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Department of the

Treasury

DLN: 93493281015120

☑ Yes ☐ No

Form 990 (2019)

Cat. No. 11282Y

Open to Public

OMB No. 1545-0047

Return of Organization Exempt From Income Tax

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

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.

Inspection

Internal Revenue Service For the 2019 calendar year, or tax year beginning 03-01-2019 , and ending 02-29-2020 C Name of organization D Employer identification number B Check if applicable: JustGive Inc ☐ Address change 94-3331010 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 10 Old Easton TPKE ☐ Amended return ☐ Application pending (415) 982-5700 City or town, state or province, country, and ZIP or foreign postal code Weston, CT $\,$ 06883 $\,$ **G** Gross receipts \$ 6,081,415 Name and address of principal officer: H(a) Is this a group return for Kendall Webb □Yes ☑No subordinates? 10 Old Easton TPKE H(b) Are all subordinates Weston, CT 06883 ☐ Yes ☐No included? **✓** 501(c)(3) ☐ 501(c) () **◄** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www.justgive.org L Year of formation: 1999 M State of legal domicile: CA K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► Summary 1 Briefly describe the organization's mission or most significant activities: Increase charitable giving by connecting people with the charities and causes they care about Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . 5 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a **b** Net unrelated business taxable income from Form 990-T, line 39 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . 9,695,133 5,996,415 Ravenue 9 Program service revenue (Part VIII, line 2g) . 85,000 85,000 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,780,133 6,081,415 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 9,852,992 5,785,262 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 34,480 35,671 Expenses 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶1,461 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 89,002 121,029 9,976,474 5,941,962 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 . -196,341 139,453 Net Assets or Fund Balances Beginning of Current Year End of Year 3,500,864 3,308,738 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 481,382 149,803 Net assets or fund balances. Subtract line 21 from line 20 . 3,019,482 3,158,935 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here Cendall Webb Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Check | if 2020-10-07 P01049760 Paid self-employed Firm's name Rogers & Company PLLC Firm's EIN ► 58-2676261 Preparer Use Only Firm's address ▶ 8300 Boone Boulevard Suite 600 Phone no. (703) 893-0300 Vienna, VA 22182

Form	990 (2019)					Page 2				
Pa	rt III Statement	of Program Service	e Accomplis	hments						
	Check if Sched	dule O contains a respo	onse or note to	any line in this Part III .		<u> </u>				
1	,	rganization's mission:								
Incre	ase charitable giving b	y connecting people w	ith the charities	and causes they care ab	out.					
2	Did the organization (undertake any significa	ant program ser	vices during the year whi	ich were not listed on					
	the prior Form 990 or	r 990-EZ?				☐ Yes ☑ No				
	If "Yes," describe the	se new services on Sch	nedule O.							
3	Did the organization of	☐ Yes ☑ No								
	services?	services?								
	If "Yes," describe the	se changes on Schedu	le O.							
4	Section 501(c)(3) and		ons are required	to report the amount of	argest program services, as measu grants and allocations to others, t					
4a	(Code: See Additional Data) (Expenses \$	5,814,468	including grants of \$	5,785,262) (Revenue \$	85,000)				
4b	(Code:) (Expenses \$		including grants of \$) (Revenue \$)				
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)				
4d	Other program service (Expenses \$	es (Describe in Sched	ule O.) uding grants of	\$) (Revenue \$)				
4e	Total program serv	rice expenses >	5,814,4	68						

Nο

Nο

Nο

Nο

Nο

16

17

18

19

20a

20b

21

Yes

Form **990** (2019)

Form	990 (2019)			Page 3
Par	tiV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 😼	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I 2	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
	·			

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

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

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

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	Checklist of Required Schedules (continued)			
			Yes	No
12	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		No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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 transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or 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? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
}5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	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		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Par				

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

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

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

No

Yes

Yes

2

0

1c

1a

1b

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)					
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					
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b				
	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)? 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).	4a		No		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
а	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		No		
	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		No		
d	If "Yes," indicate the number of Forms 8282 filed during the year					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No		
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?					
h	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 sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12 10a					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]					
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders					
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)					
12a	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.					
	Is the organization licensed to issue qualified health plans in more than one state?	13a				
	which the organization is licensed to issue qualified health plans					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No		
	14b					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No		
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No		

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orm	990 (2019)			Page 🕻
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	•	onse to	lines 🗹
Se	ction 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 7			
	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 5	.		ĺ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	•	NI -
10-	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		NO
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		No
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	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		No
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?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AK , AL , AR , CA , FL , GA , HI , IL , KS , I		MD,	NY , OH
18	OK, OR, TN, UT, VA, WA, DC, WI, VS ection 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	v v		

lacksquare Own website $\ \square$ Another's website $\ \square$ Upon request $\ \square$ Other (explain in Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records: The Organization 10 Old Easton TPKE Weston, CT 06883 (415) 982-5700 Form **990** (2019)

Part VII

compensation of officer	s, birectors, rrustees, Re	y Employees, mgnest	Compensacea	Lilipioyces,
and Independent Contra	ictors			

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, or 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

(A) Name and title	(B) Average hours per week (list any hours		ne bo	ox, ι n of	t ch unle: ficer	s pers	son	compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Former lighest con imployee (ey employ Officer		(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations		
(1) Doug Feick Chair	1.00	Х		х				0	0	0
(2) Andrea Lloyd CFO	4.00	х		х				2,400	0	0
(3) Doug Mazzucco Secretary	1.00	Х		х				0	0	0
(4) Jeff Barca-Hall Director	0.50	Х						0	0	C
(5) Dahna Goldstein Director	0.50	Х						0	0	0
(6) Jeff Risberg Director	0.50	Х						0	0	C
(7) Kendall Webb Executive Director	30.00	Х		х				2,400	0	26,901
										Form 990 (2019)

(A)

compensation from the organization \blacktriangleright 0

(B)

Part VII

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

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	Name and title	Average hours per week (list any hours for related	than one box, unless person is both an officer and a director/trustee) organ							ortable Reportable states of the Reportable compensation from relative distribution (W-2/109 (W-2/109)		n a d s	Estimated amount of other compensation from the organization and		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)		MISC)		relati organiza	ed	
												_			
												+			
												+			
												+			
												+			
												\perp			
С.	Sub-Total	Part VII, Section		 	•		*		4,8	300		0		26,901	
2	Total number of individuals (including of reportable compensation from the			se list	ed a	bov	e) who	rece	eived more th	ian \$1	00,000				
													Yes	No	
3	Did the organization list any forme line 1a? <i>If "Yes," complete Schedule</i>						oyee,		ghest comper	sated • •	employee on	3		No	
4	For any individual listed on line 1a, organization and related organization										n the				
5	individual										· · · · · · · · · · · · · · · · · · ·	4		No	
	services rendered to the organization	· · ·	lete Sch	edule	J fo	or su	ıch pei	rson		• •		5		No	
1	Complete this table for your five his	hest compensate										mpens	ation		
	from the organization. Report comp	(A) e and business addre		year	enc	iing	with o	r WIT	thin the organ		(B) ription of services		(C Compen		

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

(C)

(D)

(E)

		(2019)	of =	20102						Page 9
Part	VIII				recna	onse or note to an	ny line in this Part VIII			\square
		GREEK II SCHEL	Juic	o contains d	СэрС	SS SI HOLE TO All	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
,, ,,	18	Federated campa	aigns	· .	1a		<u>.</u>	reveilue		1 312 - 314
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues 1b						•			
672 mo	,	c Fundraising even	its .	. [1c		•			
ifts, ar A	,	d Related organiza	tions	5	1 d					
m : G	•	e Government grants	(con	tributions)	1e		-			
ons Sii	1	 All other contribution and similar amounts 			1f	5,996,415				
buti the		above g Noncash contributio	ns in	L cluded in	11] 3,990,413	•			
a di		lines 1a - 1f:\$			1 g					
ವ ಕ		h Total. Add lines	1a-1	f		•	5,996,415			
						Business Code	05.000	25.000		
വ	2a	Corporate licensing fe	е			900099	85,000	85,000		
nue	b									
₽. Ye	D									
Program Service Revenue	c									
Se	d									
ranı										
Prog	е									
	f	All other program	serv	rice revenue.						
		Total. Add lines 2				85,000		1	ı	1
	3 :	Investment income similar amounts)		luding divide		interest, and othe	r ▶			
		Income from invest	men	nt of tax-exe	mpt bo	ond proceeds	•			
	5	Royalties	·	(i) Rea		(ii) Personal	<u> </u>			
		_		(I) Rea	··	(II) I CISOIIAI				
		Gross rents Less: rental	6a							
	_	expenses	6b							
	С	Rental income or (loss)	6c							
	c	Net rental income	e or ((loss)						
		_		(i) Securi	ties	(ii) Other				
	7a	Gross amount from sales of assets other	7a							
		than inventory								
	b	Less: cost or other basis and	7b							
		sales expenses								
		Gain or (loss)	7c				_			
		Net gain or (loss) Gross income from fu			· · ·	· · · >				
Other Revenue		(not including \$ contributions reported	d on	of line 1c).						
e∧e		See Part IV, line 18			8a					
r R		Less: direct expen			8b					
the	•	: Net income or (los	ss) fr	om fundraisi	ing ev	ents 🛌				
	9a	Gross income from See Part IV, line 19	gami	ing activities.	1					
	b	Less: direct expen			9a 9b					
		: Net income or (los				ies 🕨				
	10	Cross sales of inve		m. loca						
	10.	Gross sales of inve returns and allowa	ances	s	10a					
	b	Less: cost of good	s sol	ld	10 b					
	c	Net income or (los Miscellaneo			invent	ory > Business Code				
	11		us K	evenue		Busilless Code				
	b)								
	c		_							
		All other record								
		All other revenue Total. Add lines 1				▶				+
		Total revenue. S								+
			11		•	• • • •	6,081,415	85,000	1	0 0

	0 (2019)				Page 10
Part IX	Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must c	omnlete all columns	All other organization	ns must complete colu	ımn (A)
	Check if Schedule O contains a response or note to an			ns must complete colt	ППП (A).
	include amounts reported on lines 6b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	nnts and other assistance to domestic organizations and mestic governments. See Part IV, line 21	5,785,262	5,785,262	<u> </u>	·
	ints and other assistance to domestic individuals. See				
gov	ints and other assistance to foreign organizations, foreign vernments, and foreign individuals. See Part IV, lines 15				
4 Ber	nefits paid to or for members				
	mpensation of current officers, directors, trustees, and or employees	35,057	28,045	5,609	1,403
def	npensation not included above, to disqualified persons (as ined under section $4958(f)(1)$) and persons described in tion $4958(c)(3)(B)$				
7 Oth	ner salaries and wages				_
	nsion plan accruals and contributions (include section 401 and 403(b) employer contributions)				
9 Oth	ner employee benefits				_
10 Pay	roll taxes	614	491	98	25
11 Fee	es for services (non-employees):				
a Mai	nagement				
b Leg	nal				
c Acc	counting	20,719		20,719	
d Lob	bying				
e Pro	fessional fundraising services. See Part IV, line 17				
f Inv	estment management fees				
g Oth	ner (If line 11g amount exceeds 10% of line 25, column amount, list line 11g expenses on Schedule 0)	1,997		1,997	
12 Adv	vertising and promotion				
13 Offi	ice expenses	17,005		17,005	
14 Info	ormation technology				
15 Roy	valties				
16 Occ	cupancy				
17 Tra	vel				
18 Pay	rments of travel or entertainment expenses for any eral, state, or local public officials				
19 Cor	nferences, conventions, and meetings				
	erest				
	ments to affiliates				
•	preciation, depletion, and amortization				
	urance	996		996	
mis exc	ner expenses. Itemize expenses not covered above (List scellaneous expenses in line 24e. If line 24e amount seeds 10% of line 25, column (A) amount, list line 24e senses on Schedule O.)				
	ad debt expense	65,354		65,354	
b D	ues and registrations	13,656		13,656	
c W	forkers Comp	837	670	134	33
d Li	censing	465		465	
e Al	II other expenses				
25 <u>Tot</u>	tal functional expenses. Add lines 1 through 24e	5,941,962	5,814,468	126,033	1,461
rep	nt costs. Complete this line only if the organization orted in column (B) joint costs from a combined icational campaign and fundraising solicitation.				
Che	eck here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

1 2

Assets 30

31

32

33

End of year

Page **11**

3,239,137

Check if Schedule O contains a response or note to any line in t	his Part IX . .	
		ĺ

Cash–non-interest-bearing	3,416,936	1	
Savings and temporary cash investments		2	
Pledges and grants receivable, net		κ	
Accounts receivable net	5.000	4	

Beginning of year

30

31

32

33

3,158,935

3.308.738

Form 990 (2019)

3,019,482

3,500,864

3 2,500 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled 5 Loans and other receivables from other disqualified persons (as defined under

section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net . . Assets 8 Inventories for sale or use . Prepaid expenses and deferred charges . 9

10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 10b 10c b Less: accumulated depreciation 11 11 Investments—publicly traded securities . 12 Investments—other securities. See Part IV, line 11 . 12 13 13 Investments—program-related. See Part IV, line 11

14 14 Intangible assets . 78,928 15 67,101 15 Other assets. See Part IV, line 11 . . . 3,500,864 16 3,308,738 16 **Total assets.** Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 21,199 17 23,199 453.716 126,604 18 18 Grants payable . 19 19 Deferred revenue . .

20 Tax-exempt bond liabilities . 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 . . . 22

Liabilities 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 6,467 25 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

481.382 149.803 26 Total liabilities. Add lines 17 through 25 . . 26

Organizations that follow FASB ASC 958, check here ▶ complete lines 27, 28, 32, and 33. 3,019,482 3,158,935 27

27 Net assets without donor restrictions 28 28 Net assets with donor restrictions .

Fund Balances Organizations that do not follow FASB ASC 958, check here ▶

complete lines 29 through 33. ō 29 29 Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form	990 (2019)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	. ;			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6	,081,415
2	Total expenses (must equal Part IX, column (A), line 25)	2		5	,941,962
3	Revenue less expenses. Subtract line 2 from line 1	3			139,453
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	,019,482
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	,158,935
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				✓
				Yes	No
	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?		2a		No
	If `Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If `Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	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?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	3b		

Form **990** (2019)

Additional Data

Software ID:

Education of the general public about giving donations and facilitation of the contribution of donations to qualified non-profit organizations operating in the U.S.

Software Version:

EIN: 94-3331010

Form 990 (2019)

Form 990, Part III, Line 4a:

Name: JustGive Inc.

efile GRAPHIC print - DO NOT PROCESS			nt - DO NOT PROCESS	As Filed Data -		DLN: 9	DLN: 93493281015120		
SCHEDULE A			Public (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047	
/TE 000			Complete if the or	ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 10-EZ.	· a section	2019	
		f the Treasury	► Go to <u>www.irs</u>	. <u>gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection	
Nam	e of th ve Inc	he organiza	tion				Employer identific	ation number	
Justo	ve inc						94-3331010		
	rt I		for Public Charity Statu				See instructions.		
1 ne o	organiz		a private foundation because onvention of churches, or as:	•			(A)(:)		
		•	,			. ,, ,	. , . ,		
2			scribed in section 170(b)(1		`	, ,			
3		·	or a cooperative hospital serv	-			-		
4		A medical r name, city,	esearch organization operate and state:	d in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's	
5		(b)(1)(A)	ation operated for the benefit (iv). (Complete Part II.)	_	,	, ,		bed in section 170	
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).		
7	✓		ation that normally receives a 'O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the gener	al public described in	
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)			
9			ural research organization de rant college of agriculture. Se					ege or university or a	
10		from activit investment	ation that normally receives: ties related to its exempt fun- income and unrelated busing See section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross	
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	See section 509	(a)(4).		
12		more public	ation organized and operated cly supported organizations d through 12d that describes	escribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a		
а		organizatio	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.						
b		manageme	supporting organization super nt of the supporting organiza plete Part IV, Sections A a	tion vested in the sar					
С		Type III f	unctionally integrated. A sopraganization(s) (see instruction	upporting organizatio				ted with, its	
d		Type III n	on-functionally integrated integrated. The organization in You must complete Par	I. A supporting organi generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar		
e		Check this	box if the organization receiv or Type III non-functionally	ed a written determir	nation from the I		pe I, Type II, Type II	I functionally	
f	Enter				-				
g	Provi	de the follow	ing information about the su	pported organization(s).				
	(i) N	Name of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No			
Tota			tion Act Notice, see the In		Cat. No. 11285			 90 or 990-EZ) 2019	

Schedule A (Form 990 or 990-FZ) 2019

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
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						
4	under section 513 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						
7a	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	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.						
С	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						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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. 1 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). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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. 3b 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. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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

4b supervised by or in connection with its supported organizations. 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. 4c 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 5a 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? 5b

5c 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 6

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. 6 7 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) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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. 9a

```
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

```
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.
```

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,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	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) below, the governing body of a supported organization?			
		11a		
	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		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
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	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection 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 instruction)	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	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 Yea (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):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
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		
2	Enter 85% of line 1	2		
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		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
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.	

5	Qualified set-aside amounts (prior IRS approval require			
6	Other distributions (describe in Part VI). See instruction			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whe details in Part VI). See instructions	sive (provide		
9	Distributable amount for 2019 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	(iii) Distributable

other distributions (describe in Fare 42). See mistractions					
7 Total annual distributions. Add lines 1 through 6.					
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions					
9 Distributable amount for 2019 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount					
(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019			
	Underdistributions	Distributable			

Schedule A (Form 990 or 990-EZ) (2019)

3 Excess distributions carryover, if any, to 2019:

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. **d** Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a From 2014. **b** From 2015. c From 2016. **d** From 2017. e From 2018. f Total of lines 3a through e

instructions)

See instructions.

3j and 4c. 8 Breakdown of line 7:

\$

Additional Data

Software ID: Software Version:

EIN: 94-3331010

Page 8

Name: JustGive Inc

Schedule A (Form 990 or 990-EZ) 2019

Part VI Supplemental Information. Provide the explanations required by Part II, line 1

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

Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

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

As Filed Data -

DLN: 93493281015120

OMB No. 1545-0047

2019

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

	me of the organization tGive Inc					Emp	oloyer identificatio	n number
Jus	toive Inc					94-3	3331010	
Pa	ort I Organizations Maintaining Donor Advi					r Acc	ounts.	
	Complete if the organization answered "Ye	·		sed funds			(b) Funds and other	
1	Total number at end of year	(4) 5011	JI GGVI	Jea Tarias	1		(b) I and a and other	. accounts
2	Aggregate value of contributions to (during year)			5	,996,415			
3	Aggregate value of grants from (during year)				,785,262			
4	Aggregate value at end of year				,801,475			-
5	Did the organization inform all donors and donor adviso	ors in writing that t	he assi			vised f	funds are the	
3	organization's property, subject to the organization's ex							✓ Yes 🗆 No
6	Did the organization inform all grantees, donors, and do	onor advisors in wr	iting th	nat grant f	funds can	be use	ed only for	
	charitable purposes and not for the benefit of the donor					conferr	_	- -
	private benefit?				• • •		<u> </u>	✓ Yes 🗌 No
Рa	rt II Conservation Easements. Complete if the organization answered "Ye	es" on Form 990.	Part	IV, line 7	7.			
1	Purpose(s) of conservation easements held by the orga							
	Preservation of land for public use (e.g., recreatio	n or education)		Preserva	tion of an	histori	ically important land	d area
	Protection of natural habitat	•	П	Preserva	tion of a c	ertifie	d historic structure	
	Preservation of open space			11000170				
2	Complete lines 2a through 2d if the organization held a		. :	م د ند ، ما نو د م	:			
2	easement on the last day of the tax year.	qualified conserva	tion co	ntribution	in the for	m or a	Held at the End	of the Year
а	Total number of conservation easements				.	2a		
b	Total acreage restricted by conservation easements					2b		
С	Number of conservation easements on a certified histori	ic structure include	d in (a)	.	2c		
d	Number of conservation easements included in (c) acqu	ired after 7/25/06,	and n	ot on a his	storic	2d		
2	structure listed in the National Register	ad walaaaad aydiisa			ا			
3	Number of conservation easements modified, transferre tax year •	ed, released, exting	juisned	i, or termi	inated by	tne org	ganization during th	e
4	Number of states where property subject to conservation	on easement is loca	ated ►				_	
5	Does the organization have a written policy regarding t				handling o	of viola	ations,	
	and enforcement of the conservation easements it hold	s?					☐ Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of v	riolatio	ns, and er	nforcing co	onserva	ation easements dur	ing the year
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violati	ons, a	nd enforci	ng conser	vation	easements during t	he year
8	Does each conservation easement reported on line 2(d)) above satisfy the	require	ements of	section 1	70(h)(4)(B)(i)	
•	and section 170(h)(4)(B)(ii)?					, = ()(Yes	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the or	s in its ganiza	revenue tion's fina	and exper ncial state	nse sta ements	atement, and s that describes	
Par	t III Organizations Maintaining Collections		al Tr	easures	or Oth	er Sir	milar Assets.	
	Complete if the organization answered "Ye							
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	public exhibition,	educat	ion, or res	search in f			
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items:	16 (ASC 958), to re lic exhibition, educ	port ir ation,	its reven or researd	ue statem ch in furth	ent an erance	nd balance sheet wo e of public service, p	rks of art, rovide the
((i) Revenue included on Form 990, Part VIII, line 1						▶ \$	
	ii)Assets included in Form 990, Part X							
2	If the organization received or held works of art, histori following amounts required to be reported under SFAS	ical treasures, or o	ther sir	nilar asse	ts for fina			
а	Revenue included on Form 990, Part VIII, line 1	, ,	_				. ▶\$	
b	Assets included in Form 990, Part X						. > \$	

Cat. No. 52283D

Schedule D (Form 990) 2019

Par	t III	Organizations M	aintaining Col	lections of Ar	t, Histori	ical Tı	reasure	es, or Other	· Similar As	ssets (con	tinued)
3		g the organization's acq s (check all that apply):		n, and other reco	rds, check	any of	the follo	wing that are	a significant ι	use of its co	llection
а		Public exhibition			d		Loan or	exchange pro	grams		
b		Scholarly research			е		Other				
C		Preservation for future	e generations								
4		ide a description of the XIII.	organization's col	ections and expl	ain how th	ey furtl	ner the o	rganization's	exempt purpo	se in	
5		ng the year, did the org ts to be sold to raise fur								☐ Yes	□ No
Pa	rt IV										
		Complete if the or X, line 21.	ganization answ	ered "Yes" on	Form 990), Part	IV, line	9, or report	ed an amou	ınt on Fori	m 990, Part
1a		e organization an agent ded on Form 990, Part								☐ Yes	□ No
b	If "Y	es," explain the arrange	ement in Part XIII	and complete th	ne following	table:			А	mount	
C	Begii	nning balance						1c			
d	Addi	tions during the year .						. 1d			
е	Distr	ibutions during the year	r					1e			
f	Endi	ng balance						1f			
2a	Did t	the organization include	an amount on Fo	rm 990, Part X,	line 21, for	escrow	or custo	odial account l	iability?	☐ Yes	□ No
b	If "Y	es," explain the arrange	ement in Part XIII	Check here if th	ne explanat	ion has	been pr	ovided in Part	XIII		
Pa	art V						<u> </u>				
		Complete if the or	ganization ansv								
	Di	-if halanaa		(a) Current yea	r (b) F	Prior yea	r (c)	Two years back	(d) Three yea	ars back (e)	Four years back
	-	ning of year balance .									
		butions									
		vestment earnings, gair	•								
		s or scholarships									
е		expenditures for facilition	es								
f	Admin	nistrative expenses .									
g	End of	f year balance									
2	Prov	ide the estimated perce	ntage of the curre	ent year end bala	nce (line 1	g, colu	mn (a)) l	held as:			
а	Boar	d designated or quasi-e	ndowment ►								
b	Perm	nanent endowment ►									
c	Tem	porarily restricted endov									
	The	percentages on lines 2a	, 2b, and 2c shou	ld equal 100%.							
3a		there endowment funds nization by:	not in the posses	sion of the orgar	nization tha	it are h	eld and a	administered f	or the		Yes No
	-	inrelated organizations								3a(i)	
		related organizations .								3a(ii)
b		es" on 3a(ii), are the re					?			3b	
4		cribe in Part XIII the inte			ndowment	funds.					
Pa	rt VI	, ,			Form 000) Dov	T\/ line	112 522 5	orm 000 D-	rt V line :	10
	Descr	Complete if the or-	ganization answ (a) Cost or oth		Cost or other	<u> </u>		c) Accumulated			IO. Book value
	_ 2221		(investme				<i>[</i>]		·	. 7	
1a	Land										
		ngs									
		hold improvements									
		ment					-+				
							+				
E Tak	- I A-1-1		Salvena (d) maves a		Dawk V ==1:	(7	\ /in = 10	1/-1 1			

Part VII Investments—Other Securities.) + T) / :	11h C F 000	Davit V. Bina 4.2
Complete if the organization answered "Yes" on Form 990, P (a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financial derivatives			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (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, P (a) Description of investment	art IV, li	ne 11c. See Form 990, (b) Book value	Part X, line 13. (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, Pa	art IV, lin	ne 11d. See Form 990, Pai	
(a) Description			(b) Book value
(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, Pa	art IV, lin	ne 11e or 11f.See Form	990, Part X, line 25.
 (a) Description of liability (1) Federal income taxes 			(b) Book value
(2)			
(3)			
(4) (5)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (h) must equal Form 990, Part Y, col (R) line 25.)			
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	e to the or	ganization's financial state	
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check h	ere if the		een provided in Part XIII Schedule D (Form 990) 2019

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

Page 4

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 6,081,415 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. Total expenses and losses per audited financial statements 1

5,941,962 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities . . . 2a 2b Prior year adjustments Other losses 2c C 2d d Other (Describe in Part XIII.) . . .

Add lines 2a through 2d . 2e 5,941,962 Subtract line 2e from line 1 3 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b b Other (Describe in Part XIII.) Add lines **4a** and **4b** 4c 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 5.941.962

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. Return Reference Explanation

See Additional Data Table

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 94-3331010

Name: JustGive Inc

Supplemental:	Information	
Data and Da	c	

Return Reference Part X, Line 2:

Explanation

Management has evaluated the Organization's tax positions and concluded that the Organizat ion's financial statements do not include any uncertain tax positions.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I | Chapter and Other Assistance at Companiestics as

(Form 990)

Department of the

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.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047
2019

DLN: 93493281015120

Open to Public Inspection

Internal Revenue Service							
Name of the organization JustGive Inc						Employer identific	ation number
Part I General Inform	ation on Grants	and Assistance				94-3331010	
Does the organization mai	ntain records to sub	stantiate the amount of	the grants or assistance,	the grantees' eligibility	for the grants or assistan	 ce, and	
the selection criteria used	to award the grants	or assistance?				•	☑ Yes ☐ No
Describe in Part IV the orgPart II Grants and Other	•	•	_			"	21 for any marinisms
that received more	than \$5,000. Part I	I can be duplicated if ad	ditional space is needed.	ints. Complete in the o	rganization answered fes	on Form 990, Part IV, line	21, for any recipient
(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) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of sect3 Enter total number of other							187
For Paperwork Reduction Act Notice			<u> </u>	Cat. No. 5005			nedule I (Form 990) 2019

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

Part IV

Return Reference Explanation

The donor advised fund makes grants to charities based on designations of the donor. Therefore, there is no subsequent monitoring of the use of the funds by the Part I, Line 2: Organization.

Schedule I (Form 990) 2019

Additional Data

Opportunity Partners Inc

5500 OPPORTUNITY CT MINNETONKA, MN 553439020

Ywca Of Minneapolis

1130 Nicollet Ave Minneapolis, MN 55403

Software ID: **Software Version:**

EIN: 94-3331010

Name: JustGive Inc

Form 990,Sch	edule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.	
							_

(a) Name and address of	(D) FIN	(c) IRC section	(a) Amount of cash	(e) Amount of non-	(T) Method of Valuation	
organization		if applicable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

organization	if applicable	grant	cash	(book, FMV, appraisal,
or government			assistance	other)

501(c)(3)

501(c)(3)

41-0737221

41-0693891

5,000

5,000

N/A

N/A

(g) Description of

non-cash assistance

N/A

N/A

(h) Purpose of grant

or assistance

General Support

General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Ducks Unlimited Inc 13-5643799 501(c)(3) 5,000 N/A N/A General Support

One Waterfowl Way Memphis, TN 38120						
Andrew Mcdonough B Positive Foundation	42-1741037	501(c)(3)	5,000	N/A	N/A	General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

101 ROCKLAND CIR

WILMINGTON, DE 198034541

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Boston Health Care For The 04-3160480 501(c)(3) 5.000 N/A IN/A General Support Homeless Program Inc

780 Albany Street Boston, MA 02118 Jewish Federation Of Greater 22-1487222 5.000 IN/A General Support

501(c)(3) N/A Metrowest Ni 901 Route 10 East

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Whippany, NJ 07981

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 72-0428013 501(c)(3) 5,000 N/A N/A General Support Glen Retirement System Support

SHREVEPORT, LA 71115						
Southern Baptists Of Texas Convention Inc 4500 State Highway 360	75-2599207	501(c)(3)	5,000	N/A	N/A	General S

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Grapevine, TX 76051

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) National Comprehensive 23-2818395 501(c)(3) 5,000 N/A IN/A General Support Cancer Network Inc eral Support

FT WASHINGTON, PA 190342413						
Lake View Memorial Hospital Foundation Of Northeast Mn 325 11TH AVE	41-1700972	501(c)(3)	5,000	N/A	N/A	Genera

TWO HARBORS, MN 556161300

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Farm To Pantry 46-5321538 501(c)(3) 5,000 N/A General Support N/A

331 1ST ST HEALDSBURG, CA 954484243						
American Society Of Mechanical Engineers 6900 N LOOP 1604 W	27-0053541	501(c)(3)	5,000	N/A	N/A	General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN ANTONIO, TX 782491130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Altamed Health Services Corp 95-2810095 501(c)(3) 5.000 N/A IN/A General Support 2040 CAMFIELD AVE COMMERCE, CA 900401502

 COMMERCE, CA 900401502
 Solicol

 Boys And Girls Clubs Of Austin And Travis County Inc 5407 N INTERSTATE 35 STE 400
 74-6087356
 501(c)(3)
 5,000
 N/A
 N/A
 M/A
 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AUSTIN, TX 787232445

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Payomet 47-4054420 501(c)(3) 5 0001 IN/A General Support

PO BOX 1202 TRURO, MA 026661202	47 4054420	301(0)(3)	3,000	10/7		General Support
Pacific Islands Research Institute	26-3103099	501(c)(3)	5,000	N/A	N/A	General Support

PO Box 2627

Friday Harbor, WA 98250

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 15-0543659 501(c)(3) 5.000 N/A IN/A General Support Clarkson University Po Box 5564 Potsdam, NY 13699 23-7267983 501(c)(3) 5.000 IN/A N/A General Support

Anderson Ranch Arts Foundation PO BOX 5598

SNOWMASS VLG, CO 816155598

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Hospital For Special Surgery 13-6714749 501(c)(3) 5 0101 IN/A IN/A General Support

Fund Inc				``'	,	
535 East 70th Street						
New York, NY 10021						
Zahra Foundation Ltd	47-2790358	501(c)(3)	5,030	N/A	N/A	General Support

PO Box 2893

Huntingth Sta, NY 11746

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Mennonite Central Committee 23-6002702 501(c)(3) 5.040 N/A N/A General Support 115

21 S 12th St Akron, PA 17501						
Natural Resources Defense Council Inc	13-2654926	501(c)(3)	5,059	N/A	N/A	General Support

40 WEST 20TH STREET NEW YORK, NY 100114211

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Educational Research Analysts 75-1407723 501(c)(3) 5.136 IN/A General Support N/A PO Box 7518 Longview, TX 75607

58-1549537 501(c)(3) 5.205 N/A N/A General Support Decatur Area Emergency

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Assistance Ministry 515 E Ponce De Leon Ave

Decatur, GA 30030

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Spartanburg Area Conservancy 57-0885225 501(c)(3) 5.225 N/A IN/A General Support 100 Fast Main Street Suite 7B Spartanburg, SC 29306

N/A

IN/A

General Support

5.250

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

University Of Kent In America

2261 West 115th Street Chicago, IL 06063

Inc

76-0774124

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Viability Inc 51-0178661 501(c)(3) 5.250 N/A IN/A General Support 5 Franklin Street Northampton, MA 01060 St Helena Public Schools 94-2891817 501(c)(3) 5.250 IN/A N/A General Support Foundation

PO BOX 305 SAINT HELENA, CA 945740305

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 20-1065695 501(c)(3) 5.285 IN/A General Support Wildlife Center Of Venice Inc N/A 925 N Jackson Rd Venice, FL 34292 Southern California Golden 30-0454968 501(c)(3) 5.325 N/A N/A General Support

Retriever Rescue PO Box 25698 Los Angeles, CA 90025

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 52-1591139 501(c)(3) 5.394 IN/A General Support Advocates For Homeless N/A Families Inc 216 Abrecht Place Frederick, MD 21701

IN/A

N/A

General Support

5.527

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Wounded Veterans Relief Fund

1335 OLD DIXIE HWY UNIT 3 LAKE PARK, FL 334031967 26-2886846

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 41-0713904 501(c)(3) 5.545 N/A IN/A General Support Send International Of The United States Inc PO Box 513 Farmington, MI 48332

Farmington, MI 48332

Richmond Emergency Food 68-0106944 501(c)(3) 5,550 N/A N/A General Support Pantry PO Box 2598

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

El Cerrito, CA 94530

(e) Amount of non-(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Housing And Economic Rights 20-2573758 501(c)(3) 5,550 N/A N/A General Support Advocates

Philadelphia, PA 19130

1814 Franklin Street Suite 1040 Oakland, CA 94612						
Communities In Schools Of Philadelphia Inc Rodin Place Suite 201 2000 Hamilton Street	23-2410538	501(c)(3)	5,675	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) al Support

PO Box 783 Biddeford, ME 04005	20-3684834	501(c)(3)	5,/28	IN/A	IN/A	General Support
Community Table Inc	39-1770259	501(c)(3)	5,734	N/A	N/A	General Support

320 Putnam Street Eau Claire, WI 54703

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 38-2848513 501(c)(3) 5.775 N/A IN/A General Support Cadillac Area Community Foundation 201 N Mitchell Suite 101 Cadillac, MI 49601 05-0258886 501(c)(3) 5.805 ln/a IN/A General Support

Dorcas International Institute Of Rhode Island Inc 645 Elmwood Avenue645 Elmwood Avenue

Providence, RI 02907

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Himalayan Childrens Charities 65-0995336 501(c)(3) 5.810 N/A IN/A General Support Inc 355 BROOK FORD PT ALPHARETTA, GA 300228108 76-0809155 501(c)(3) 5.841 N/A IN/A General Support Georgia Latino Alliance For

Human Rights Inc 7 Dunwoody Park Ste 110 Atlanta, GA 30338

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Planned Parenthood Federation 13-1644147 501(c)(3) 5.873 IN/A N/A General Support

Echo Hill Campership Fund	52-1646105	501(c)(3)	5,970	N/A	N/A	General Support
of America Inc 123 William St New York, NY 10038						

PO Box 5923 Bethesda, MD 20824

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) Womens Institute For A Secure 52-1997317 501(c)(3) 5.973 N/A IN/A General Support Retirement 1001 CONNECTICUT AVE NW Ste 730Ste

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

355

DALLAS, TX 752146190

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Community Teamwork Inc 1 04-2382027 501(c)(3) 6.000 IN/A N/A |General Support

155 MERRIMACK ST LOWELL, MA 018521723

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Boone, NC 28607

Western Youth Network Inc. 56-1454674 501(c)(3) 6.060 IN/A N/A General Support 155 Wvn Wav

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Isaiah House Inc. 16-1587953 501(c)(3) 6.069 IN/A N/A |General Support

71 Prince St Rochester, NY 14605

Phoebe Foundation Inc 58-1847104 501(c)(3) 6,223 N/A N/A General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 3770

ALBANY, GA 317063770

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 25-1344183 501(c)(3) 6.260 IN/A General Support Pauline Auberle Foundation N/A

1101 HARTMAN ST MCKEESPORT, PA 151321500 Willow Oak Montessori 46-3086549 501(c)(3) 6.388 N/A N/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Chapel Hill, NC 27517

General Support Foundation Inc. 50101 Governors Drive

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Direct Relief 95-1831116 501(c)(3) 6 397 IN/A IN/A General Support

6100 Wallace Becknell Rd Santa Barbara, CA 93117	30 1001110	332(0)(3)	0,007	.,,,	,	general.
Wooster Community Hospital	34-1785051	501(c)(3)	6,407	N/A	N/A	General

WOOSTER, OH 446912342

ral Support 1761 BEALL AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Telegraph Hill Neighborhood 94-1167422 501(c)(3) 6,420 N/A N/A General Support A --- -: - L: - --

Association 660 Lombard St San Francisco, CA 94133						
Techsoup Global 435 BRANNAN ST STE 100	94-3070617	501(c)(3)	6,500	N/A	N/A	General Support

SAN FRANCISCO, CA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

941071780

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 06-1504413 501(c)(3) 6.714 IN/A N/A General Support Multiple Myeloma Research

HOUSTON, TX 770076214

Ecclesia Houston 76-0618275 501(c)(3) 7.0001 N/A IN/A |General Support 1100 ELDER ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 20-2772132 501(c)(3) 7.089 N/A IN/A General Support Advancing The Gospel In Angola Inc

PO Box 561 Hudsonville, MI 49426 Rocky Mountain Elk Foundation 81-0421425 501(c)(3) 7.092 N/A IN/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

General Support Inc 5705 Grant Creek Rd Missoula, MT 59808

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Partnerships In Community 93-0980637 501(c)(3) 7.134 IN/A General Support N/A Living Inc

IN/A

N/A

General Support

7.272

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

PO BOX 129		
MONMOUTH, OR 973610129		
Drop4drop Inc	81-4388822	

6670 Mammoth Ave Van Nuvs, CA 91405

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 26-3263472 501(c)(3) 7.350 N/A IN/A General Support Bonisa Mission Organization Usa 2545 Woodsboro Ct Ne

Grand Rapids, MI 49525 Sarrell Regional Dental Center 20-0232609 501(c)(3) 7.451 N/A IN/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ANNISTON, AL 362075771

General Support For Public Health Inc. 230 E 10TH ST STE 106

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Firehouse Community Arts 86-1173412 501(c)(3) 7.470 IN/A IN/A General Support

3827 W OGDEN AVE CHICAGO, IL 606232459						
Jed Foundation	13-4131139	501(c)(3)	7,475	N/A	N/A	General Support

1140 Broadway Ste 803 New York, NY 10001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Lamar Educational Awards 76-0299538 501(c)(3) 7.500 N/A IN/A General Support Foundation 3911 AVENUE I ROSENBERG, TX 774713901

N/A

IN/A

General Support

7.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Young Mens Christian

ANNISTON, AL 362014558

Association 29 W 14TH ST 63-0332253

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Florida Coalition Against 50-2055476 501/61/21 7 500 INI/A N/A Conoral Support

Domestic Violence Inc 425 OFFICE PLZ TALLAHASSEE, FL 323012756	39-2033470	301(0)(3)	7,300			General Support
Leukemia & Lymphoma Society	13-5644916	501(c)(3)	7,506	N/A	N/A	General Support

3 INTERNATIONAL DR STE 200 RYE BROOK, NY 10573

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Support

Flourish Agenda Inc 1714 FRANKLIN ST STE 100 OAKLAND, CA 946123409	33-0488726	501(c)(3)	7,780	N/A	N/A	General Support
Worldreader Org	27-2092468	501(c)(3)	7,809	N/A	N/A	General Support

40 Rinaold

San Francisco, CA 94103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Support

Millennial Music	01-0902152	501(c)(3)	8.200	N/A	N/A	General Support
Feral Fixers Nfp 327 Vance St LOMBARD, IL 60148	13-4364615	501(c)(3)	8,000	N/A	IN/A	General Support

PO Box 1981

Queen Creek, AZ 85142

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 48-6091046 501(c)(3) 8.202 IN/A General Support Wichita Collegiate School N/A 9115 E 13TH St N Wichita, KS 67206

N/A

N/A

General Support

8.390

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Wichita, KS 67206

If Not Us Then Who
PO BOX 5601

SANTA MONICA, CA 904095601 81-4186787

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Oak Hills Memorial Foundation 41-1733850 501(c)(3) 8.500 IN/A IN/A General Support

315

Tampa, FL 33647

Inc 1314 EIGHTH NORTH STREET NEW ULM, MN 560731554		(-)(-)	-,			
Oasis Network Of New Tampa Inc 16057 Tampa Palms Blvd W	59-3715732	501(c)(3)	8,575	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Literacy Volunteers Of 94-2870927 501(c)(3) 8.674 IN/A N/A General Support

Maricopa County Inc 729 E Hatcher Rd Phoenix, AZ 85020	() ()	·		

704 Main St PO Box 500 Akron, PA 17501

Ten Thousand Villages 31-1690588 501(c)(3) 8.740 N/A IN/A General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 13-5661832 501(c)(3) 8.794 IN/A General Support Plan International USA N/A 155 Plan Way Warwick, RI 02886

N/A

N/A

General Support

8.968

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Young Mens & Young Womens

Hebrew Association 1395 Lexington Avenue New York, NY 10128 13-1624229

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

Foundation 4544 IH 10

BAYTOWN, TX 77522

Michael J Fox Foundation For Parkinsons Research Grand Central Station PO Box 4777 New York, NY 10163	13-4141945	501(c)(3)	8,977	N/A	N/A	General Support
Goose Creek Cisd Education	27-0737709	501(c)(3)	9,067	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 20-0744446 501(c)(3) 9.080 IN/A General Support Casa Of Philadelphia County N/A 1501 Cherry Street Philadelphia, PA 19102

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

New York, NY 10001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 04 2026507 E04()(3) ~ F~~I In. /a NI/A neral Support

BALTIMORE, MD 212313332 Algebra Project Inc	22-3137788	501(c)(3)	9,550	N/A	N/A	General Support
802 S CAROLINE ST	91-202659/	501(c)(3)	9,500	IN/A	IN/A	General Support

99 Bishop Richard Allen Drive Cambridge, MA 02139

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

Jhs Music & Arts Boosters 14614 26TH Dr Se Jackson High School Music Mill Creek, WA 98012	71-0926114	501(c)(3)	9,820	N/A	N/A	General Support
Community Action Partnership	94-1612823	501(c)(3)	10.000	IN/A	I _{N/A}	General Support

Community Action Partnership 201(6)(2) Of Madera County Inc 1225 GILL AVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MADERA, CA 936375234

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 36-2170145 501(c)(3) 10.000 N/A IN/A General Support Sigma Alpha Epsilon Foundation 1856 SHERIDAN RD EVANSTON, IL 602013837 National Museum Of Women In 52-1238810 501(c)(3) 10.000 N/A IN/A General Support

The Arts Inc

1250 New York Avenue NW Washington, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Womens Sports Foundation 23-7380557 501(c)(3) 10,000 N/A N/A General Support

IN/A

N/A

General Support

EISENHOWER PARK 1899 HEMPSTEA EAST MEADOW, NY				
115540000				

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Aegis America Inc

20 Greenway Plaza Ste 450 Houston, TX 77046

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 35-6006653 501(c)(3) 10.000 IN/A General Support Lake County Public Library N/A 1919 W 81ST AVE

MERRILLVILLE, IN 464105488 Greater Miami Jewish 59-0624404 501(c)(3) 10.000 N/A N/A Federation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

General Support 4200 Biscavne Blvd Fl 2 Miami, FL 33137

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) African Mothers Health 26-0423197 501(c)(3) 10.050 N/A IN/A General Support Initiative 7304 Carroll Avenue 173 Takoma Park, MD 20912

N/A

IN/A

General Support

10.084

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Testicular Cancer Society

Cincinnati, OH 45255

161

8190A Beechmont AvenueSuitel

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Mission Neighborhood Centers 94-1408150 501(c)(3) 10.125 N/A IN/A General Support Inc 362 Capp St

San Francisco, CA 94110 Hoffman Estates Park District 36-4270370 501(c)(3) 10.243 N/A IN/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

General Support Foundation 1685 W HIGGINS RD HOFFMAN EST, IL 601696955

(b) EIN (e) Amount of non-(f) Method of valuation (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 47-2459997 501(c)(3) 10,376 N/A N/A General Support Bridge The Gap - Syngap

(a) Description of

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

JACKSONVILLE, FL 322400798

Education & Paccarch

PO BOX 50798

Foundation 15319 REDBUD BERRY WAY CYPRESS, TX 774335886						
Tom Coughlin Jay Fund Foundation Inc	59-3426937	501(c)(3)	10,386	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Broadway Education Alliance 32-0178901 501(c)(3) 10.450 IN/A N/A General Support

Community Christmas Store	54-1687089	501(c)(3)	10,525	N/A	N/A	General Support
Inc 372 5th Avenue Ste 10B New York, NY 10018			·			

PO BOX 616

SALEM, VA 241530616

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 68-0245801 501(c)(3) 10.600l IN/A Davis Community Meals N/A |General Support PO Box 72463

Davis, CA 95617

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Washington, DC 20036

Special Olympics Inc 52-0889518 501(c)(3) 10.710 N/A N/A General Support 1133 19th St NW

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Christ Church New York City 20-0863847 501(c)(3) 10.723 IN/A IN/A General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

195 Central School Dr Williston, VT 05495

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Ransom Fellowship 85-0305473 501(c)(3) 10.935 N/A IN/A General Support 5245 132nd Court

Savage, MN 55378

Firehouse Subs Public Safety
Foundation Inc
12735 Gran Bay Parkway Suite

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

150

Jacksonville, FL 32258

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Als Therapy Development 04-3462719 501(c)(3) 11.055 N/A N/A General Support

Foundation Inc 300 Technology Sq STE 400 Cambridge, MA 02139				

Mega Charities Foundation Inc 20-0465977 501(c)(3) 11.100 N/A IN/A General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1201 S HASTINGS WAY EAU CLAIRE, WI 547014459

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other)

2716 Ocean Park Blvd Ste

Santa Monica, CA 90405

2000

Donald B Slocum Research And Educational Foundation For Orthope 55 COBURG RD EUGENE, OR 974012433	93-0820126	501(c)(3)	11,100	N/A	N/A	General Support
Present Now	46-1420945	501(c)(3)	11,115	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 81-2822823 501(c)(3) 11.211 N/A IN/A General Support Marshfield Clinic Health System Foundation Inc 1000 N OAK AVF - 1R1 MARSHFIELD. WI 544495703

N/A

IN/A

General Support

11.375

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Private Industry Council Of

Westmoreland Fayette Inc 219 DONOHOE RD

GREENSBURG, PA 156016987

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Cat Cav Medical Clinic 20-5221502 501(c)(3) 12.057 IN/A N/A General Support

N/A

General Support

IN/A

Foundation	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•		
1050 LEE WAGENER BLVD				
FT LAUDERDALE, FL				
333153500				

12,400

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

46-4134463

Thrive Baton Rouge

2585 Brightside Drive Baton Rouge, LA 70820

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) Mcmahon-Rvan Child Advocacy 16-1563195 501(c)(3) 12.598 N/A IN/A General Support Site Inc

601 F Genesee St. Syracuse, NY 13202 Teen Cancer America Inc 46-0825676 501(c)(3) 12.690 N/A IN/A General Support 11835 W OLYMPIC BLVDSTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

265E

Los Angeles, CA 90064

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Goodwill Of Southwestern 25-1098928 501(c)(3) 12 750 IN/A IN/A General Support

N/A

General Support

N/A

Cocarriii Ci Coaciiri Cocciii		1 =2,,00	1.4//	l '	000.0.
Pennsylvania					
118 52ND ST					
PITTSBURGH, PA 152012593					

12.776

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

06-1816720

Common Ground Relief

1800 Deslonde Street New Orleans, LA 70117

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 22-2906466 501(c)(3) 13.210 N/A IN/A General Support Valley Community Development Corporation

256 Pleasant StSuite A Northampton, MA 01060 Franklin University Switzerland 23-7075717 501(c)(3) 13.566 N/A IN/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MELVILLE, NY 117472503

General Support Inc 91 BROADHOLLOW RD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 36-4009258 501(c)(3) 13.730 IN/A Damien House Inc. N/A |General Support 4407 N Elston Ave

N/A

N/A

General Support

13.750

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Chicago, IL 60630 Seva Foundation

1786 Fifth St Berkeley, CA 94710

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Love Hope Strength Inc 26-0528852 501(c)(3) 13.937 IN/A N/A |General Support PO PO Box 140944

IN/A

N/A

General Support

13.952

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Lakewood, CO 80214

Planned Pethood International

4595 Harlan Street Wheat Ridge, CO 80033

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Planned Parenthood Of 38-1707521 501(c)(3) 14.100 N/A IN/A General Support Michigan PO Box 3673 Ann Arbor, MI 48106

N/A

IN/A

General Support

14,273

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Healthy Smiles Healthy

Chicago, IL 60611

211 E Chicago Ave Ste 1700

Children

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Fallon Community Health Plan 23-7442369 501(c)(3) 14.300 N/A IN/A General Support Inc 10 CHESTNUT STREET WORCESTER, MA 016082898 Imperial College Foundation 58-1813092 501(c)(3) 14,347 N/A IN/A General Support

Inc

PO Box 80526 Atlanta, GA 30366

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable non-cash assistance organization grant cash (book, FMV, appraisal, or assistance assistance other) or government Wheeler Clinic Inc. 06-0867065 501/61/31 14 500 INI/A NI/A Conoral Support

Oaks Integrated Care	23-7048397	501(c)(3)	14,915	N/A	N/A	General Support
91 NORTHWEST DR PLAINVILLE, CT 060621552						
Wheeler Chillic Inc	00-000/005	301(c)(3)	14,500	IN/A	1177	General Support

770 WOODLANE RD STE 23 WESTAMPTON, NJ 080603803

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 31-1685893 501(c)(3) 14.987 N/A IN/A General Support Kleine Levin Syndrome Foundation Inc Po Box 5382 San Jose, CA 95150 BELLEVUE BAPTIST CHURCH 62-6001710 501(c)(3) 15.000 N/A IN/A General Support

Cordova 2000 Applingn Rd Cordova, TN 38016

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Minnesota Odd Fellows Home 41-1431455 501(c)(3) 15.000l N/A IN/A General Support Foundation

815 FOREST AVE NORTHFIELD, MN 550571643

Heart Of Illinois United Way 37-0661504 501(c)(3) 15,000 N/A N/A General Support Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

509 W HIGH ST PEORIA, IL 616061924

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Philadelphia Orchestra 23-1352289 501(c)(3) 15.000l IN/A N/A General Support

New York City Center Inc	13-2867442	501(c)(3)	15,000	N/A	N/A	General Support
Association 1 S Broad St Fl 14 Philadelphia, PA 19107		,,,,	·			

New York City Center Inc 130 WEST 56TH STREET

NEW YORK, NY 100193962

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable non-cash assistance organization grant cash (book, FMV, appraisal, or assistance assistance other) or government

Lord's Pantry Of Downingtown 141 E Lancaster Ave	23-3092880	501(c)(3)	15,064	N/A	IN/A	General Support
Downingtown, PA 19335						
Elder Services Of Cape Cod	04-2523904	501(c)(3)	15,500	N/A	N/A	General Support

68 Route 134

South Dennis, MA 02660

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) University Kidney Research 03-0459723 501(c)(3) 16.200 N/A IN/A General Support

Organization

2322 East 22nd Street Brooklyn, NY 11229

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) He Opens Paths To Everyone 20-1768641 501(c)(3) 16,316 N/A N/A General Support

600055024

Inc 122 Roesler Road Glen Burnie, MD 21060						
Lutheran Life Communities Foundation 3150 SALT CREEK LANE ARLINGTON HEIGHTS, IL	36-3861882	501(c)(3)	16,347	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Archa-Vidya-Pitam 94-2839344 501(c)(3) 16 623 IN/A IN/A General Support

POBox 1059 Saylorsburg, PA 18353	J. 2000	55-(5)(5)		.,,,,	,	
Southern Poverty Law Center	63-0598743	501(c)(3)	16,855	N/A	N/A	General Support

Montgomery, AL 36104

Inc 400 Washington Ave

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Village Community Ministries 86-1038138 501(c)(3) 16.972 IN/A N/A |General Support PO Box 30790 Eric Cepin

IN/A

N/A

General Support

17.051

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Tucson, AZ 85751

American Cancer Society Inc

250 Williams Street NW Atlanta, GA 30303

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable non-cash assistance organization grant cash (book, FMV, appraisal, or assistance assistance other) or government 11 841 1 1 C2 474 4040 E04()(3) 47 252 In. /a NI/A ral Support

HOLY CROSS SCHOOL Rumson	21-0637382	501(c)(3)	17.838	N/A	N/A	General Support
Po Box 51611 Knoxville, TN 37950						
Soar Youth Ministries	62-1/14010	501(c)(3)	17,350	N/A	IN/A	General Support

40 Rumson Road Rumson, NJ 07760

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 04-3348171 501(c)(3) 18.000l IN/A Planet Aid Inc N/A |General Support

47 SUMNER STREET MILFORD, MA 017574606

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WHEELING, WV 260031967

Oglebay Foundation Inc 55-0750128 501(c)(3) 18.289 N/A N/A General Support 465 LODGE DR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 06-0662195 501(c)(3) 18.400 N/A N/A General Support Central Connecticut Coast Young Mane Christian

Presidio

San Francisco, CA 94129

Association Inc 1240 Chapel Street New Haven, CT 06511						
Futures Without Violence 100 Montgomery Street The	94-3110973	501(c)(3)	18,523	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Support

East Oakland Community	94-30/8181	501(c)(3)	18,608	N/A	N/A	General St
Project						
7515 International Blvd						
Oakland, CA 94621						

KENT, WA 980323047

501(c)(3) 19.705 N/A John Volken Academy 91-2061674 N/A General Support 921 N Central Ave

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 04-2103733 501(c)(3) 20.000 N/A IN/A General Support Unitarian Universalist Association 24 Farnsworth St Boston, MA 02210 54-1801426 501(c)(3) 20.000 N/A IN/A General Support

National Womens History

205 S Whiting St Ste 254 Alexandria, VA 22304

Museum

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

Start Right Now Inc	26-3725699	501(c)(3)	20,359	N/A	N/A	General Support
Incarnate Word Retirement Community Inc 4707 BROADWAY ST SAN ANTONIO, TX 782096215	74-1109717	501(c)(3)	20,000	IN/A	N/A	General Support

Start Right Now Inc 1212 W Cass Street

Tampa, FL 33606

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Urban Word Nvc Inc 32-0250944 501(c)(3) 20.487 IN/A N/A General Support

PO Box 1813 New York, NY 10113		,,,,	·	·		
Greater Alabama Council - Boy Scouts Of America	63-0302107	501(c)(3)	21,150	N/A	N/A	General Support

516 LIBERTY PKWY VESTAVIA, AL 352427531

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Savo the Children HS 06-0726497 501/61/21 21 505 INI/A N/A Conoral Support

Save the Children 05	00-0/2040/	1 301(0)(3)	21,303	I V C	11/11	General Support
501 Kings Highway EastSuite						
400						
Fairfield, CT 06825						

Los Angeles, CA 90025

501(c)(3) N/A International Medical Corps 95-3949646 21.849 N/A General Support 12400 Wilshire Blvd Suite 1500

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government St Jude Children's Research 35-1044585 501(c)(3) 22.733 IN/A General Support N/A Hospital Inc 501 St Jude Place

IN/A

N/A

General Support

24.813

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Memphis, TN 38105 Jov In The Harvest

PO Box 496 Lansing, MI 60438 36-3858898

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) Miracle League Of Harford 81-4465677 501(c)(3) 25,000 N/A N/A General Support

2055 L STREET NWSUITE 702 WASHINGTON, DC 200364983

County 2202 BYTON CT FOREST HILL, MD 210501120						
National Restaurant Association Educational Foundation	36-6103388	501(c)(3)	25,995	N/A	N/A	General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Code 2 College 81-2361556 501(c)(3) 26,416 N/A N/A General Support

19112 LEIGH LN PFLUGERVILLE, TX 786603497						
Transitional Programs For Women	91-1307272	501(c)(3)	26,480	N/A	N/A	General Support

3128 N Hemlock Spokane, WA 99205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) American Red Cross 53-0196605 501(c)(3) 28,846 N/A N/A General Support

39665 Entrepreneur LaneSuite A						
Palm Desert, CA 92211						
Radiological Society Of North America Inc	15-0539115	501(c)(3)	30,000	N/A	N/A	General Support

820 JORIE BLVD

OAK BROOK, IL 605232284

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) Disabled And Alone Life 13-3530656 501(c)(3) 32,204 N/A IN/A General Support Services For The Handicapped

Hathaway-Sycamores Child	95-1691005	501(c)(3)	33,050	N/A	N/A	General Support
1441 Broadway 6th FL PMB6135 New York, NY 100181905						

And Family Services 210 S DE LACEY AVE STE 110

PASADENA, CA 911052074

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 52-1497470 501(c)(3) 35.309 N/A N/A General Support Conservation International

Folsom, CA 95630

13405 Folsom Blvd Suite 511

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 46-1139731 501(c)(3) 39.907 N/A IN/A General Support AKTIV Against Cancer 207 FRONT STREET 3RD FLOOR NEW YORK, NY 100382106 Help One Child Mission To 77-0330145 501(c)(3) 48.758 N/A IN/A General Support Children At Risk

858 University Ave Los Altos, CA 94024

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 26-2513136 501(c)(3) 60.655 IN/A Experience Camps N/A |General Support 10 LONE PINE LN

WESTPORT, CT 068802538

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AURORA, IL 605063814

Vna Health Care 36-2182095 501(c)(3) 62,000 IN/A N/A General Support 400 N HIGHLAND AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Neighborhood Healthcare 95-2796316 501(c)(3) 62.300 IN/A N/A |General Support 425 N DATE ST 203 ESCONDIDO, CA 920253413

IN/A

N/A

General Support

75.090

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

91-1148123

Mercy Corps

PO Box 2669 Dept W Portland, OR 97208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Imran Khan Cancer Appeal Inc 13-3626299 501(c)(3) 109.556 IN/A General Support N/A 4 Forest Park Dr Farmington, MI 06032

N/A

N/A

General Support

110.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

A Forest Park Dr
Farmington, MI 06032

Oklahoma Blood Institute 73-1008735 501(c)(3)
1001 N LINCOLN BLVD

OKLAHOMA CITY, OK 731043251

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Student Sponsor Partnership 13-3392965 501(c)(3) 248.176 IN/A General Support 424 Madison Ave Ste 3

New York, NY 10017

efile GRAPH	DLN	: 93493281015120				
SCHEDUL (Form 990 or EZ)	990-EZ ions on on.	OMB No. 1545-0047 2019 Open to Public Inspection				
Name Setherofo JustGive Inc 990 Schedul		emental Informatio	n		94-3331010	tification number
Return Reference				Explanation		
Form 990, Part VI, Section B, line 11b	The Execut	ive Director and the Aud	it Committee review th	e Form 990 before it is filed.		

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section C,
line 19

Return Explanation
Reference

990 Schedule O, Supplemental Information

Reference
Form 990,
Part XII, Line
The Organization's Audit Committee is responsible for oversight of the audit and selection
of the independent accountant, the process has not changed from previous years.