

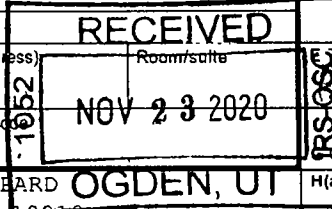
Form 990 (Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2019 Open to Public Inspection

Header section A-M containing organization name (FUND FOR POLICY REFORM, INC.), EIN (26-4351242), address (224 WEST 57TH STREET, NEW YORK, NY 10019), and tax-exempt status (501(c)(3)).



SCANNED JAN 05 2022

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include mission statement, revenue (Total: 227,936,050), expenses (Total: 16,796,831), and net assets (End of Year: 675,584,925).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer MAIJA ARBOLINO, TREASURER, dated 11/13/20.

Preparer information: MARGARET A BRADSHAW, KPMG, dated 11/15/2020.

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019)

Handwritten number 638

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 202,182,513 including grants of \$ 201,541,421) (Revenue \$)
INSTITUTIONAL GRANTS - INSTITUTIONAL GRANTS WERE PROVIDED TO
SUPPORT THE GRANTEES' OPERATIONS AND ACTIVITIES WHICH ADVOCATE FOR
THE REFORM OF LAWS AND REGULATIONS THAT AFFECT THE PUBLIC WELFARE.

4b (Code) (Expenses \$ 4,929,141 including grants of \$ 1,750,000) (Revenue \$)
REGIONAL PROGRAMS - REGIONAL PROGRAMS ENGAGE IN MUTIPLE ISSUES,
SUCH AS DEMOCRATIC PRACTICE, EARLY CHILDHOOD & EDUCATION, ECONOMIC
JUSTICE, ETC. ACROSS A DEFINED GEOGRAPHIC AREA.

4c (Code) (Expenses \$ 365,550 including grants of \$) (Revenue \$)
THEMATIC PROGRAMS - THEMATIC PROGRAMS ENGAGE WITH A DEFINED
SPECIFIC ISSUE, SUCH AS HUMAN RIGHTS INITIATIVE, ECONOMIC JUSTICE
PROGRAM, PUBLIC HEALTH PROGRAM, ETC. ACROSS MULTIPLE GEOGRAPHIC
AREAS ACROSS THE WORLD.

4d Other program services (Describe on Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 207,477,204.

BDFIURO

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various IRS requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096 and backup withholding.

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 16 regarding employee reporting, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

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

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?... 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done... 13 Did the organization have a written whistleblower policy?... 14 Did the organization have a written document retention and destruction policy?... 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 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? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?...

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY,
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply
[] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20 State the name, address, and telephone number of the person who possesses the organization's books and records TASHA NG 224 WEST 57TH STREET NEW YORK, NY 10019 212-548-0600

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 X

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
- See instructions for the order in which to list the persons above

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PATRICK GASPARD EX OFFICIO/PRESIDENT	.02 39.98	X		X				483.	860,510.	163,827.
(2) GAIL SCOVELL SECRETARY	3.28 36.72			X				33,152.	371,244.	110,930.
(3) MAIJA ARBOLINO TREASURER	5.48 34.52			X				49,470.	311,490.	108,661.
(4) ANGELICA PRIETO MARIA ZAMORA PROGRAM OFFICER	40.00 0.					X		124,219.	0.	15,839.
(5) NICOLAS HERNANDEZ GONZALEZ PROGRAM OFFICER	40.00 0.					X		107,221.	0.	15,426.
(6) AURO SEAN NICHOLAS FRASER PROGRAM OFFICER	40.00 0.					X		103,669.	0.	15,294.
(7) GEORGE SOROS DIRECTOR/CHAIRMAN	.02 .07	X		X				0.	0.	818.
(8) ALEXANDER SOROS DIRECTOR	.02 .07	X						0.	0.	818.
(9) ANDREA SOROS COLOMBEL DIRECTOR	.02 .09	X						0.	0.	818.
(10) PIERRE MIRABAUD UNTIL 9/30/19 DIRECTOR	.02 0.	X						0.	0.	818.
(11)										
(12)										
(13)										
(14)										

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	221,150,000			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f.	1g	\$			
	h	Total. Add lines 1a-1f		221,150,000			
	Program Service Revenue	2a					
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f		0			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts).		6,786,050		6,786,050	
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			
	6a	Gross rents	(i) Real				
			(ii) Personal				
			6a				
	b	Less rental expenses	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss).		0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			7a				
	b	Less cost or other basis and sales expenses	7b				
	c	Gain or (loss)	7c				
	d	Net gain or (loss)		0			
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18		0				
		8a					
		8b					
b	Less direct expenses	8b					
c	Net income or (loss) from fundraising events.		0				
9a	Gross income from gaming activities See Part IV, line 19		0				
		9a					
		9b					
b	Less direct expenses	9b					
c	Net income or (loss) from gaming activities.		0				
10a	Gross sales of inventory, less returns and allowances		0				
		10a					
		10b					
b	Less cost of goods sold	10b					
c	Net income or (loss) from sales of inventory.		0				
Miscellaneous Revenue	11a						
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		0			
12	Total revenue. See instructions		227,936,050		6,786,050		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	106,881,222.	106,881,222.		
2 Grants and other assistance to domestic individuals See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	96,410,199.	96,410,199.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	0.			
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	1,142,428.	1,142,428.		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	102,783.	102,783.		
9 Other employee benefits	335,210.	195,984.	139,226.	
10 Payroll taxes	130,317.	31,075.	99,242.	
11 Fees for services (nonemployees)	0.			
a Management				
b Legal	682,331.	26,896.	655,435.	
c Accounting	71,800.	65,774.	6,026.	
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17.	0.			
f Investment management fees	0.			
9 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,633,659.	1,143,578.	1,490,081.	
12 Advertising and promotion	0.			
13 Office expenses	79,887.	79,553.	334.	
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	415,177.	415,177.		
17 Travel	352,186.	249,407.	102,779.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	199,022.	145,018.	54,004.	
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	128,060.	125,546.	2,514.	
23 Insurance	16,846.	16,846.		
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a REIMB TO OPEN SOCIETY INTITU	1,433,486.	377,679.	1,055,807.	
b TAX WITHHOLDING	75,860.	33,525.	42,335.	
c FOREX LOSS	6,243.	6,243.		
d NON-TRACKABLE SOFTWARE&IT EQ	6,300.	6,300.		
e All other expenses	36,203.	21,971.	14,232.	
25 Total functional expenses Add lines 1 through 24e	211,139,219.	207,477,204.	3,662,015.	
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	12,762,828.	1	449,040.
	2 Savings and temporary cash investments.	0.	2	0.
	3 Pledges and grants receivable, net	151,850,000.	3	213,000,000.
	4 Accounts receivable, net.	0.	4	0.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0.	6	0.
	7 Notes and loans receivable, net.	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	19,498.	9	1,331,624.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 666,991.		
	b Less accumulated depreciation.	10b 200,364.		
		581,846.	10c	466,627.
	11 Investments - publicly traded securities.	0.	11	0.
	12 Investments - other securities See Part IV, line 11.	495,058,224.	12	527,934,190.
	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	74,730.	15	18,027.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	660,347,126.	16	743,199,508.	
Liabilities	17 Accounts payable and accrued expenses.	332,681.	17	186,070.
	18 Grants payable	25,428,858.	18	67,428,513.
	19 Deferred revenue.	0.	19	0.
	20 Tax-exempt bond liabilities.	0.	20	0.
	21 Escrow or custodial account liability Complete Part IV of Schedule D.	0.	21	0.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties.	0.	24	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	1,407,229.	25	0.
	26 Total liabilities. Add lines 17 through 25.	27,168,768.	26	67,614,583.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> X and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	633,178,358.	27	675,584,925.
	28 Net assets with donor restrictions.	0.	28	0.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund.		30	
	31 Retained earnings, endowment, accumulated income, or other funds.		31	
	32 Total net assets or fund balances	633,178,358.	32	675,584,925.
33 Total liabilities and net assets/fund balances	660,347,126.	33	743,199,508.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	227,936,050.
2	Total expenses (must equal Part IX, column (A), line 25)	2	211,139,219.
3	Revenue less expenses Subtract line 2 from line 1	3	16,796,831.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	633,178,358.
5	Net unrealized gains (losses) on investments	5	26,095,999.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-486,263.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	675,584,925.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990. Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- 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
 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 of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990

Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization: FUND FOR POLICY REFORM, INC. Employer identification number: 26-4351242

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor advisement.

Part II Conservation Easements.

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

Form for Conservation Easements including checkboxes for purposes (land, habitat, open space, historic structure), a table for held at end of tax year (2a-2d), and various monitoring and reporting questions.

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

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

Form for Art and Historical Treasures including questions about reporting requirements and revenue/assets for public service and financial gain.

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

Schedule D (Form 990) 2019

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply)
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange program
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %
The percentages on lines 2a, 2b, and 2c should equal 100%

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

Table with 2 columns: Yes, No. Rows: 3a(i) Unrelated organizations, 3a(ii) Related organizations, 3b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c).

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) QUANTUM ENDOWMENT CAYMAN FUND	527,934,190.	
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Column (b) must equal Form 990, Part X, col (B) line 12) . ▶	527,934,190.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740 Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	

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		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information.

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

PART X, LINE 2

FPR INC. IS EXEMPT FROM FEDERAL INCOME TAXES, AS AN ORGANIZATION

DESCRIBED IN SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE. FPR INC.

RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE

MORE LIKELY THAN NOT OF BEING SUSTAINED.

Part XIII Supplemental Information *(continued)*

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2019

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization
FUND FOR POLICY REFORM, INC.

Employer identification number
26-4351242

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EUROPE	0	0	GRANTMAKING		22,540,144
(2) SUB-SAHARAN AFRICA	0	0	GRANTMAKING		71,618,393
(3) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		2,251,662
(4) NORTH AMERICA	1	9	PROGRAM SERVICES	STRENGTHEN DEMOCRACY	609,108
(5) SOUTH AMERICA	1	6	PROGRAM SERVICES	STRENGTHEN DEMOCRACY	666,004
(6) EAST ASIA AND THE PACIFIC	1	7	PROGRAM SERVICES	STRENGTHEN DEMOCRACY	376,864
(7) CENTRAL AMERICA/CARIBBEAN	0	0	INVESTMENTS		527,934,190
(8) SOUTH ASIA	0	0	PROGRAM SERVICES	STRENGTHEN DEMOCRACY	844,002
(9) EUROPE	0	0	PROGRAM SERVICES	STRENGTHEN DEMOCRACY	120,000
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	3	22			626,960,367
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	3	22			626,960,367

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

Schedule F (Form 990) 2019

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	TO PROVIDE SUPPORT	19,227,229	WIRE			
(2)			EUROPE/ICELAND/GREENLAND	TO PROVIDE SUPPORT	2,459,405	WIRE			
(3)			EAST ASIA/PACIFIC	TO PROVIDE SUPPORT	2,251,662	WIRE			
(4)			SUB-SAHARAN AFRICA	TO PROVIDE SUPPORT	25,639,980	WIRE			
(5)			SUB-SAHARAN AFRICA	TO PROVIDE SUPPORT	45,978,413	WIRE			
(6)			EUROPE/ICELAND/GREENLAND	TO PROVIDE SUPPORT	132,206	WIRE			
(7)			EUROPE/ICELAND/GREENLAND	TO PROVIDE SUPPORT	721,304	WIRE			
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 7

3 Enter total number of other organizations or entities 0

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

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

PROCEDURES FOR MONITORING THE USE OF GRANTS OUTSIDE THE UNITED STATES

THE ORGANIZATION ENTERS INTO GRANT AGREEMENTS WITH GRANTEEES THAT REQUIRE

REPORTING. THE ORGANIZATION REVIEWS REPORTS FROM GRANTEEES TO ENSURE THAT

THE FUNDS ARE BEING SPENT IN ACCORDANCE WITH THE GRANT AGREEMENTS.

ACCRUAL METHOD OF ACCOUNTING WAS USED TO REPORT PROGRAM SERVICE AND GRANT

EXPENDITURES ON SCHEDULE F.

**SCHEDULE I
(Form 990)**

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

OMB No 1545-0047

2019

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

▶ Go to www.irs.gov/Form990 for the latest information

Name of the organization

FUND FOR POLICY REFORM, INC

Employer identification number

26-4351242

Part I General Information on Grants and Assistance

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

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

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 noncash assistance	(h) Purpose of grant or assistance
(1) OPEN SOCIETY POLICY CENTER 1730 PENNSYLVANIA AVE NW 7TH FL, DC 20006	52-2028955	501(C)(4)	94,881,557				TO PROVIDE GENERAL SUPPORT
(2) WORKING FAMILIES ORGANIZATION 1 METROTECH CTR N 11 FL, BROOKLYN, NY 11201	20-4994004	501(C)(4)	1,000,000				TO PROVIDE GENERAL SUPPORT
(3) AMERICAN CIVIL LIBERTIES UNION, INC 125 BROAD ST, 18TH FL, NEW YORK, NY 10004	13-3871360	501(C)(4)	6,000,000				TO PROVIDE GENERAL SUPPORT
(4) AMERICA VOTES 1155 CONNECTICUT AVE NW, SUITE 600, DC 20036	26-4568349	501(C)(4)	1,000,000				TO PROVIDE GENERAL SUPPORT
(5) NEW ISRAEL FUND 6 EAST 39TH STREET #301, NEW YORK, NY 10016	94-2607722	501(C)(3)	1,000,000				TO PROVIDE GENERAL SUPPORT
(6) INSTITUTE FOR STRATEGIC DIALOGUE 1000 JACKSON STREET, TOLEDO, OH 43604	27-1282489	501(C)(3)	750,000				TO PROVIDE GENERAL SUPPORT
(7) SUSTAINABLE MARKETS FOUNDATION 45 WEST 36TH ST, 6TH FL, NEW YORK, NY 10018	13-4188834	501(C)(3)	750,000				TO PROVIDE GENERAL SUPPORT
(8) TO SOMEONE, INC 1405 W STREET NW #404, WASHINGTON, DC 20009	47-3091388	N/A	749,665				TO SUPPORT SOCIAL WELFARE
(9) TO SOMEONE, INC 1405 W STREET NW #404, WASHINGTON, DC 20009	47-3091388	N/A	750,000				TO SUPPORT SOCIAL WELFARE
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3
- 3 Enter total number of other organizations listed in the line 1 table 5

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

Schedule I (Form 990) (2019)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book FMV appraisal other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE UNITED STATES

THE ORGANIZATION ENTERS INTO GRANT AGREEMENTS WITH GRANTEEES THAT REQUIRE REPORTING THE ORGANIZATION REVIEWS REPORTS FROM GRANTEEES TO ENSURE THAT THE FUNDS ARE BEING SPENT IN ACCORDANCE WITH THE GRANT AGREEMENTS

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

FUND FOR POLICY REFORM, INC.

Employer identification number

26-4351242

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

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

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

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III

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

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III

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

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**

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

	Yes	No
1a		
1b		
2		
3		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2019

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MAIJA ARBOLINO	(i)	48,665	133	672	7,405	8,193	65,068	
1 TREASURER	(ii)	306,420	840	4,230	46,627	46,436	404,553	
GAIL SCOVELL	(i)	32,882	80	190	4,953	4,892	42,997	
2 SECRETARY	(ii)	368,219	893	2,132	55,460	45,625	472,329	
PATRICK GASPARD	(i)	442	40	1	64	845	1,392	
3 EX OFFICIO/PRESIDENT	(ii)	787,929	69,960	2,621	114,266	48,652	1,023,428	
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(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)							

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 3

FPR, INC HAD FOUR EMPLOYEES LOCATED IN BOGOTA, FOUR EMPLOYEES LOCATED IN MEXICO AND FIVE EMPLOYEES LOCATED IN SEOUL DURING 2019. ALSO EMPLOYEES OF OPEN SOCIETY INSTITUTE, A RELATED SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION, PERFORM SERVICES FOR FPR INC. FPR INC REIMBURSED OPEN SOCIETY INSTITUTE FOR THEIR SERVICES BASED ON THE TIME THEY SPEND ON FPR INC MATTERS. THEIR COMPENSATION IS DETERMINED BY OPEN SOCIETY INSTITUTE, AND IS BASED ON MARKET COMPARABILITY DATA AND IS DOCUMENTED IN OPEN SOCIETY INSTITUTE'S RECORDS.

SCHEDULE J, PART I, LINE 4B

THE FOLLOWING INDIVIDUALS PARTICIPATE IN A SECTION 457(F) SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN ("THE PLAN") SPONSORED BY THE FILING ORGANIZATION OR A RELATED ORGANIZATION: PATRICK GASPARD. THE FOLLOWING 457(F) AMOUNTS WERE DEFERRED DURING YEAR AND REPORTED ON SCHEDULE J, PART II, COLUMN (C): PATRICK GASPARD - \$53,330. THE FOLLOWING 457(F) AMOUNTS BECAME VESTED IN OR PAID OUT DURING YEAR AND REPORTED ON SCHEDULE J, PART II, COLUMN (B)(III): PATRICK GASPARD - NONE.

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 7

DISCRETIONARY BONUSES ARE BASED ON PERFORMANCE

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

FUND FOR POLICY REFORM, INC.

Employer identification number

26-4351242

PART VI, SECTION C, LINE 19

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

PART VI, SECTION B, LINE 11B

THE FORM 990 IS PREPARED IN HOUSE AND REVIEWED BY LEGAL COUNSEL AND AN
INDEPENDENT ACCOUNTING FIRM. THE FORM 990 IS CIRCULATED TO FPR INC'S
BOARD PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

PART VI, SECTION B, LINE 12C

DIRECTORS, OFFICERS AND STAFF MUST DISCLOSE POTENTIAL CONFLICTS OF
INTEREST; ALL OF THE ORGANIZATION'S TRANSACTIONS ARE SCREENED AGAINST ALL
DISCLOSURES. RECUSAL IS REQUIRED WHEN A CONFLICT IS DISCOVERED.

PART VI, SECTION B, LINE 15

FPR INC. HAD THIRTEEN EMPLOYEES DURING 2019. ALSO EMPLOYEES OF OPEN
SOCIETY INSTITUTE, A RELATED SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION,
PERFORM SERVICES FOR FPR INC. FPR INC. REIMBURSED OPEN SOCIETY INSTITUTE
FOR THEIR SERVICES BASED ON THE TIME THEY SPEND ON FPR INC. MATTERS.
THEIR COMPENSATION IS DETERMINED BY OPEN SOCIETY INSTITUTE, AND IS BASED
ON MARKET COMPARABILITY DATA AND IS DOCUMENTED IN OPEN SOCIETY
INSTITUTE'S RECORDS.

PART VI, SECTION A, LINE 2

GEORGE SOROS, ALEXANDER SOROS AND ANDREA SOROS COLOMBEL HAVE A FAMILY

Name of the organization FUND FOR POLICY REFORM, INC.	Employer identification number 26-4351242
--	--

RELATIONSHIP.

GEORGE SOROS, ALEXANDER SOROS, ANDREA SOROS COLOMBEL AND PATRICK GASPARD
HAVE A BUSINESS RELATIONSHIP.

PART VI, SECTION A, LINE 7A

FUND FOR POLICY REFORM, A RELATED TAX-EXEMPT ORGANIZATION, IS THE SOLE
MEMBER OF THE CORPORATION.

PART VI, SECTION A, LINE 7B

PURSUANT TO THE BY-LAWS, IN ADDITION TO APPOINTING THE CLASS B DIRECTORS,
THE MEMBER DETERMINES THE TOTAL NUMBER OF DIRECTORS, APPROVES EXCEPTIONS
TO THE TERM LIMITS FOR DIRECTORSHIPS, FILLS VACANCIES ON THE BOARD,
APPROVES REMOVALS OF DIRECTORS AND APPROVES AMENDMENTS TO THE BY-LAWS.

PART XI, LINE 9

PRESENT VALUE ADJUSTMENT TO GRANTS PAYABLE: (486,263)

PART V, 2A

FPR, INC. DOES NOT FILE FORM W-3, OPEN SOCIETY INSTITUTE, A RELATED
SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION, PERFORMS SERVICES FOR FPR INC.
13 FOERIGN EMPLOYEES WERE NOT REPORTED ON FORM W-3.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE MISSION OF THE FUND FOR POLICY REFORM, INC. ("FPR, INC.") IS TO
PROMOTE SOCIAL WELFARE THROUGH ITS SUPPORT OF FEDERAL AND STATE
LEGISLATION THAT ASSURES GREATER FAIRNESS IN POLITICAL, LEGAL AND
ECONOMIC SYSTEMS AND SAFEGUARDS FUNDAMENTAL RIGHTS. IT CONDUCTS

Name of the organization FUND FOR POLICY REFORM, INC.	Employer identification number 26-4351242
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ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

ACTIVITIES TO BRING ABOUT CIVIC BETTERMENT AND SOCIAL IMPROVEMENTS IN COMMUNITIES AROUND THE WORLD BY ADVOCATING THE REFORM OF LOCAL, STATE, FEDERAL OR FOREIGN LAWS OR REGULATIONS. IT ALSO CONDUCTS SUPPORTING ACTIVITIES THAT ARE CHARITABLE OR EDUCATIONAL TO PROMOTE SOCIAL WELFARE. FPR INC. MAKES GRANTS TO ORGANIZATIONS CARRYING OUT THESE PURPOSES AND OTHERWISE COOPERATES WITH OTHER ORGANIZATIONS AND/OR GOVERNMENTAL AGENCIES TO ACHIEVE THESE GOALS. FPR, INC. IS FUNDING INITIATIVES THAT INVOLVE PUBLIC WELFARE, DRUG POLICY, ALLEVIATION OF POVERTY, AND ELECTORAL REFORM.

ATTACHMENT 2FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

COLOMBIA

MEXICO

KOREA, REPUBLIC OF (SOUTH)

ATTACHMENT 3990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
SOCIAL SCIENCE BAHA 345 RAMCHANDRA MARG KATHMANDU NEPAL	CONSULTANT	548,286.
LION'S HEAD GROUP, INC. 375 GREENWICH STREET NEW YORK, NY 10013	CONSULTANT	675,000.
AJAY K.SUD & ASSOCIATES F-3 SOUTH EXTENSION PART 1 NEW DELHI	LEGAL FEES	152,637.

Name of the organization FUND FOR POLICY REFORM, INC.	Employer identification number 26-4351242
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ATTACHMENT 3 (CONT'D)990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
INDIA		
GOKCE TUYLUGLU 3 KAYANI AVE, WOODBERRY DOWN LONDON UNITED KINGDOM	LEGAL FEES	120,000.

ATTACHMENT 4FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
PREPAID EXPENSES	72,337.
ADVANCES TO OSI	1,259,287.
TOTALS	<u>1,331,624.</u>

FUND FOR POLICY REFORM, INC

26-4351242

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2019

Open to Public Inspection

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

▶ Attach to Form 990

▶ Go to www.irs.gov/Form990 for instructions and the latest information

Department of the Treasury
Internal Revenue Service

Name of the organization

FUND FOR POLICY REFORM, INC

Employer identification number

26-4351242

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

(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 controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year

(a) Name, address, and EIN of related organization	(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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) OPEN SOCIETY INSTITUTE 224 WEST 57TH STREET NEW YORK, NY 10019 13-7029285	CHARITABLE	NY	501 (C) (3)	PF	N/A	X	
(2) FOUNDATION TO PROMOTE OPEN SOCIETY 224 WEST 57TH STREET NEW YORK, NY 10019 26-3753801	CHARITABLE	DE	501 (C) (3)	PF	N/A	X	
(3) OPEN SOCIETY FUND, INC 224 WEST 57TH STREET NEW YORK, NY 10019 13-3095822	CHARITABLE	NY	501 (C) (3)	PF	N/A	X	
(4) OPEN SOCIETY POLICY CENTER 224 WEST 57TH STREET NEW YORK, NY 10019 52-2028955	SOC WELFARE	DC	501 (C) (4)		N/A	X	
(5) FUND FOR POLICY REFORM C/O CHRISTIANA TRUST, 501 CARR WILMINGTON, DE 19809 35-7090597	SOC WELFARE	DE	501 (C) (4)		N/A		X
(6) ALLIANCE FOR OPEN SOCIETY INTERNATIONAL 224 WEST 57TH STREET NEW YORK, NY 10019 81-0623035	CHARITABLE	DE	501 (C) (3)	7	OSI		X
(7) SOROS ECONOMIC DEVELOPMENT FUND 224 WEST 57TH STREET NEW YORK, NY 10019 13-3965896	CHARITABLE	NY	501 (C) (3)	PF	OSI		X

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

Schedule R (Form 990) 2019

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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	(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
							Yes	No		Yes	No	
(1)												
(2)												
(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)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: 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 more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
1a		X
b Gift, grant, or capital contribution to related organization(s)	X	
1b	X	
c Gift, grant, or capital contribution from related organization(s)	X	
1c	X	
d Loans or loan guarantees to or for related organization(s)		X
1d		X
e Loans or loan guarantees by related organization(s)		X
1e		X
f Dividends from related organization(s)		X
1f		X
g Sale of assets to related organization(s)		X
1g		X
h Purchase of assets from related organization(s)		X
1h		X
i Exchange of assets with related organization(s)		X
1i		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
1j		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
1m	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
1n	X	
o Sharing of paid employees with related organization(s)	X	
1o	X	
p Reimbursement paid to related organization(s) for expenses	X	
1p	X	
q Reimbursement paid by related organization(s) for expenses	X	
1q	X	
r Other transfer of cash or property to related organization(s)		X
1r		X
s Other transfer of cash or property from related organization(s)		X
1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) OPEN SOCIETY POLICY CENTER	B	94,881,557	FMV
(2) OPEN SOCIETY INSTITUTE	M, N, O, P	1,433,486	FMV
(3) OPEN SOCIETY INSTITUTE	Q	692,240	FMV
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(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
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.
