		redits (see instructions).								
		I business credit. Attach I								
		or prior year minimum ta						40-		
		edits. Add lines 40a thro								
42		t line 40e from line 39	m 4255 Form 86	11 Form	607 Form 88		or (attach schod)	ule) 42		
		x. Add lines 41 and 42								0.
		nts: A 2014 overpayment				1 1				
		stimated tax payments.								
		osited with Form 8868.								
		organizations: Tax paid				1 1				
		withholding (see instruct			•			N. 1		
		or small employer health				1 [
g	Other c	redits and payments:	Form	2439						
	F	orm 4136	Other	-	Total ▶	44g				
45	Total pa	ayments. Add lines 44a ti						45		
46	Estimat	ed tax penalty (see instru	ructions). Check if For	rm 2220 is atta	ched		►	46		
47	Tax due	e. If line 45 is less than th	the total of lines 43 a	and 46, enter ar	nount owed		<i>.</i>			
48		yment. If line 45 is larger				oaid				
49		e amount of line 48 you want:				4: -	Refunde			
Par		Statements Rega							in an aial 1	Yes No
1	•	time during the 2015 cal t (bank, securities, or othe	• .	-		-		-	 	Tes NO
		d Financial Accounts. If Y	•	•		lave to file	FINCEIN FOITH	i 14, ixepoit oi	roleigh	X
2		the tax year, did the orga		-	· -	ntor of or	transferor to a	foreign trust?	-	X
_		see instructions for other t					transfer to, a	roroign auct.	• • • • •	
3	•	ne amount of tax-exempt	•	•	_					
		A - Cost of Goods						*****		
1		ry at beginning of year .			T	end of yea	r	. 6		
2	Purchas	es	2				d. Subtract			
3	Cost of	labor	3		6 from lir	ne 5. Ent	ter here and	in		
4 a	Addition	nal section 263A costs			Part I, line 2			7		
	(attach	schedule)	4a		8 Do the r	ules of	section 263A	(with resp	ect to	Yes No
		osts (attach schedule)					or acquired	,		grint error
_5		dd lines 1 through 4b .	5	. 1 412						X
Qi	tru	nder penalties of perjury, I dec ue, correct, and complete. Declara						the pest of my	knowledge an	a belief, it is
Sigr				I	ימת 🖢	יים אישרו דים י	AND CEO		S discuss t	
Her		ignature of officer		Date	Title	TOTDENT	WIND CEO	with the p (see instruction	reparer shows)? X Yes	
		Print/Type preparer's name	le ·	Preparer's si		Date			PTIN	No
Paid		JOYCE UNDERWOO		One	Undenwood	/	/16/2017	Check if self-employed	P0002	2361
Prep			USA, LLP	- Frya		1/			13-5381	
Use	Only	Firm's address ▶ 8401		DRIVE, SU	ITE 800		,		703-893	
		L	AN, VA 2210						Form 99 6	0-T (2015)

Form 990-T (2015) Schedule C - Rent Income (see instructions)	e (From Real Pr	operty a	nd Personal Prope	erty	Leased W	th Real Prope	erty)	Page 3
1. Description of property								
(1)								
(2)								
(3)								
(4)								
(+)	2. Rent receiv	ed or accru	2d					
(a) From personal property (if the for personal property is more th more than 50%)	percentage of rent	(b) F	rom real and personal pro age of rent for personal pro if the rent is based on pro	operty	y exceeds			nected with the income) (attach schedule)
(1)								
(2)								
(3)								
(4)								
Total		Total						
						(b) Total deducti		
(c) Total income. Add totals of continuous and on page 1, Part I, line 6	, column (A)	_, ▶				Enter here and o Part I, line 6, colu		
Schedule E - Unrelated De	ebt-Financed In	come (se	e instructions)					
1. Description of deb	ot-financed property		Gross income from allocable to debt-finance			ductions directly co debt-finan line depreciation	ced propert	
			property			schedule)		attach schedule)
(1)								
(2)								
(3)								
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	 Average adjust of or allocab debt-financed p (attach sched 	le to roperty	6. Column 4 divided by column 5		come reportable 2 x column 6)		llocable deductions n 6 x total of columns 3(a) and 3(b))	
(1)				%				
(2)				%				
(3)				%				
(4)				%				
Totals	ione included in co			. >		and on page 1, 7, column (A).		ere and on page 1, line 7, column (B).
Schedule F - Interest, Ann	uities Rovaltie	s and R	ents From Contro	<u></u>			ictions)	
Thirduic 1 - Interest, Am	iditios, itoyaitio		empt Controlled Org			Ons (see many	ictions)	
Name of controlled organization	2. Employer identification num	nber 3	B. Net unrelated income (loss) (see instructions)	4 . T	otal of specified	5. Part of column included in the corganization's gro	controlling	6. Deductions directly connected with income in column 5
(1)								
(2)								
(3)								
(4)								
Nonexempt Controlled Organ	vizatione			l		1		
7. Taxable Income	8. Net unrelated		9. Total of specific		includ	rt of column 9 that is ed in the controlling	cor	Deductions directly nected with income in
(4)	(loss) (see instru	ionoria)	payments made		organiz	ation's gross income		column 10
(1)								
(2)								
(3)								
(4)								
Totals					Enter I	columns 5 and 10. nere and on page 1, , line 8, column (A).	Ent	dd columns 6 and 11. ter here and on page 1, rt I, line 8, column (B).

Form **990-T** (2015)

Schedule G - Investment In	ncome of a Sec	tion 501(c)(7),		nizati	on (see insti	ructio	ons)	
1. Description of income	2. Amount of			Deductions directly connected (attach schedule)		4. Set- (attach s	aside	s	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)									
(2)									
(3)									
(4)									
	Enter here and Part I, line 9, c								inter here and on page 1, Part I, line 9, column (B).
Totals								344,1334	
Schedule I - Exploited Exe	empt Activity In	come, Othe	r Th	an Advertising In	com	e (see instruc	ction	s)	
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expense directly connected v production unrelated business inco	vith of	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	fron is 1	Gross income n activity that not unrelated iness income	at	. Expenses tributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) ATCH 1									
(2)									
(3)		-							
(4)									
Totals	Enter here and on page 1, Part I, line 10, col. (A).	Enter here an page 1, Par line 10, col.	t I, (B).						Enter here and on page 1, Part II, line 26.
Schedule J - Advertising In				-		<u> </u>			
Part I Income From Per			nsol	idated Basis					
1. Name of periodical	2. Gross advertising advertising costs income 4. Advertising gain or (loss) (cost) (c		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		6. Readership costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4).	
				cols. 5 through 7.					Column 4).
(1)									
(2)									
(3)									
(4)									
Part II Income From Per 2 through 7 on a I	riodicals Repo		Sepa	rate Basis (For e	each	periodical li	sted	d in Part I	, fill in columns
1. Name of periodical	2. Gross advertising income	3. Direct advertising o		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5.	Circulation income			7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
Totals from Part I									3
Totals, Part II (lines 1-5) ▶	Enter here and on page 1, Part I, line 11, col. (A).	Enter here an page 1, Par line 11, col.	t I,						Enter here and on page 1, Part II, line 27.
Schedule K - Compensatio	n of Officers. D	irectors, a	nd Tı	rustees (see instru	ctions	3)			
1. Name	,			2. Title		3. Percent of time devoted to business)		sation attributable to lated business
(1)							%		
(2)							%		
(3)			******		_ -		%		
(4)							%		
Total. Enter here and on page 1, P	Part II, line 14					, , ,	>		
			<u> </u>	<u> </u>			- 1		Form 990-T (2015)

GLOBAL IMPACT 52-1273585

SCHEDULE I - EXPLOITED EXEMPT ACTIVITY INCOME, OTHER THAN ADVERTISING INCOME

ATTACHMENT 1 2. GROSS 3. 6. 7. UNRELATED EXPENSES 4. 5. EXPENSES EXCESS 1. BUSINESS DIRECTLY NET INCOME GROSS INCOME ATTRIBUTABLE EXEMPT EXPLOITED ACTIVITY INCOME OR (LOSS) TO COL. 5 EXPENSES CONNECTED FROM ACTIVITY FINANCE SERVICES 58,883. 38,908. 19,975.

COLUMN TOTALS 58,883. 38,908.

ATTACHMENT 1

2339IV 70IM 2/20/2017 10:07:18 AM V 15-7.18 132569 PAGE 81

GLOBAL IMPACT 52-1273585

FEDERAL FOOTNOTES

FORM 990-T NET OPERATING LOSS CARRYOVER SCHEDULE

TAX YEAR	ORIGINAL LOSS	AMOUNT USED 6/30/16	AMOUNT CARRIED FORWARD
06/30/14 06/30/15	12,120 7,956	12,120 7,855	0 101
TOTALS	20,076	19,975	101

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

 If you are 	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Month Extension, of the filing for an Additional (Not Automatic) 3-Month Extension, of the filing for an Automatic 3-Month Extension (Not Automatic) 3-Month Extension (Not Automatic	onth Exten	sion, complete only Pa	art II (on page 2 of this form).	
Do not comp	olete Part II unless you have already been gra	nted an au	tomatic 3-month extens	sion on a previously filed Form	1 8868.
a corporatio 8868 to red Return for	iling (e-file). You can electronically file Form n required to file Form 990-T), or an addition quest an extension of time to file any of the Transfers Associated With Certain Persona . For more details on the electronic filing of the	nal (not aut forms liste al Benefit (tomatic) 3-month exten ed in Part I or Part II w Contracts, which must	ision of time. You can electro ith the exception of Form 88 t be sent to the IRS in pa	nically file Form 370, Information per format (see
Part I Au	tomatic 3-Month Extension of Time. Or	ıly submit	original (no copies ne	eeded).	
	n required to file Form 990-T and requesting				
All other cor	porations (including 1120-C filers), partnersh	nips, REMIC	Cs, and trusts must use I	Form 7004 to request an exten	
to file incom	e tax returns. Name of exempt organization or other filer, see in	atrustions		Enter filer's identifying num	
Type or	Employer identification number (EIN) or			
print	GLOBAL IMPACT			52-1273585	
File by the due date for	Number, street, and room or suite no. If a P.O. bo	x, see instru	ctions.	Social security number (SSN)	
filing your	1199 NORTH FAIRFAX ST, SUITE 3				
return. See instructions.	City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions.		
	ALEXANDRIA, VA 22314				
Enter the Re	eturn code for the return that this application	is for (file a	a separate application fo	or each return)	0 7
Application		Return	Application		Return
ls For		Code	ls For		Code
Form 990 or	r Form 990-EZ	01	Form 990-T (corporat	ion)	07
Form 990-B	<u>L</u>	02	Form 1041-A		08
Form 4720	(individual)	03	Form 4720 (other tha	n individual)	09
Form 990-PI		04	Form 5227		10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telephon	MARK MILLIGAN, s are in the care of ► 1199 N FAIRFAX e No. ► 703 717-5200 anization does not have an office or place of	ST #300 	ALEXANDRIA, VA FAX No. ►703 71	17-5215	▶□
	or a Group Return, enter the organization's fo				. If this is
for the whol	e group, check this box	f it is for pa	art of the group, check t	this box ▶ aı	nd attach
a list with the	e names and EINs of all members the extens	ion is for.			
until_ for the ► X	est an automatic 3-month (6 months for a corest an automatic 3-months for a corest an automatic 3-months for a corest an automatic 3-months for a corest and automatic 3-months for a corest an automatic 3-months for a corest an automatic 3-months for a corest and automatic 3-months for a cores	exempt org	ganization return for the	organization named above.	
	ax year entered in line 1 is for less than 12 m Change in accounting period				
	application is for Form 990-BL, 990-PF, 99 undable credits. See instructions.	90-T, 4720	, or 6069, enter the	tentative tax, less any 3a \$	0.
	application is for Form 990-PF, 990-T,	4720, or	6069, enter any re		
	ited tax payments made. Include any prior yea			1 1	0.
c Balanc	ce due. Subtract line 3b from line 3a. Include	your paym	ent with this form, if re		
(Electr	onic Federal Tax Payment System). See instru	ctions.		3c \$	0.
Caution. If yo	u are going to make an electronic funds withdrawa	l (direct deb	it) with this Form 8868, se	ee Form 8453-EO and Form 8879	-EO for payment
instructions.					

Form 8868 (Rev. 1-2014)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Financial Statements and Supplemental Material Years Ended June 30, 2016 and 2015



Financial Statements and Supplemental Material Years Ended June 30, 2016 and 2015

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Tel: 703-893-0600 Fax: 703-893-2766 www.bdo.com 8401 Greensboro Drive, Suite 800

McLean, VA 22102

Independent Auditor's Report

To the Board of Directors Global Impact Alexandria, Virginia

Report on the Financial Statements

We have audited the accompanying financial statements of **Global Impact**, which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities, changes in net assets, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

BDO USA, LLP, a Delaware limited liability partnership, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

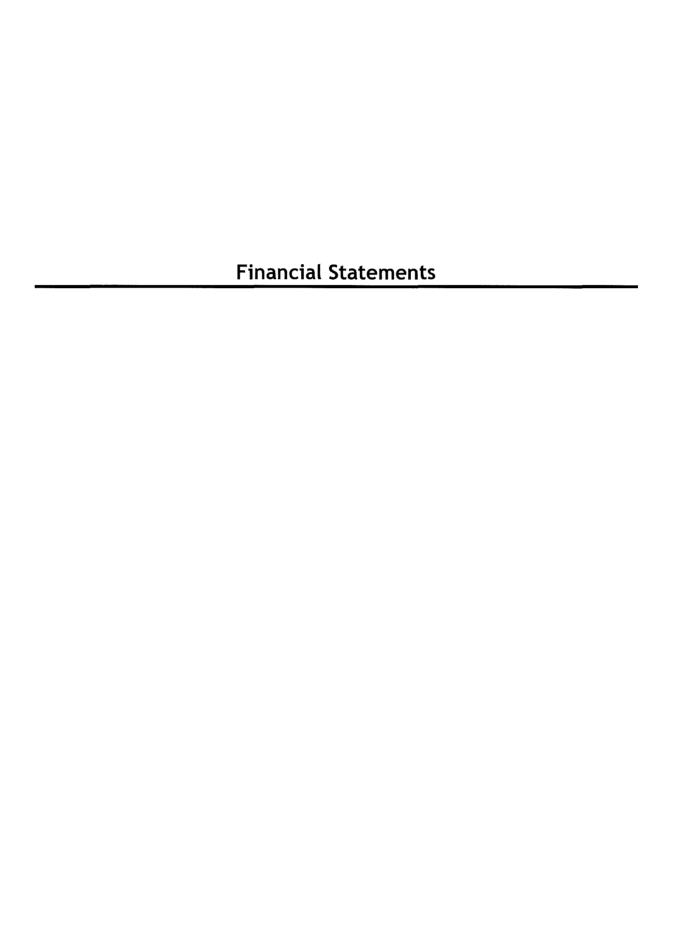


Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Global Impact as of June 30, 2016 and 2015, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

TODO USA, LLD

October 27, 2016



Statements of Financial Position

June 30,	2016	2015
Assets		
Cash and cash equivalents	\$ 3,062,955	\$ 3,531,743
Pledges receivable (net of shrinkage for		
uncollectible pledges of \$744,575		
and \$728,899, respectively)	16,709,704	19,306,907
Accounts receivable	504,053	469,778
Due from Combined Federal Campaigns	1,378,234	152,953
Investments	1,108,393	1,086,905
Property and equipment, net	965,650	1,106,615
Other assets	162,123	106,031
Total assets	\$ 23,891,112	\$ 25,760,932
Liabilities and Net Assets		
Liabilities		
Lines-of-credit	\$ 1,164,574	\$ 83,642
Accounts payable	202,022	590,383
Accrued expenses	961,751	720,176
Campaign funds payable to member charities	14,751,973	16,615,673
Donor advised funds payable	197,330	574,017
Other distributions payable	1,347,801	425,016
Deferred revenue	69,853	-
Deferred rent liability	860,472	895,330
Total liabilities	19,555,776	19,904,237
Commitments and Contingencies		
Net Assets		
Unrestricted		
Available for general use	4,335,336	5,356,695
Opportunity fund	#	500,000
Total net assets	4,335,336	5,856,695
Total liabilities and net assets	\$ 23,891,112	\$ 25,760,932

Statements of Activities

Years ended June 30,	2016	2015
Amounts Raised in Campaigns (Net of campaign expense and shrinkage)		
Combined Federal Campaigns	\$ 5,942,211 \$	5,621,816
State government employee	2,057,453	2,056,897
Private sector employee	1,780,339	1,940,549
Employee campaigns - indirect payments	9,274,461	12,753,759
Local government employee	540,618	627,258
Total Raised in Campaigns	19,595,082	23,000,279
Less: distributions to member charities	18,910,100	22,101,199
Public support designated to Global Impact	684,982	899,080
Revenue, gains and other support		
Donor advised funds	3,534,438	5,962,705
Administrative charges for raising funds on behalf of others	3,770,997	5,328,323
Non-recurring giving for international relief and development	4,211,472	2,078,626
Advisory services, program grants and related revenue	2,211,376	1,666,366
Program support services	418,869	503,010
Cost share reimbursements	-	85,496
Net investment return	20,688	(16,333)
Contributions	36,183	35,716
Other revenue	47	201
Total revenue, gains and other support	14,204,070	15,644,110
Total public support, revenue, gains and other support	14,889,052	16,543,190
Expenses		
Program Services		
Distribution to charities		
Donor advised funds	3,534,438	5,962,705
International relief and development	3,774,423	1,954,985
Total distributions to charities	7,308,861	7,917,690
Campaign Support		
General campaigns	1,918,555	2,053,207
Special programmatic services	2,547,184	1,769,334
Donor advised funds	295,794	75,529
Total campaign support	4,761,533	3,898,070
Total program services	12,070,394	11,815,760
Supporting Services		
Management and general	3,711,333	3,948,574
Fundraising	628,684	778,856
Total supporting services	4,340,017	4,727,430
Total expenses	16,410,411	16,543,190
Change in unrestricted net assets	\$ (1,521,359) \$	_

Global Impact
Statements of Changes in Net Assets

	General Use	Microsoft Gift Fund	Opportunity Fund	Total	
Net assets, June 30, 2014	\$ 5,146,818	\$ 209,877	\$ 500,000	\$ 5,856,695	
Change in net assets	-	-	-	-	
Transfers	209,877	(209,877)	-	·	
Net assets, June 30, 2015	5,356,695	-	500,000	5,856,695	
Change in net assets	(1,521,359)	-	-	(1,521,359)	
Transfers	500,000		(500,000)		
Net assets, June 30, 2016	\$ 4,335,336	\$ -	\$ -	\$ 4,335,336	

Statements of Cash Flows

Years ended June 30,	 2016	2015
Cash flows from operating activities		
Change in unrestricted net assets	\$ (1,521,359)	\$ -
Adjustments to reconcile change in unrestricted net assets to		
net cash used in operating activities:		
Net unrealized losses on investments	3,811	86,900
Depreciation and amortization	203,027	413,620
Bad debt expense	754,535	-
Loss on disposal of property and equipment	658	-
(Increase) decrease in assets		
Pledges receivable	1,842,668	(7,138,815)
Accounts receivable	(34,275)	(68,182)
Due from Combined Federal Campaigns	(1,225,281)	16,543
Other assets	(56,092)	5,954
Increase (decrease) in liabilities	(11,11,1)	-,
Accounts payable	(388,361)	419,625
Accrued expenses	241,575	223,444
Campaign funds payable to member charities	(1,863,700)	5,570,286
Donor advised funds payable	(376,687)	(200,791)
Other distributions payable	922,785	286,635
Deferred revenue	69,853	-
Deferred rent liability	(34,858)	76,446
Net cash used in operating activities	(1,461,701)	(308,335)
Cash flows from investing activities	<u> </u>	
Purchases of investments	(56,745)	(730,185)
Proceeds from sales of investments	31,446	669,823
Purchases of property and equipment	(62,720)	(63,251)
Net cash used in investing activities	(88,019)	(123,613)
Cash flows from financing activities		
Repayments on lines-of-credit	(1,289,922)	(1,032,248)
Borrowings on lines-of-credit	2,370,854	1,021,427
Net cash provided by (used in) financing activities	 1,080,932	(10,821)
Net decrease in cash and cash equivalents	 (468,788)	(442,769)
Cash and cash equivalents, beginning of year	3,531,743	3,974,512
Cash and cash equivalents, end of year	 	
- and and equivalence, and or year	\$ 3,062,955	\$ 3,531,743

Notes to Financial Statements

1. Summary of Accounting Policies

Organization Purpose

Global Impact's vision is to be the leader in growing global philanthropy and its mission is to build partnerships and resources for the world's most vulnerable people. Its primary activities include:

- a) Participating in nearly 450 workplace giving campaigns including the federal government, state governments, local governments and private workplaces to provide a means for employees of participating institutions to donate either to Global Impact or to its more than 120 member charities;
- b) Creating alliances with funding organizations to address specific relief or development needs in developing countries;
- c) Provide philanthropic services including campaign management services, secretariat services, focused signature and high impact fund campaign management services including employer-based emergency relief campaigns, advisory services, support services, state charitable registration services and the management of donor advised funds;
- d) Distribute funds raised on behalf of member charities to them based on criteria established by the Board of Directors;
- e) Adherence to distributions formulae established by the Board of Directors for other funds raised; and
- f) Performing such other charitable and educational activities as may be necessary in order to support or accomplish the foregoing.

Basis of Accounting

Global Impact's financial statements are prepared using the accrual basis of accounting.

Cash and Cash Equivalents

Global Impact considers cash on hand, deposits in banks, and investments purchased with an original maturity of three months or less to be cash and cash equivalents other than those included in Global Impact's investment portfolio.

Pledges Receivable

Pledges are recorded in the financial statements upon receipt of pledge information from the campaigns. Global Impact honors designations made to each member organization. As all pledges are expected to be collected within one year, they are recorded at their net realizable value. This is achieved by creating an allowance for estimated uncollectible pledges and for estimated campaign expenses. At the end of each fiscal year, any amounts receivable from the previous year's campaign are written off. Subsequent receipts relating to such amounts are set off against the shrinkage expense.

Notes to Financial Statements

Accounts Receivable

Accounts receivable consists primarily of amounts due from member charities and other corporate clients for which Global Impact provides advisory, cooperative advertising, secretariat services, and fund management services. There is no allowance for doubtful accounts due to management's belief that all accounts receivable are collectible.

Investments

Investments are stated at fair value. Shares of mutual funds are valued at quoted market prices which represent the net asset value of shares held by Global Impact at year-end.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is accrued when earned. Dividends are recorded on the ex-dividend date. Unrealized and realized gains and losses are included in the statements of activities.

Property and Equipment

Property and equipment with unit values in excess of \$1,000 are recorded at cost. Depreciation is provided for using the straight-line method of depreciation over the estimated useful lives of the assets which range from three to ten years. Leasehold improvements are amortized on the straight-line basis over the lesser of the estimated service lives of the assets or the remaining lease term. Assets acquired under capital leases are recorded at the lower of the present value of the future minimum lease payments or the fair value of the assets. The assets are amortized over the lesser of the related lease term or their estimated useful life. Cost and related accumulated depreciation and amortization are removed from the accounts when the assets are disposed of, with any gain or loss recognized currently. Repairs and maintenance are charged to expense when incurred.

Campaign Funds Payable to Member Charities

Pledges that are designated to charity alliance members are recorded as campaign funds payable to member charities. Cash received from campaigns is distributed to each participating member charity in the ratio of its designated pledges to total Global Impact pledges from the relevant campaign. Prior to the monthly distribution of the campaign receipts to the member charities, Board approved expenses less undesignated pledges and other non-designated revenues are deducted on the same ratio as designated pledges and are recorded as administrative charges for raising funds on behalf of others.

Deferred Rent Liability

A deferred rent liability has been recorded to reflect the benefit of lease incentives in the lease of the office space. The benefits of the lease incentives, including free rent and a tenant improvement allowance, are being recognized ratably over the term of the lease.

Notes to Financial Statements

Unrestricted Net Assets

Global Impact's unrestricted net assets are composed of the following:

Available for General Use

Unrestricted amounts to be used for Global Impact's ongoing operations.

Microsoft Gift Fund

In 2012, the Board authorized the establishment of a fund in which to record an in-kind gift of software from Microsoft. The fund is reduced by the amount of the annual amortization expense pertaining to the software.

Opportunity Fund

The Board authorized this fund in 1994 to make funds available for new opportunities in accordance with the mission of Global Impact. Effective June 30, 2004, at management's request, the Board set a limit of \$500,000 for the Opportunity Fund. In July 2016, the Board authorized to release the designation of the Opportunity Fund effective May 2016.

Temporarily Restricted Net Assets

Global Impact reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets by time or purpose. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statements of activities as net assets released from restrictions. As of June 30, 2016 and 2015, Global Impact had no temporarily restricted net assets.

Revenue Recognition

Revenue is recognized in the period in which it is earned. Revenue received in advance is deferred to the applicable period. Some workplace campaigns choose to distribute employee charitable contributions directly to member charities. Campaigns in which Global Impact and its funded charities actively participate are recorded based on campaign reports received from the employee campaigns. These direct payments are presented under amounts raised in campaigns in the statements of activities.

In-Kind Contributions

Donated property and equipment is recorded at fair value at the date of donation. If the donors stipulate how long assets must be used, the contributions are recorded as restricted support. In the absence of such stipulations, contributions of property and equipment are recorded as unrestricted support.

Notes to Financial Statements

Global Impact records donated services, including consulting and speaker fees, at their estimated fair value when they create or enhance nonfinancial assets or they require specialized skills which would need to be purchased if they were not donated. For the years ended June 30, 2016 and 2015, Global Impact received no in-kind contributions.

Expenses

Expenses are recognized by Global Impact during the period in which they are incurred. Expenses paid in advance and not yet incurred are deferred to the applicable period.

Donor advised funds consist of amounts distributed to member charities and other charities from contributions raised through workplace giving under donor advised fund agreements. Non-recurring giving for international relief and development are non-recurring contributions made for disaster response and other programs from sources other than annual workplace giving campaigns.

Campaign support consists of costs associated with increasing overall recognition and representation of funded charities; costs that benefit the overall campaign; and expenses incurred under cost-sharing arrangements. Special programmatic services expenses consist of costs associated with advisory, fiscal agent, grant, signature and high impact fund and secretariat programs.

Management and general expenses consist of costs directly related to the overall operations of Global Impact and maintenance of its corporate existence, including general office management, reception, and financial reporting. Fundraising includes those costs associated with accessing new workplace fundraising campaigns.

Functional Allocation of Expenses

The costs of providing various program and supporting services have been summarized on a functional basis in the statements of activities. Accordingly, certain costs have been allocated among the program and supporting services benefited.

Financial Instruments and Credit Risk

Financial instruments which potentially subject Global Impact to concentrations of credit risk consist principally of cash balances and pledges receivable. At June 30, 2016, Global Impact had deposits in a single financial institution totaling approximately \$3.1 million in excess of the Federal Depository Insurance limit. Global Impact has never experienced any losses related to these balances and believes it is not exposed to any significant credit risk on its cash balances. Credit risk with respect to pledges receivable is limited because Global Impact participates with a significant number of campaigns whose participants are spread over a wide geographic region.

Use of Estimates

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America (GAAP or U.S. GAAP) requires management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Notes to Financial Statements

Income Tax Status

Global Impact is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. In addition, Global Impact is classified by the Internal Revenue Service as an organization that is not a private foundation. Global Impact is required to report unrelated business income to the Internal Revenue Service and the Commonwealth of Virginia taxing authorities. Global Impact's source of unrelated business income consists of a portion of the advisory services income. No provision for income taxes has been made at June 30, 2016 and 2015 as expenses offset taxable income.

Under Accounting Standards Codification (ASC) 740-10, Accounting for Uncertainty in Income Taxes, Global Impact must recognize the tax benefit associated with tax positions taken for tax return purposes when it is more-likely than not that the position will be sustained. Global Impact does not believe there are any unrecognized tax benefits or liabilities that should be recorded. For the years ended June 30, 2016 and 2015, there were no interest or penalties recorded or included in the statements of activities. Global Impact is still open to examination by taxing authorities from fiscal year 2013 forward.

Reclassification

Certain accounts in the 2015 financial statements have been reclassified to conform with the current year financial statement presentation.

2. Due from Combined Federal Campaigns (CFC)

Global Impact has been the Principal Combined Fund Organization (PCFO) for the Department of Defense Combined Federal Campaign (the Overseas Campaign or Overseas) since 1996, and for the National Capital Area's Combined Federal Campaign (the National Capital Area Campaign or NCA) from 2003 to 2012. Starting in 2016, Global Impact became the PCFO again for NCA. Also in 2016, Global Impact became the PCFO for Combined Federal Campaign of Central Virginia (Central Virginia Campaign) and the Combined Federal Campaign of New York City (New York City Campaign). Global Impact pays for the expenses of the CFC Programs and is reimbursed from funds collected. Amounts due to Global Impact from the CFC for unreimbursed expenditures and advances as of June 30, 2016 and 2015 consist of the following:

June 30,	2016	2015
Overseas Campaign	\$ 206,039	\$ 152,953
National Capital Area Campaign	1,079,896	· · · · · ·
Central Virginia Campaign	33,241	-
New York City Campaign	59,058	*
	\$ 1,378,234	\$ 152,953

Notes to Financial Statements

3. Fair Value of Financial Investments

Global Impact follows the provisions of ASC 820, Fair Value Measurements, in accounting for the fair value of financial investments. ASC 820 establishes a common definition for fair value to be applied under generally accepted accounting principles requiring use of fair value, establishes a framework for measuring fair value, and expands disclosures about such fair value measurements.

ASC 820 defines fair value as the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants at the measurement date. ASC 820 establishes a hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the observable inputs be used when available.

Observable inputs are inputs that market participants operating within the same marketplace as Global Impact would use in pricing its asset or liability based on independently derived and observable market data. Unobservable inputs are inputs that cannot be sourced from a broad active market in which assets or liabilities identical or similar to those of Global Impact are traded. The input hierarchy is broken down into three levels based on the degree to which the exit price is independently observable or determinable as follows:

Basis of Fair Value Measurement:

Level 1: Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities:

Level 2: Quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly;

Level 3: Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Investments measured at fair value on a recurring basis consist of the following based on the fair value hierarchy noted above:

June 30, 2016

	m	Quoted prices in active Significant Significant markets for other other identical observable unobservable assets (level 1) inputs (level 2) inputs (level 3)				ner ervable			
Mutual funds - equities Mutual funds - fixed income Money market fund	\$	625,362 362,123 120,908	\$	-	\$	- - -	\$	625,362 362,123 120,908	
Total assets at fair value	\$	1,108,393	\$	-	\$	-	\$ [^]	1,108,393	

Notes to Financial Statements

June 30, 2015	ir ma ic	ted prices nactive rkets for lentical ts (level 1) i	Signifi othe observ inputs (le	er able	Significa other unobserva inputs (leve	ble		llance as June 30, 2015
Mutual funds - equities Mutual funds - fixed income Money market fund	\$	615,215 354,271 117,419	\$		\$	- - -	\$	615,215 354,271 117,419
Total assets at fair value	\$ ·	1,086,905	\$		\$	-	\$	1,086,905
4. Investments								
Investments consist of the following	g:							
June 30,					2016			2015
Mutual funds - equities Mutual funds - fixed income Money market fund				\$	625,362 362,123 120,908	į		515,215 354,271 117,419
				\$ 1	,108,393	9	5 1,(086,905
Net investment return consists of the	he foll	owing:						
Years ended June 30,					2016			2015
Interest and dividends Net realized (losses) gains Net unrealized losses				\$	29,346 (4,847) (3,811)	\$		36,751 33,816 (86,900)
				\$	20,688	\$	ı	(16,333)
5. Property and Equipment Property and equipment consists of	the f	ollowing at:						
June 30,	uie it	Mownig at.			2016			2015
Office furniture and equipment Leasehold improvements Software					592,037 898,668 ,013,070	(1,0	576,974 898,073 013,070 488,117
Less accumulated depreciation and	l amor	tization			, 1,538,125)		Í	381,502)
				\$	965,650	9	\$ 1,	106,615

Notes to Financial Statements

Depreciation and amortization expense for the years ended June 30, 2016 and 2015 was \$203,027 and \$413,620, respectively.

6. Lines-of-Credit

Global Impact maintains four revolving line-of-credit arrangements to administer the CFC Programs. The first agreement had a maximum borrowing amount of \$1,000,000 that had an expiration of March 2016. This was renewed in January 2016 and has a tiered borrowing structure based on the life cycle of the related CFC campaign with borrowing amount ranging from \$500,000 to \$1,000,000. The second agreement has a tiered borrowing structure based on the life cycle of the related CFC campaign with borrowing amount ranging from \$1,000,000 to \$4,000,000. The third agreement has a maximum borrowing amount of \$150,000. The fourth agreement has a tiered borrowing structure based on the life cycle of the related CFC campaign with borrowing amount ranging from \$150,000 to \$350,000. The four agreements will expire on March 2017. The interest rate is based on the LIBOR daily floating rate plus 2.25%. The interest rate was 2.71% and 2.44% as of June 30, 2016 and 2015, respectively. The lines-of-credit are secured by a blanket lien on Global Impact's receivables and property and equipment. The amount due on the lines-of-credit was \$1,164,574 and \$83,642 as of June 30, 2016 and 2015, respectively. Interest expense incurred and paid for the years ended June 30, 2016 and 2015 was \$13,783 and \$6,868, respectively.

7. Amounts Raised in Campaigns

Public support on the statements of activities is represented net of estimated campaign expenses incurred by other organizations and estimated shrinkage of the campaigns. Global Impact includes funds raised in combined federal campaigns (CFC) and other campaigns that are distributed directly to its charity alliance members if Global Impact has had substantial involvement in that campaign. The following tables present gross pledges raised by Global Impact and the reconciliation to net amounts raised in campaigns.

Campaigns for the year ended June 30, 2016:

	Gross Pledges	Shrinkage	Campaign Expenses	Net Pledges
Combined Federal Campaigns	\$ 7,485,398	\$ (510,308)	\$(1,032,879)	\$ 5,942,211
State government employee	2,328,926	(82,664)	(188,809)	2,057,453
Private sector employee	1,948,443	(116,296)	(51,808)	1,780,339
Employee campaigns -		, , ,	, , ,	
indirect payments	9,290,076	(6,692)	(8,923)	9,274,461
Local government employee	602,115	(28,615)	(32,882)	540,618
	\$ 21,654,958	\$ (744,575)	\$(1,315,301)	\$ 19,595,082

Notes to Financial Statements

Campaigns for the year ended June 30, 2015:

	Gross Pledges	Shrinkage	Campaign Expenses	Net Pledges	
Carehina d. E. danal Carenaina	Ć 7.020.020	Ć /4E4 40E)	ć (0.44 727)	Ć 5 (24 04)	
Combined Federal Campaigns	\$ 7,020,038	\$ (451,485)	\$ (946,737)	\$ 5,621,816	
State government employee	2,338,447	(91,903)	(189,647)	2,056,897	
Private sector employee	2,135,015	(140,650)	(53,816)	1,940,549	
Employee campaigns -			, , ,	, ,	
indirect payments	12,791,104	(17,631)	(19,714)	12,753,759	
Local government employee	692,212	(27,230)	(37,724)	627,258	
	\$ 24,976,816	\$ (728,899)	\$(1,247,638)	\$ 23,000,279	

8. Pension Plan

Global Impact has a retirement plan called the Global Impact 401(k) Profit Sharing Plan and Trust, which has two components, a money purchase pension plan and a 401(k) plan. The money purchase pension plan covers all full-time employees who have met the eligibility requirements during the plan year.

During the years ended June 30, 2016 and 2015, Global Impact contributed ten percent as defined in the money purchase plan, of each eligible employee's annual salary to the plan, subject to certain statutory limits. For the years ended June 30, 2016 and 2015, contributions totaled \$434,839 and \$348,827, respectively.

Under the terms of the 401(k) profit sharing plan, eligible employees may make contributions to the extent allowed by law. Global Impact will match employee contributions up to a maximum of five percent of a participant's compensation. For the years ended June 30, 2016 and 2015, contributions totaled \$185,640 and \$145,763, respectively.

9. Deferred Compensation Plan

In September 2015, Global Impact established a nonqualified deferred compensation plan for a key employee. Global Impact has assets totaling \$18,679 and \$0 as of June 30, 2016 and 2015, respectively, which are included in the accompanying statements of financial position under other assets. The assets are to be used to satisfy the deferred compensation liability included in the accompanying statements of financial position under accrued expenses. Global Impact's contribution to this plan were \$18,000 and \$0 for the years ended June 30, 2016 and 2015, respectively.

All of the Global Impact's investments related to this plan have been identified as Level 1 in the fair value hierarchy as they have values based on quoted prices in active markets for identical assets based on the criteria included in ASC 820, "Fair Value Measurements and Disclosures". Investment gains and losses from the deferred compensation investments are recorded directly to the asset account and the corresponding liability account.

Notes to Financial Statements

10. Lease Commitments

On November 7, 2013, Global Impact entered into an eleven-year lease agreement for a new office space commencing on March 2014 through February 2025. The lease contains rent escalations of approximately 2.75% annually and a fixed rent abatement in the amount of \$243,328 applied towards the first two-year period. In addition, the landlord made concessions to pay for the leasehold improvements up to \$730,015.

Global Impact is obligated under several operating leases for office equipment, which expire in 2017.

Future annual commitments under these leases are as follows:

γ	'ears	Ending	g June	30,
_				

2017	\$ 358,015
2018	342,867
2019	347,487
2020	357,034
2021	366,879
Thereafter	1,432,327
	\$ 3,204,609

Rent expense for the years ended June 30, 2016 and 2015 was \$298,867 and \$312,490, respectively.

11. Commitments and Contingencies

Employment Agreement

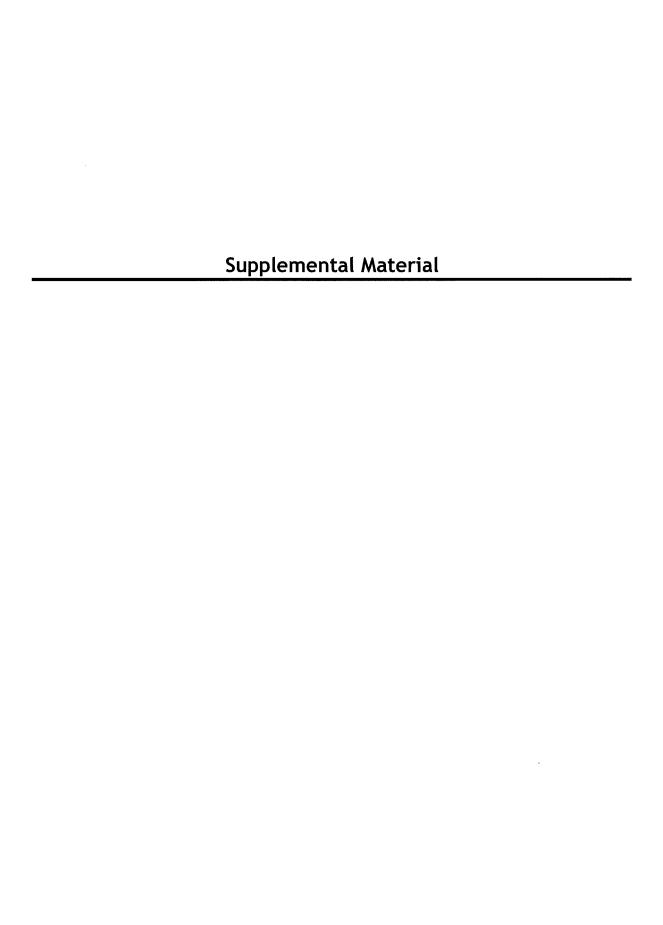
Global Impact has a long-term contract with an employee that extends through April 2018. If the agreement is terminated without cause, the employee shall continue to receive base salary and full benefits for twenty-four months or until April 2018, whichever comes first.

OIG/OPM Audits

As the PCFO of the CFC Programs, Global Impact is subject to audit by the Inspector General, U.S. Office of Personnel Management (OIG/OPM), U.S. Office of Management and Budget and the U.S. Government Accountability Office. For the years ended June 30, 2016 and 2015, no audits have been performed by the Inspector General.

12. Subsequent Events

Global Impact evaluated subsequent events through October 27, 2016 which is the date the financial statements were available to be issued. There were no events noted that required adjustment to or disclosure in these financial statements.







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Independent Auditor's Report on Supplemental Material

To the Board of Directors Global Impact Alexandria, Virginia

Our audits of the financial statements included in the preceding section of this report were conducted for the purpose of forming an opinion on those statements as a whole. The supplemental material presented in the following section of this report is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

BOO USA, LLP

October 27, 2016

Global Impact
Schedule of Functional Expenses (With Comparative Totals for the Year Ended June 30, 2015)

Years ended June 30,	2016					2015			
		Program Services Support				Supportin	ting Services		
	Distribution to Charities		Campaign Support		,				
	Donor Advised Funds	International Relief and Development	General Campaigns	Special Programmatic Services	Donor Advised Funds	Management and General	Fundraising	Total	Total
Salaries - headquarters and field	\$ -	\$ -	\$ 1,116,960	\$ 1,330,689	\$ 131,429	\$ 1,323,242	\$ 301,995	\$ 4,204,315	\$ 4,284,341
Employee fringe benefits	-	-	297,042	409,436	38,901	389,243	86,268	1,220,890	1,151,740
Bad debt expense	-	-	-	-	-	754,535	-	754,535	-
Consulting services	-	-	48,313	215,157	101,245	183,160	74,420	622,295	639,122
Campaign material and expenses	-	-	307,527	50,535	276	32,658	51,670	442,666	648,392
Rent and occupancy	-	-	61,211	99,417	11,161	105,787	21,291	298,867	312,490
Travel	-	-	53,931	42,449	4,637	92,175	59,988	253,180	231,756
Office supplies and expenses	-	-	18,268	78,470	2,741	127,792	23,811	251,082	320,809
Depreciation and amortization	-	-	-	-	-	203,027	-	203,027	413,620
Legal	-	-	-	-	-	169,369	-	169,369	190,654
Data network operations	-	-	-	944	5,404	139,604	_	145,952	167,184
Accounting and auditing	-	-	-	-	-	66,697	-	66,697	74,643
Telephone	-	-	10,665	5,674	-	47,256	6,227	69,822	64,838
Insurance	-	-	-	-	-	56,535	-	56,535	49,550
Conferences and seminars	-	-	4,638	69	-	19,595	3,014	27,316	76,361
Loss on disposal of property and equipment	-	-	-	-	-	658	-	658	-
Distributions to members and others	3,534,438	3,774,423	_	314,344		_		7,623,205	7,917,690
Total	\$ 3,534,438	\$ 3,774,423	\$ 1,918,555	\$ 2,547,184	\$ 295,794	\$ 3,711,333	\$ 628,684	\$ 16,410,411	\$ 16,543,190