Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 01-01-2020 , and ending 12-31-2020

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
UNITED NATIONS FOUNDATION INC
% UN FDN CFO
Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
1750 PENNSYLVANIA AVENUE NW STE 300

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20006

D Employer identification number
58-2368165

E Telephone number
(202) 887-9040

G Gross receipts $ 311,161,670

F Name and address of principal officer:
ELIZABETH COUSENS
1750 PENNSYLVANIA AVENUE NW STE 300
WASHINGTON,DC 20006

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.UNFOUNDATION.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1998

M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
UNF SUPPORTS UN CAUSES AND ACTIVITIES. WE ARE AN ADVOCATE FOR THE UN AND A PLATFORM FOR CONNECTING PEOPLE, IDEAS AND RESOURCES TO HELP THE UN SOLVE GLOBAL PROBLEMS.

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

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	13
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	**5**	350
6	Total number of volunteers (estimate if necessary)	**6**	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	77,566
b	Net unrelated business taxable income from Form 990-T, line 39	**7b**	49,203

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	117,830,806	281,195,084
9	Program service revenue (Part VIII, line 2g)	1,498,136	934,437
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-942,528	12,541,219
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	841,086	1,204,113
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	119,227,500	295,874,853
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	21,844,527	212,568,364
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	35,615,136	35,117,280
16a	Professional fundraising fees (Part IX, column (A), line 11e)	469,587	452,889
b	Total fundraising expenses (Part IX, column (D), line 25) ▶4,660,831		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	36,918,678	33,189,922
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	94,847,928	281,328,455
19	Revenue less expenses. Subtract line 18 from line 12	24,379,572	14,546,398

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	336,077,459	375,786,692
21	Total liabilities (Part X, line 26)	18,927,277	20,957,298
22	Net assets or fund balances. Subtract line 21 from line 20	317,150,182	354,829,394

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2021-11-15

LIA FORDJOUR CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2021-11-15		P00369623

Firm's name ▶ PricewaterhouseCoopers LLP — Firm's EIN ▶

Firm's address ▶ 655 NEW YORK AVENUE NW SUITE 1100
WASHINGTON, DC 20001 — Phone no. (202) 414-1000

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE UNITED NATIONS FOUNDATION WAS CREATED IN 1998 TO SUPPORT UNITED NATIONS CAUSES AND ACTIVITIES. WE ARE AN ADVOCATE FOR THE UNITED NATIONS AND A PLATFORM FOR CONNECTING PEOPLE, IDEAS AND RESOURCES TO HELP THE UNITED NATIONS SOLVE GLOBAL PROBLEMS. WE AIM TO ACHIEVE THESE OBJECTIVES THROUGH: 1) PROGRAMS AND ACTIVITIES OF THE UNITED NATIONS OR IN WHICH THE UNITED NATIONS IS PARTICIPATING; 2) ACTIVITIES WHICH SUPPORT AND INCREASE PUBLIC AWARENESS OF THE GOALS AND OBJECTIVES OF THE UNITED NATIONS; 3) GRANTS AND DISTRIBUTIONS IN SUPPORT OF UNITED NATIONS PROGRAMS; AND 4) ADVOCACY, PARTNERSHIPS, CONSTITUENCY BUILDING AND FUNDRAISING.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 210,072,662 including grants of $ 190,493,364) (Revenue $ 624,194)

CHILDREN'S HEALTH: THE UNITED NATIONS FOUNDATION'S CHILDREN'S HEALTH PROGRAM ASSISTS THE UNITED NATIONS IN ITS EFFORTS TO ENSURE THAT ALL CHILDREN HAVE THE MEANS AND THE OPPORTUNITY TO DEVELOP TO THEIR FULL POTENTIAL. THE UNITED NATIONS FOUNDATION'S MAJOR PRIORITIES ARE DECREASING CHILDHOOD MORTALITY THROUGH COMMUNITY-BASED PROGRAMS AND UTILIZING PUBLIC-PRIVATE PARTNERSHIPS TO STRENGTHEN THE PUBLIC HEALTH INFRASTRUCTURE TO CONTROL INFECTIOUS DISEASES SUCH AS POLIO, MEASLES AND MALARIA. TOGETHER WITH KEY UNITED NATIONS AGENCIES SUCH AS THE WORLD HEALTH ORGANIZATION, UNICEF AND PRIVATE SECTOR PARTNERS SUCH AS ROTARY INTERNATIONAL, NBA CARES AND THE PEOPLE OF THE UNITED METHODIST CHURCH, THE UNITED NATIONS FOUNDATION HAS HELPED ESTABLISH THE MEASLES INITIATIVE, NOTHING BUT NETS AND THE ROTARY-POLIO BUY DOWN INITIATIVE. THE UNITED NATIONS FOUNDATION'S MALARIA PARTNERSHIP WORKS TO PREVENT MALARIA DEATHS IN AFRICA.

4b (Code:) (Expenses $ 25,255,707 including grants of $ 3,987,509) (Revenue $ 234,411)

CLIMATE CHANGE, ENERGY & SUSTAINABLE DEVELOPMENT: THE UNITED NATIONS FOUNDATION'S CLIMATE AND ENERGY PROGRAM WORKS WITH THE UNITED NATIONS TO HELP LEAD THE WORLD'S TRANSITION TOWARD A CLIMATE-FRIENDLY ENERGY ECONOMY. IT SERVES AS A NONPARTISAN FORUM, AND CONVENES COALITIONS OF LEADING THINKERS AND ACTORS TO SEIZE OPPORTUNITIES AND ADDRESS CHALLENGES POSED BY THIS TRANSFORMATION. THE UNITED NATIONS FOUNDATION'S SUSTAINABLE DEVELOPMENT EFFORTS ARE UNDERTAKEN IN CLOSE COLLABORATION WITH THE UNITED NATIONS EDUCATIONAL, SCIENTIFIC, AND CULTURAL ORGANIZATION (UNESCO) WORLD HERITAGE CENTRE. THE UNITED NATIONS FOUNDATION'S EFFORTS ARE AIMED AT SUPPORTING AND PROMOTING THE MANAGEMENT AND CONSERVATION OF NATURAL WORLD HERITAGE SITES AND PROMOTION OF SUSTAINABLE TOURISM PRACTICES.

4c (Code:) (Expenses $ 20,114,879 including grants of $ 10,449,387) (Revenue $ 47,954)

WOMEN AND POPULATION: THE UNITED NATIONS FOUNDATION'S WOMEN AND POPULATION PROGRAM WORKS WITH THE UNITED NATIONS AND CIVIL SOCIETY TO SUPPORT ACHIEVEMENT OF UNIVERSAL ACCESS TO REPRODUCTIVE HEALTH SERVICES AND SUPPLIES -- THE CENTRAL GOAL ESTABLISHED AT THE UNITED NATIONS INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT (ICPD), ADOPTED IN 1994. TO ADVANCE THIS GOAL, THE UNITED NATIONS FOUNDATION'S WOMEN AND POPULATION PROGRAM IS INVOLVED IN: SUPPORTING AND STRENGTHENING UNITED NATIONS AGENCIES; ADVANCING THE EDUCATIONAL, ECONOMIC AND SOCIAL SERVICES AND OPPORTUNITIES AVAILABLE TO ADOLESCENT GIRLS; ENSURING AVAILABILITY OF REPRODUCTIVE HEALTH SUPPLIES; AND ADVOCATING FOR EMPIRICALLY-BASED STRATEGIES THAT ADDRESS THE CHALLENGES POSED BY DEMOGRAPHIC CHANGE AND INSUFFICIENT AVAILABILITY OF REPRODUCTIVE HEALTH AND RIGHTS AROUND THE WORLD.

(Code:) (Expenses $ 94,942 including grants of $ 158,319) (Revenue $ 0)

ADVOCACY

(Code:) (Expenses $ 12,610,811 including grants of $ 7,479,785) (Revenue $ 27,878)

UN STRENGTHENING

(Code:) (Expenses $ 0 including grants of $ 0) (Revenue $ 0)

PEACE, SECURITY & HUMAN RIGHTS

4d Other program services (Describe in Schedule O.)

(Expenses $ 12,705,753 including grants of $ 7,638,104) (Revenue $ 27,878)

4e **Total program service expenses** ▶ 268,149,001

Part IV 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	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		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? *If "Yes," complete Schedule C, Part II*	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? *If "Yes," complete Schedule D,* Part I	6		No
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? *If "Yes," complete Schedule D,* Part III	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? *If "Yes," complete Schedule D, Part V*	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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	11a	Yes	
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	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	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	Yes	
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	Yes	
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	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	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
27	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? *If "Yes," complete Schedule L,* Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	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
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	247		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c Yes	

Part V 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	**2a**	350		
b	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
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**	Yes
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			**3b**	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**	Yes
b	If "Yes," enter the name of the foreign country: ▶ UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
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
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			**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).**					
a	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**	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**	Yes	
c	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	**7d**				
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	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
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.**					
a	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:					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**				
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.	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.			**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?			**15**		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			**16**		No

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. 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.	**1a**	15		
b	Enter the number of voting members included in line 1a, above, who are independent	**1b**	13		
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**	Yes	
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:				
a	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

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
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**		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ AL, AR, CA, CO, CT, FL, GA, HI, ID, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI, WY

18 Section 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.

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ UN FDN CFO 1750 PENNSYLVANIA AVENUE NW STE 3 WASHINGTON, DC 20006 (202) 887-9040

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ELIZABETH COUSENS PRESIDENT & CEO	34.0 6.0	X		X				360,567	63,629	24,923
(2) ANDREW AXELROD COO	40.0 0.0			X				319,686	0	29,973
(3) GEETA GUPTA EXECUTIVE DIRECTOR, 3D PROG.	40.0 0.0					X		306,264	0	19,585
(4) RAJESH MIRCHANDANI CHIEF COMMUNIC. OFFICER	40.0 0.0					X		284,424	0	35,966
(5) DYMPHNA VAN DER LANS CHIEF EXECUTIVE OFFICER, GACC	40.0 0.0					X		288,215	0	30,256
(6) PETER OGDEN VICE PRESIDENT, ENERGY	40.0 0.0					X		277,026	0	20,714
(7) SOFIA BORGES SENIOR VP & HEAD OF NY OFFICE	40.0 0.0					X		281,168	0	12,574
(8) LIA FORDJOUR CHIEF FINANCIAL OFFICER	34.0 6.0			X				212,156	37,439	25,768
(9) RE TURNER CHAIRMAN	5.0 5.0	X		X				0	0	0
(10) HER MAJESTY QUEEN RANIA AL-ABDULLAH DIRECTOR	5.0 0.0	X						0	0	0
(11) MARK MALLOCH-BROWN DIR., CO-CHAIR (UNTIL 12/20)	5.0 0.0	X		X				0	0	0
(12) FABIO C BARBOSA DIRECTOR	5.0 5.0	X						0	0	0
(13) GRO HARLEM BRUNDTLAND DIRECTOR & VICE CHAIR	5.0 5.0	X		X				0	0	0
(14) NR NARAYANA MURTHY DIRECTOR	5.0 5.0	X						0	0	0
(15) MUHAMMAD YUNUS DIRECTOR	5.0 0.0	X						0	0	0
(16) HANS VESTBERG DIRECTOR	5.0 0.0	X						0	0	0
(17) VALERIE AMOS DIRECTOR	5.0 0.0	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JULIO FRENK DIRECTOR	5.0 0.0	X						0	0	0
(19) TIMOTHY E WIRTH DIRECTOR & VICE CHAIR	5.0 5.0	X		X				0	0	0
(20) DR FRANNIE LEAUTIER DIRECTOR	5.0 0.0	X						0	0	0
(21) KATHRYN CALVIN WALTERS DIRECTOR	5.0 5.0	X						0	0	0
(22) LAURA TURNER SEYDEL DIRECTOR	5.0 5.0	X						0	0	0
(23) RUTHERFORD SEYDEL SECRETARY	5.0 5.0			X				0	0	0
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								2,329,506	101,068	199,759

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 113

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
DALBERG CONSULTING US LLC, 155 WEST 23RD ST 6TH FLOOR NEW YORK, NY 10011	CONSULTING SERVICES	807,500
DANIEL J EDELMAN INC, SOUTHSIDE 105 VICTORIA STREET LONDON, 0 SW1E 6QT UK	CONSULTING SERVICES	758,225
FLOWMINDER FOUNDATION, ROSLAGSGATAN 17 SE-11355 STOCKHOLM, 0 SW	CONSULTING SERVICES	544,784
DAVIS PICKREN SEYDEL SNEED, 285 PEACHTREE CTR AVE NE ATLANTA, GA 30303	CONSULTING SERVICES	462,400
VELOCITY, 3001 BRIGHTON BLVD STE 900 DENVER, CO 80216	CONSULTING SERVICES	426,940

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 48

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	520,092			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	833,368			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	279,841,624			
	g Noncash contributions included in lines 1a - 1f: $	1g	708,389			
	h **Total.** Add lines 1a-1f		281,195,084			
Program Service Revenue		Business Code				
	2a CONTRACT REVENUE	900099	827,241	827,241		
	b TRAINING/WORKSHOP REVENUE	611430	107,196	107,196		
	c					
	d					
	e					
	f All other program service revenue.					
	g **Total.** Add lines 2a–2f		934,437			
Other Revenue	3 Investment income (including dividends, interest, and similar amounts)		460,985		77,566	383,419
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		0			

		(i) Real	(ii) Personal				
6a Gross rents	6a	502,994					
b Less: rental expenses	6b						
c Rental income or (loss)	6c	502,994	0				
d Net rental income or (loss)				502,994			502,994

		(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	7a	27,367,051					
b Less: cost or other basis and sales expenses	7b	15,286,817					
c Gain or (loss)	7c	12,080,234					
d Net gain or (loss)				12,080,234			12,080,234

8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a	0				
b Less: direct expenses	8b	0				
c Net income or (loss) from fundraising events			0			
9a Gross income from gaming activities. See Part IV, line 19	9a	0				
b Less: direct expenses	9b	0				
c Net income or (loss) from gaming activities			0			
10a Gross sales of inventory, less						

returns and allowances . .	10a	0				
b Less: cost of goods sold . .	10b	0				
c Net income or (loss) from sales of inventory . . ▶			0			
Miscellaneous Revenue		Business Code				
11a GRANT RECOVERIES AND ADJUSTMENTS		900099	593,923			593,923
b MISCELLANEOUS		900099	107,196			107,196
c						
d All other revenue						
e **Total.** Add lines 11a–11d . . . . . ▶			701,119			
12 **Total revenue.** See instructions . . . . . ▶			295,874,853	934,437	77,566	13,667,766

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	30,115,223	30,115,223		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	182,453,141	182,453,141		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	5,819,496	5,567,295	155,788	96,413
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	24,376,760	23,320,338	652,567	403,855
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,597,933	1,528,682	42,777	26,474
9 Other employee benefits	1,199,186	1,147,217	32,102	19,867
10 Payroll taxes	2,123,905	2,031,861	56,857	35,187
11 Fees for services (non-employees):				
a Management	0			
b Legal	687,349	657,561	18,400	11,388
c Accounting	411,555	393,719	11,018	6,818
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	452,889			452,889
f Investment management fees	1,032,176	987,444	27,632	17,100
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	20,731,822	10,064,893	7,246,355	3,420,574
12 Advertising and promotion	40,785	39,017	1,092	676
13 Office expenses	957,589	916,089	25,635	15,865
14 Information technology	318,103	304,317	8,516	5,270
15 Royalties	0			
16 Occupancy	5,771,576	5,521,452	154,505	95,619
17 Travel	745,463	713,157	19,956	12,350
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	1,058,485	1,012,613	28,336	17,536
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,050,627	1,007,246	26,797	16,584
23 Insurance	155,172	148,447	4,154	2,571
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a COMMUNICATIONS	229,220	219,289	6,136	3,795
b				
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	281,328,455	268,149,001	8,518,623	4,660,831
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		1,434	1	1,404
	2	Savings and temporary cash investments		40,385,207	2	83,551,811
	3	Pledges and grants receivable, net		93,789,363	3	90,456,938
	4	Accounts receivable, net		7,668,909	4	1,809,259
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		1,317,141	9	1,497,354
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 12,008,569			
	b	Less: accumulated depreciation	10b 7,246,179	5,813,017	10c	4,762,390
	11	Investments—publicly traded securities		41,919,387	11	51,552,175
	12	Investments—other securities. See Part IV, line 11		145,183,001	12	142,155,361
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		0	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		336,077,459	16	375,786,692
Liabilities	17	Accounts payable and accrued expenses		4,626,798	17	7,624,529
	18	Grants payable		36,000	18	0
	19	Deferred revenue		14,264,479	19	13,332,769
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		0	25	0
	26	**Total liabilities.** Add lines 17 through 25		18,927,277	26	20,957,298
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		191,424,914	27	219,316,510
	28	Net assets with donor restrictions		125,725,268	28	135,512,884
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		317,150,182	32	354,829,394
	33	Total liabilities and net assets/fund balances		336,077,459	33	375,786,692

Part XI 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	295,874,853
2	Total expenses (must equal Part IX, column (A), line 25)	2	281,328,455
3	Revenue less expenses. Subtract line 2 from line 1	3	14,546,398
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	317,150,182
5	Net unrealized gains (losses) on investments	5	21,984,639
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	1,148,175
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	354,829,394

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	91,759,666	81,852,839	66,542,025	117,830,806	281,195,084	639,180,420
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge. .						0
4 **Total.** Add lines 1 through 3	91,759,666	81,852,839	66,542,025	117,830,806	281,195,084	639,180,420
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). .						125,934,108
6 **Public support.** Subtract line 5 from line 4.						513,246,312

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4. .	91,759,666	81,852,839	66,542,025	117,830,806	281,195,084	639,180,420
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	2,246,040	3,076,489	2,297,786	123,009	460,985	8,204,309
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .	12,497		182,096	0		194,593
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	-320,874	1,261,674	105,257	101,161	701,119	1,848,337
11 **Total support.** Add lines 7 through 10						649,427,659

12 Gross receipts from related activities, etc. (see instructions) 12 8,582,083

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 79.031 %

15 Public support percentage for 2019 Schedule A, Part II, line 14 . . . . . 15 77.625 %

16a **33 1/3% support test—2020.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2019.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 **Total support.** (Add lines 9, 10c, 11, and 12.). .						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. . . . . ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f))	15
16	Public support percentage from 2019 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2020** (line 10c, column (f) divided by line 13, column (f))	17
18	Investment income percentage from **2019** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

b **33 1/3% support tests—2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	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		
2	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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**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		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *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		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	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.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	10b		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in 11a above?	**11b**		
c	A 35% controlled entity of a person described in line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in* ***Part VI****.*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, 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 operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	**2**		

Section 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 supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			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 line 2 above, 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**		

Section 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 instructions)**:

- **a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- **b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- **c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			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**		
b	Did the activities described in line 2a 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 lines 3a and 3b 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? *If "Yes" or "No" provide details in* ***Part VI.***	**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.*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 *(explain in **Part VI**)*. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	**1**		
a	Average monthly value of securities	**1a**		
b	Average monthly cash balances	**1b**		
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 0.015 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 0.035	**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**	

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4 Amounts paid to acquire exempt-use assets	**4**	
5 Qualified set-aside amounts (*prior IRS approval required - provide details in* ***Part VI***)	**5**	
6 Other distributions (*describe in* ***Part VI***). See instructions	**6**	
7 **Total annual distributions.** Add lines 1 through 6.	**7**	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions	**8**	
9 Distributable amount for 2020 from Section C, line 6	**9**	
10 Line 8 amount divided by Line 9 amount	**10**	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2020**	**(iii) Distributable Amount for 2020**
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- *explain in* ***Part VI***). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2020. 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 2021.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 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).

Facts And Circumstances Test

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

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

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2020

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33$^{1}/_{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

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

Name of organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

Contributors

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

Name of organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

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

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

Name of organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.)** ▶ **$** _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

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

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☐ Preservation for future generations
- **d** ☐ Loan or exchange programs
- **e** ☐ Other .....

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

		Amount
c	Beginning balance	**1c**
d	Additions during the year	**1d**
e	Distributions during the year	**1e**
f	Ending balance	**1f**

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

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

Part V Endowment Funds.

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- **a** Board designated or quasi-endowment ▶ .....
- **b** Permanent endowment ▶ .....
- **c** Term endowment ▶ .....

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations . . . . . **3a(i)**		
(ii) Related organizations . . . . . **3a(ii)**		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? **3b**		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land				
b Buildings				
c Leasehold improvements		8,699,325	3,944,417	4,754,908
d Equipment		350,519	434,551	-84,032
e Other		2,958,725	2,867,211	91,514
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				4,762,390

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	142,155,361	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	142,155,361	

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 13.)* ▶		

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

(a) Description	(b) Book value
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	0

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☑

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

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

1	Total revenue, gains, and other support per audited financial statements			1	317,975,491
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	21,984,639		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	115,999		
e	Add lines **2a** through **2d**			2e	22,100,638
3	Subtract line **2e** from line **1**			3	295,874,853
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	295,874,853

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements			1	280,296,279
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	280,296,279
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,032,176		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	1,032,176
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	281,328,455

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
SCHEDULE D, PART X, LINE 2:	UNF HAS RECEIVED A RULING FROM THE INTERNAL REVENUE SERVICE THAT IT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AS A PUBLIC CHARITY, OTHER THAN UNRELATED BUSINESS INCOME. SINCE UNF HAS NO SIGNIFICANT UNRELATED BUSINESS INCOME, NO PROVISION FOR INCOME TAX HAS BEEN RECORDED. FASB'S GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES CLARIFIES THE ACCOUNTING FOR UNCERTAINTY OF INCOME TAX POSITIONS. THIS GUIDANCE DEFINES THE THRESHOLD FOR RECOGNIZING TAX RETURN POSITIONS IN THE FINANCIAL STATEMENTS AS "MORE LIKELY THAN NOT" THAT THE POSITION IS SUSTAINABLE, BASED ON ITS TECHNICAL MERITS. THIS GUIDANCE ALSO PROVIDES GUIDANCE ON THE MEASUREMENT, CLASSIFICATION, AND DISCLOSURE OF TAX RETURN POSITIONS IN THE FINANCIAL STATEMENTS. THERE WAS NO IMPACT ON UNF'S FINANCIAL STATEMENTS DURING THE YEARS ENDED DECEMBER 31, 2020 AND 2019 RESULTING FROM THIS GUIDANCE.
SCHEDULE D, PART XI, LINE 2D:	UNREALIZED FOREIGN EXCHANGE GAIN $1,148,175 INVESTMENT EXPENSES ($1,032,176) ---------- TOTAL $115,999

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

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

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

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

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

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
(1) East Asia and the Pacific	0	0	Grantmaking		3,151,274
(2) Europe (Including Iceland and Greenland)	1	0	Grantmaking		173,036,103
(3) Middle East and North Africa	0	0	Grantmaking		4,993,683
(4) Russia and the Newly Independent States	0	0	Grantmaking		148,458
(5) South Asia	0	0	Grantmaking		97,317
(6) Sub-Saharan Africa	0	0	Grantmaking		996,306
(7) North America	0	0	Grantmaking		30,000
(8) Europe (Including Iceland and Greenland)	1	6	Maintaining offices		684,533
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	2	6			183,137,674
b Total from continuation sheets to Part I					
c **Totals** (add lines 3a and 3b)	2	6			183,137,674

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	WMN & POP	19,820	WIRE/CHECK		N/A	N/A
(2)			EAST ASIA AND THE PACIFIC	WMN & POP	17,500	WIRE/CHECK		N/A	N/A
(3)			EAST ASIA AND THE PACIFIC	ENVIRONMENT	83,750	WIRE/CHECK		N/A	N/A
(4)			SUB-SAHARAN AFRICA	ENVIRONMENT	10,000	WIRE/CHECK		N/A	N/A
(5)			SOUTH ASIA	WMN & POP	9,861	WIRE/CHECK		N/A	N/A
(6)			NORTH AMERICA	ENVIRONMENT	30,000	WIRE/CHECK		N/A	N/A
(7)			SUB-SAHARAN AFRICA	WMN & POP	100,749	WIRE/CHECK		N/A	N/A
(8)			EUROPE (INCLUDING ICELAND & GREENLAND)	ENVIRONMENT	16,000	WIRE/CHECK		N/A	N/A
(9)			SUB-SAHARAN AFRICA	CHLDRN HLTH	7,800	WIRE/CHECK		N/A	N/A
(10)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHILDREN'S HEALTH	10,000,000	WIRE/CHECK		N/A	N/A
(11)			SUB-SAHARAN AFRICA	WMN & POP	47,616	WIRE/CHECK		N/A	N/A
(12)			SOUTH ASIA	WMN & POP	11,500	WIRE/CHECK		N/A	N/A
(13)			EUROPE (INCLUDING ICELAND & GREENLAND)	ENVIRONMENT	10,000	WIRE/CHECK		N/A	N/A
(14)			SUB-SAHARAN AFRICA	WMN & POP	38,433	WIRE/CHECK		N/A	N/A
(15)			EUROPE (INCLUDING ICELAND & GREENLAND)	UN STRNGTHNG	975,000	WIRE/CHECK		N/A	N/A
(16)			SUB-SAHARAN AFRICA	WMN & POP	10,000	WIRE/CHECK		N/A	N/A
(17)			South Asia	WMN & POP	18,011	WIRE/CHECK		N/A	N/A
(18)			SOUTH ASIA	WMN & POP	25,625	WIRE/CHECK		N/A	N/A
(19)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHILDREN'S HEALTH	773,000	WIRE/CHECK		N/A	N/A
(20)			EAST ASIA AND THE PACIFIC	ADVOCACY	80,000	WIRE/CHECK		N/A	N/A
(21)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	177,661	WIRE/CHECK		N/A	N/A
(22)			EUROPE (INCLUDING ICELAND & GREENLAND)	WMN & POP	199,277	WIRE/CHECK		N/A	N/A
(23)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	11,275	WIRE/CHECK		N/A	N/A
(24)			SOUTH ASIA	WMN & POP	12,500	WIRE/CHECK		N/A	N/A
(25)			SUB-SAHARAN AFRICA	CHLDRN HLTH	72,333	WIRE/CHECK		N/A	N/A
(26)			EUROPE (INCLUDING ICELAND & GREENLAND)	WMN & POP	1,200,000	WIRE/CHECK		N/A	N/A
(27)			SUB-SAHARAN AFRICA	WMN & POP	99,487	WIRE/CHECK		N/A	N/A
(28)			SUB-SAHARAN AFRICA	WMN & POP	67,000	WIRE/CHECK		N/A	N/A
(29)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	17,940	WIRE/CHECK		N/A	N/A
(30)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	40,000	WIRE/CHECK		N/A	N/A
(31)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	9,000	WIRE/CHECK		N/A	N/A
(32)			SUB-SAHARAN AFRICA	CHLDRN HLTH	25,000	WIRE/CHECK		N/A	N/A
(33)			EAST ASIA AND THE PACIFIC	ENVIRONMENT	11,900	WIRE/CHECK		N/A	N/A
(34)			SUB-SAHARAN AFRICA	ENVIRONMENT	31,750	WIRE/CHECK		N/A	N/A
(35)			SUB-SAHARAN AFRICA	WMN & POP	14,904	WIRE/CHECK		N/A	N/A
(36)			EUROPE (INCLUDING ICELAND & GREENLAND)	UN STRNGTHNG	200,000	WIRE/CHECK		N/A	N/A
(37)			EAST ASIA AND THE PACIFIC	ENVIRONMENT	30,000	WIRE/CHECK		N/A	N/A
(38)			EAST ASIA AND THE PACIFIC	ENVIRONMENT	30,000	WIRE/CHECK		N/A	N/A
(39)			SUB-SAHARAN AFRICA	CHLDRN HLTH	189,518	WIRE/CHECK		N/A	N/A
(40)			SUB-SAHARAN AFRICA	WMN & POP	59,937	WIRE/CHECK		N/A	N/A
(41)			EUROPE (INCLUDING ICELAND & GREENLAND)	WMN & POP	134,000	WIRE/CHECK		N/A	N/A
(42)			EUROPE (INCLUDING ICELAND & GREENLAND)	ENVIRONMENT	1,021,068	WIRE/CHECK		N/A	N/A
(43)			SUB-SAHARAN AFRICA	WMN & POP	47,563	WIRE/CHECK		N/A	N/A
(44)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	125,000	WIRE/CHECK		N/A	N/A
(45)			SUB-SAHARAN AFRICA	WMN & POP	59,516	WIRE/CHECK		N/A	N/A
(46)			EAST ASIA AND THE PACIFIC	WMN & POP	227,500	WIRE/CHECK		N/A	N/A
(47)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	161,500	WIRE/CHECK		N/A	N/A
(48)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHILDREN'S HEALTH	10,000,000	WIRE/CHECK		N/A	N/A
(49)			EUROPE (INCLUDING ICELAND & GREENLAND)	UN STRNGTHNG	128,176	WIRE/CHECK		N/A	N/A
(50)			RUSSIA AND NEIGHBORING STATES	WMN & POP	148,458	WIRE/CHECK		N/A	N/A
(51)			EAST ASIA AND THE PACIFIC	WMN & POP	70,624	WIRE/CHECK		N/A	N/A
(52)			MIDDLE EAST AND NORTH AFRICA	CHILDREN'S HEALTH	4,993,683	WIRE/CHECK		N/A	N/A
(53)			EUROPE (INCLUDING ICELAND & GREENLAND)	WMN & POP	149,468	WIRE/CHECK		N/A	N/A
(54)			EUROPE (INCLUDING ICELAND & GREENLAND)	UN STRNGTHNG	61,500	WIRE/CHECK		N/A	N/A
(55)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHILDREN'S HEALTH	20,000,000	WIRE/CHECK		N/A	N/A
(56)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	2,452,564	WIRE/CHECK		N/A	N/A
(57)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHILDREN'S HEALTH	125,153,943	WIRE/CHECK		N/A	N/A
(58)			EAST ASIA AND THE PACIFIC	CHLDRN HLTH	2,600,000	WIRE/CHECK		N/A	N/A
(59)			SUB-SAHARAN AFRICA	WMN & POP	109,700	WIRE/CHECK		N/A	N/A
(60)			EUROPE (INCLUDING ICELAND & GREENLAND)	CHLDRN HLTH	15,000	WIRE/CHECK		N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 31

3 Enter total number of other organizations or entities . . . . . ▶ 28

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

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

Part IV Foreign Forms

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

Part V **Supplemental Information**

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

ReturnReference	Explanation
SCHEDULE F, PART I, LINE 2:	THE UNITED NATIONS FOUNDATION PRIMARILY MAKES GRANTS TO THE UNITED NATIONS AND ITS RELATED/AFFILIATED AGENCIES. MONITORING OF FUNDS GRANTED TO THOSE AGENCIES CONSISTS PRIMARILY OF GRANT REPORTS RECEIVED QUARTERLY, SEMIANNUALLY OR ANNUALLY AS STIPULATED IN THE GRANT AGREEMENTS. FROM TIME TO TIME, THE UNITED NATIONS FOUNDATION ALSO CONDUCTS SITE VISITS TO MONITOR DISTRIBUTION OF GRANT-RELATED RESOURCES AND ASSESS THE EFFECTIVENESS AND PROGRESS OF GRANT ACTIVITIES.

Additional Data

Software ID:

Software Version:

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☑ Mail solicitations
- **b** ☑ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☑ Solicitation of government grants
- **g** ☐ Special fundraising events

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

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

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	**(iii)** No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
1	ELIASSON SCHAMIS GROUP 2829 29TH STREET NW WASHINGTON, DC 20008	INTERNET/ DIRECT MAIL		No		312,409	
2	INTEGRATED DIRECT MARKETING 1250 CONNECTICUT AVENUE NW SUITE 250 WASHINGTON, DC 20036	INTERNET/ DIRECT MAIL		No		140,480	
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶						452,889	

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

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

Revenue / Direct Expenses		**(a)** Event #1 (event type)	**(b)** Event #2 (event type)	**(c)** Other events (total number)	**(d)** Total events (add col. **(a)** through col. **(c)**)
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

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

Revenue / Direct Expenses		**(a)** Bingo	**(b)** Pull tabs/Instant bingo/progressive bingo	**(c)** Other gaming	**(d)** Total gaming (add col.**(a)** through col.**(c)**)
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ **Yes** ____ % ☐ **No**	☐ **Yes** ____ % ☐ **No**	☐ **Yes** ____ % ☐ **No**	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ **Yes** ☐ **No**

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ **Yes** ☐ **No**

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

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

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ ----------

Address ▶ ----------

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____.

c If "Yes," enter name and address of the third party:

Name ▶ ----------

Address ▶ ----------

16 Gaming manager information:

Name ▶ ----------

Gaming manager compensation ▶ $ ----------

Description of services provided ▶ ----------

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

Return Reference	Explanation

Additional Data **Return to Form**

Software ID:

Software Version:

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

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED NATIONS FOUNDATION INC

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 *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number
58-2368165

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(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) AMERICAN ASSOCIATION OF NURSE PRACTITIONERS PO BOX 12846 AUSTIN,TX 78711	22-2547543	501(c)(6)	15,000		N/A		CHLDRN HLTH
(2) AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT ECONOMY (529 14TH ST NW SUITE 600 WASHINGTON,DC 20045	94-2711707	501(c)(3)	58,000		N/A		ENVIRONMENT
(3) AMERICAN FORESTS 1220 L STREET NW STE 750 WASHINGTON,DC 20005		501(c)(3)	318,262		N/A		ENVIRONMENT
(4) BATONGA FOUNDATION 1875 CONNECTICUT AVE NW 10TH FLOOR WASHINGTON,DC 20009	20-5927387	501(c)(3)	187,511		N/A		WMN & POP
(5) BETTER WORLD FUND 1750 PENNSYLVANIA AVE SUITE 300 WASHINGTON,DC 20006	58-2366765	501(c)(3)	3,108,000		N/A		UN STRNGTHNG
(6) BURN MANUFACTURING COMPANY 18850 103RD AVENUE SW SUITE 220 VASHON,WA 98070	45-3247706		16,000		N/A		ENVIRONMENT
(7) BUSINESS FOR SOCIAL RESPONSIBILITY 220 MONTGOMERY STREET 17TH FLOOR SAN FRANCISCO,CA 94104	52-1764268	501(c)(3)	134,000		N/A		WMN & POP
(8) CDC FOUNDATION 600 PEACHTREE STREET NE ATLANTA,GA 30308	58-2106707	501(c)(3)	100,000		N/A		CHLDRN HLTH
(9) CENTER FOR US GLOBAL LEADERSHIP 529 20TH STREET NW SUITE 600 WASHINGTON,DC 20036	74-3093659	501(c)(3)	50,000		N/A		ADVOCACY
(10) CHRISTIAN CONNECTIONS FOR INTERNATIONAL HEALTH (CC 1329 SHEPARD DRIVE SUITE C STERLING,VA 20164	54-1932761	501(c)(3)	30,000		N/A		WMN & POP
(11) CLINTON HEALTH ACCESS INITIATIVE 383 DORCHESTER AVE SUITE 400 BOSTON,MA 02127	27-1414646	501(c)(3)	203,061		N/A		WMN & POP
(12) COOPERSMITH INTERNATIONAL MONITORING AND EVALUATI 1250 RIVER RD NW WASHINGTON,DC 20016	47-2387850		457,211		N/A		CHLDRN HLTH
(13) COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE 151 ELLIS STREET NE ATLANTA,GA 30303	13-1685039	501(c)(3)	524,138		N/A		WMN & POP
(14) EAST-WEST CENTER 1601 EAST-WEST ROAD HONOLULU,HI 96848		501(c)(3)	78,750		N/A		ENVIRONMENT
(15) EMORY UNIVERSITY 1599 CLIFTON ROAD 4TH FLOOR ATLANTA,GA 30322	58-0566256	501(c)(3)	239,055		N/A		WMN & POP
(16) ENGENDERHEALTH INC 505 9TH STREET NW STE 601 WASHINGTON,DC 20004	13-1623838	501(c)(3)	125,978		N/A		WMN & POP
(17) FINANCIAL ALLIANCE FOR WOMEN 68 3RD ST BROOKLYN,NY 11231	27-4597912	501(C)(6)	179,300		N/A		WMN & POP
(18) FOUNDATION FOR LOUISIANA 1032 ST CHARLES AVENUE SUITE 200 NEW ORLEANS,LA 70130	20-3399944	501(c)(3)	100,000		N/A		WMN & POP
(19) GENERAL FEDERAL OF WOMEN'S CLUBS (GFWC) 1734 N STREET NW WASHINGTON,DC 20036	53-0196514	501(c)(3)	15,000		N/A		CHLDRN HLTH
(20) GOVERNOR'S ENERGY OFFICE STATE OF MAINE 62 STATE HOUSE STATION AUGUSTA,ME 04333		GOVERNMENT	165,600		N/A		ENVIRONMENT
(21) GOVERNOR'S OFFICE STATE OF COLORADO 136 STATE CAPITOL DENVER,CO 80203		GOVERNMENT	252,000		N/A		ENVIRONMENT
(22) GUTTMACHER INSTITUTE 125 MAIDEN LANE 7TH FLOOR NEW YORK,NY 10038	13-2890727	501(c)(3)	200,000		N/A		WMN & POP
(23) HAGEN 4321 10TH PL NE WASHINGTON,DC 20017	27-2004653		15,000		N/A		CHLDRN HLTH
(24) HAITI RENEWAL ALLIANCE 1626 BELLEVIEW BLVD 7282 ALEXANDRIA,VA 22307	27-2036754	501(c)(3)	10,569		N/A		ADVOCACY
(25) INDEPENDENT SECTOR 1602 L STREET NW SUITE 900 WASHINGTON,DC 20036	52-1081024	501(c)(3)	15,000		N/A		ADVOCACY
(26) INTERNATIONAL CENTER FOR RESEARCH ON WOMEN 1120 20TH STREET NW SUITE 500 NOR WASHINGTON,DC 20036	52-1081455	501(c)(3)	214,000		N/A		WMN & POP
(27) MASSACHUSETTS EXECUTIVE OFFICE ENERGY AND ENVIRONM SALTONSTALL BUILDING 100 CAMBRIDGE BOSTON,MA 02114		GOVERNMENT	188,800		N/A		ENVIRONMENT
(28) MAYOR'S FUND TO ADVANCE NEW YORK CITY 1 BROADWAY 6TH FLOOR NEW YORK,NY 10007	13-3783906	501(c)(3)	19,479		N/A		UN STRNGTHNG
(29) MENNONAGE GLOBAL ALLIANCE 1875 CONNECTICUT AVE NW WASHINGTON,DC 20009	81-1666828	501(c)(3)	275,000		N/A		WMN & POP
(30) NATIONAL ASSOCIATION OF PEDIATRIC NURSE PRACTITION 5 HANOVER SQUARE SUITE 1401 NEW YORK,NY 10004	23-7403934	501(c)(6)	15,000		N/A		CHLDRN HLTH
(31) NATIONAL COALITION OF GIRLS' SCHOOLS PO BOX 5720 CHARLOTTESVILLE,VA 22905	04-3158798	501(c)(3)	20,000		N/A		WMN & POP
(32) NEW MEXICO ENVIRONMENT DEPARTMENT 1190 SAINT FRANCIS DR SUITI N4050 SANTA FE,NM 87505		GOVERNMENT	106,400		N/A		ENVIRONMENT
(33) OFFICE OF THE GOVERNOR 20320 MAIL SERVICE CENTER RALEIGH,NC 27699	56-1310675	GOVERNMENT	292,677		N/A		ENVIRONMENT
(34) OFFICE OF THE SPECIAL ADVISER ON PREPARATIONS FOR S-2707 UNITED NATIONS SECRETARIAT NEW YORK,NY 10017			2,025,813		N/A		UN STRNGTHNG
(35) ONA BUSINESS INC 126 E 12TH ST SUITE 4A NEW YORK,NY 10003	38-3940780		66,000		N/A		WMN & POP
(36) OPEN DATA WATCH INC 1110 VERMONT AVENUE WASHINGTON,DC 20005	46-3036686	501(c)(3)	340,000		N/A		WMN & POP
(37) OPEN FUNCTION GROUP LLC 66 EUCLID AVE MIDDLETOWN,NY 10766			15,000		N/A		CHLDRN HLTH
(38) OPENMRS INC 10425 COMMERCE DRIVE STE 100 CARMEL,IN 46032			15,000		N/A		CHLDRN HLTH
(39) OPPIA FOUNDATION INC 2520 WEST MIDDLEFIELD ROAD APT O MOUNTAIN VIEW,CA 94043	81-1740068	501(c)(3)	12,500		N/A		CHLDRN HLTH
(40) PAN AMERICAN HEALTH ORGANIZATION (PAHO) 525 23RD STREET NW WASHINGTON,DC 20037			503,390		N/A		CHLDRN HLTH
(41) PLANNED PARENTHOOD FEDERATION OF AMERICA 1110 VERMONT AVE NW STE 300 WASHINGTON,DC 20005	13-1644147	501(c)(3)	450,000		N/A		WMN & POP
(42) POPULATION ACTION INTERNATIONAL 1300 19TH STREET NW SUITE 200 WASHINGTON,DC 20036	52-0812075	501(c)(3)	400,000		N/A		WMN & POP
(43) POPULATION SERVICES INTERNATIONAL 1120 19TH ST NW WASHINGTON,DC 20036	56-0942853	501(c)(3)	110,086		N/A		WMN & POP
(44) PROGRAM FOR APPROPRIATE TECHNOLOGY IN HEALTH (PATH 2201 WESTLAKE AVE SUITE 200 SEATTLE,WA 98121	91-1157127	501(c)(3)	150,002		N/A		CHLDRN HLTH
(45) PROJECT GAIA INC 26 MUMMASUNG ST PO BOX 4190 GETTYSBURG,PA 17325	20-8497597	501(c)(3)	15,000		N/A		CHLDRN HLTH
(46) PROMUNDO-US 1367 CONNECTICUT AVE NW WASHINGTON,DC 20036	26-1931968	501(c)(3)	115,136		N/A		WMN & POP
(47) PURPOSE FOUNDATION 115 19TH AVE 6TH FLOOR NEW YORK,NY 10003	27-3106760	501(c)(3)	1,950,000		N/A		UN STRNGTHNG
(48) RESULTS EDUCATION FUND INC 1101 15TH STREET NW SUITE 1200 WASHINGTON,DC 20005	95-3747267	501(c)(3)	30,000		N/A		CHLDRN HLTH
(49) ROCKY MOUNTAIN INSTITUTE 22830 TWO RIVERS ROAD BASALT,CO 81621	74-2244146	501(c)(3)	50,000		N/A		ENVIRONMENT
(50) SAVE THE CHILDREN FEDERATION INC 501 KINGS HIGHWAY EAST SUITE 400 FAIRFIELD,CT 06825	06-0726487	501(c)(3)	27,792		N/A		WMN & POP
(51) SOFTWARE FREEDOM CONSERVANCY INC 137 MONTAGUE ST SUITE 380 BROOKLYN,NY 11201	41-2203632	501(c)(3)	67,000		N/A		CHLDRN HLTH
(52) STATE OF MAINE 181 STATE HOUSE STATION AUGUSTA,ME 04333		GOVERNMENT	133,000		N/A		ENVIRONMENT
(53) STATE OF NEVADA NV DIVISION OF ENVIRONMENTAL PROTEC CARSON CITY,NV 89701	88-6000022	GOVERNMENT	252,000		N/A		ENVIRONMENT
(54) STATE OF NEW MEXICO 1220 SOUTH ST FRANCIS DRIVE SANTA FE,NM 87505		GOVERNMENT	204,500		N/A		ENVIRONMENT
(55) STOCKHOLM ENVIRONMENT INSTITUTE US INC 11 CURTIS AVENUE SOMERVILLE,MA 02144	20-4659308	501(c)(3)	84,040		N/A		CHLDRN HLTH
(56) STUDENT NATIONAL PHARMACEUTICAL ASSOCIATION (SNPHA) PO BOX 2142 WEST MONROE,LA 71294		501(c)(3)	10,000		N/A		CHLDRN HLTH
(57) THE B TEAM 115 FIFTH AVENUE 6TH FLOOR NEW YORK,NY 10003	46-1860634	501(c)(3)	84,000		N/A		WMN & POP
(58) THE GENERAL HOSPITAL CORPORATION DBA MASSACHUSETTS 55 FRUIT STREET BOSTON,MA 02114	04-2697983	501(c)(3)	165,069		N/A		ENVIRONMENT
(59) THE GLOBAL BANKING ALLIANCE FOR WOMEN 540 PRESIDENT STREET BROOKLYN,NY 11225	27-4597912	501(C)(6)	26,400		N/A		WMN & POP
(60) TOGETHER FOR GIRLS 1889 7 STREET NW SUITE 350 WASHINGTON,DC 20006	45-4664343	501(c)(3)	6,569		N/A		WMN & POP
(61) TRUSTEES OF TUFTS COLLEGE 419 BOSTON AVE MEDFORD,MA 02155	04-2103634	501(c)(3)	106,000		N/A		WMN & POP
(62) UN WOMEN 220 EAST 42ND ST NEW YORK,NY 10017			22,000		N/A		UN STRNGTHNG
(63) UNFPA'S ACTION FOR ADOLESCENT GIRLS 605 THIRD AVENUE NEW YORK,NY 10158			175,000		N/A		WMN & POP
(64) UNICEF 3 UNITED NATIONS PLAZA NEW YORK,NY 10017			2,043,289		N/A		CHLDRN HLTH
(65) UNITED NATIONS CHILDREN'S FUND 3 UNITED NATIONS PLAZA NEW YORK,NY 10017			9,995,214		N/A		CHLDRN HLTH
(66) UNITED NATIONS FUND FOR INTERNATIONAL PARTNERSHIPS 220 EAST 42ND STREET 19TH FLOOR NEW YORK,NY 10017			1,932,959		N/A		UN STRNGTHNG
(67) UNITED NATIONS OFFICE OF DISARMAMENT AFFAIR UN PLAZA ROOM S-3185 NEW YORK,NY 10017			46,500		N/A		UN STRNGTHNG
(68) UNITED STATES JUNIOR CHAMBER 15645 OLIVE BLVD CHESTERFIELD,MO 63017	73-0555354	501(c)(4)	37,500		N/A		CHLDRN HLTH
(69) VERMONT DEPARTMENT OF ENVIRONMENTAL CONSERVATION 1 NATIONAL LIFE DR MONTPELIER,VT 05602		GOVERNMENT	103,198		N/A		ENVIRONMENT
(70) WISCONSIN DEPARTMENT OF ADMINISTRATION 101 E WILSON ST MADISON,WI 53703		GOVERNMENT	80,000		N/A		ENVIRONMENT
(71) WOMEN MOVING MILLIONS 19 FULTON ST 301 NEW YORK,NY 10038	45-2576859	501(c)(3)	119,585		N/A		WMN & POP
(72) WOMEN'S FOREIGN POLICY GROUP 1801 F ST NW 2ND FLOOR WASHINGTON,DC 20006	52-1818839	501(c)(3)	117,400		N/A		WMN & POP
(73) WOMEN'S PEACE AND HUMANITARIAN FUND 220 E 42ND STREET NEW YORK,NY 10017			301,380		N/A		WMN & POP

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 52

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 21

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

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

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

Return Reference	Explanation
SCHEDULE I, PART I, LINE 1:	THE UNITED NATIONS FOUNDATION PRIMARILY MAKES GRANTS TO THE UNITED NATIONS AND ITS RELATED/AFFILIATED AGENCIES AS WELL AS OTHER ORGANIZATIONS IN SUPPORT OF OUR MISSION. MONITORING OF FUNDS GRANTED TO THOSE AGENCIES CONSISTS PRIMARILY OF GRANT REPORTS RECEIVED QUARTERLY, SEMIANNUALLY OR ANNUALLY AS STIPULATED IN THE GRANT AGREEMENTS. FROM TIME TO TIME, THE UNITED NATIONS FOUNDATION ALSO CONDUCTS SITE VISITS TO MONITOR DISTRIBUTION OF GRANT-RELATED RESOURCES AND ASSESS THE EFFECTIVENESS AND PROGRESS OF GRANT ACTIVITIES.

Additional Data

Return to Form

Software ID:

Software Version:

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
1ELIZABETH COUSENS PRESIDENT & CEO	**(i)**	359,580	0	987	9,244	11,941	381,752	0
	(ii)	63,455	0	174	1,631	2,107	67,367	0
2LIA FORDJOUR CHIEF FINANCIAL OFFICER	**(i)**	211,848	0	308	12,817	9,086	234,059	0
	(ii)	37,385	0	54	2,262	1,603	41,304	0
3ANDREW AXELROD COO	**(i)**	319,416	0	270	17,100	12,873	349,659	0
	(ii)	0	0	0	0	0	0	0
4RAJESH MIRCHANDANI CHIEF COMMUNIC. OFFICER	**(i)**	283,803	0	621	17,100	18,866	320,390	0
	(ii)	0	0	0	0	0	0	0
5DYMPHNA VAN DER LANS CHIEF EXECUTIVE OFFICER, GACC	**(i)**	268,094	0	20,121	17,100	13,156	318,471	0
	(ii)	0	0	0	0	0	0	0
6PETER OGDEN VICE PRESIDENT, ENERGY	**(i)**	276,621	0	405	16,800	3,914	297,740	0
	(ii)	0	0	0	0	0	0	0
7SOFIA BORGES SENIOR VP & HEAD OF NY OFFICE	**(i)**	280,547	0	621	11,900	674	293,742	0
	(ii)	0	0	0	0	0	0	0
8GEETA GUPTA EXECUTIVE DIRECTOR, 3D PROG.	**(i)**	304,509	0	1,755	16,094	3,491	325,849	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

Additional Data

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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

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2020

Open to Public Inspection

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Part I Excess Benefit Transactions

(section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 **(a)** Name of disqualified person	**(b)** Relationship between disqualified person and organization	**(c)** Description of transaction	**(d)** Corrected? Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ $ ▶

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	**(b)** Relationship with organization	**(c)** Purpose of loan	**(d)** Loan to or from the organization? To	From	**(e)** Original principal amount	**(f)** Balance due	**(g)** In default? Yes	No	**(h)** Approved by board or committee? Yes	No	**(i)** Written agreement? Yes	No
Total ▶ $												

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of assistance	**(d)** Type of assistance	**(e)** Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ST LEONARDS PARTNERS LIMITED	35% CONTROLLED ENTITY OF OFFICER	113,106	CONSULTING		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

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

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Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	16	708,389	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )				
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement — **29** 0

		Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		
b	If "Yes," describe the arrangement in Part II.	**30a**	No
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	**31** Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	**32a** Yes	
b	If "Yes," describe in Part II.		
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE M, PART I, COLUMN (B):	AMOUNTS REPORTED IN PART I, COLUMN (B) REPRESENT THE NUMBER OF ITEMS CONTRIBUTED AND NOT THE NUMBER OF CONTRIBUTIONS.
SCHEDULE M, PART I, LINE 32B:	THE UNITED NATIONS FOUNDATION ENTERS INTO AGREEMENTS WITH THIRD-PARTY VENDORS/INSTITUTIONS/ORGANIZATIONS TO ASSIST WITH THE SALE OF SOPHISTICATED GIFTS RECEIVED, SUCH AS WORKS OF ART, SECURITIES, AND THE LIKE.

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ **Attach to Form 990 or 990-EZ.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

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UNITED NATIONS FOUNDATION INC

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58-2368165

Return Reference	Explanation
FORM 990, PART III, LINE 4D:	PROGRAM SERVICES ACTIVITIES #4, 5, & 6: UNITED NATIONS STRENGTHENING: THE UNITED NATIONS FOUNDATION BUILDS AND IMPLEMENTS PUBLIC-PRIVATE PARTNERSHIPS TO ADDRESS THE WORLD'S MOST PRESSING PROBLEMS, AND ALSO WORKS TO BROADEN SUPPORT FOR THE UNITED NATIONS THROUGH ADVOCACY AND PUBLIC OUTREACH. THE UNITED NATIONS FOUNDATION ALSO PROVIDES OPERATIONAL GRANTS FOR UNITED NATIONS-RELATED PROGRAMS AND INITIATIVES. EXPENSES: $12,610,811 GRANTS: $7,479,785 REVENUE: $27,878 ADVOCACY: THE UNITED NATIONS FOUNDATION HAS WORKED TO EDUCATE THE PUBLIC ABOUT THE ROLE AND VALUE OF THE UNITED NATIONS IN AN INTERDEPENDENT WORLD. IN THESE EFFORTS, WE ENDEAVOR TO ENCOURAGE A COOPERATIVE RELATIONSHIP BETWEEN THE UNITED NATIONS AND U.S. GOVERNMENT. THESE EFFORTS PROMOTE PAYMENT OF U.S. DUES TO THE UNITED NATIONS ON TIME, IN FULL AND WITHOUT CONDITIONS. EXPENSES: $94,942 GRANTS: $158,319 REVENUE: $0 PEACE, SECURITY & HUMAN RIGHTS: THE UNITED NATIONS FOUNDATION'S PEACE, SECURITY AND HUMAN RIGHTS PROGRAM PROMOTES PREVENTIVE ENGAGEMENT IN THREE AREAS: SECURITY, WELL-BEING AND JUSTICE. EXPENSES: $0 GRANTS: $0 REVENUE: $0
FORM 990, PART VI, LINE 2	LAURA TURNER SEYDEL IS THE DAUGHTER OF R. E. TURNER AND SPOUSE OF RUTHERFORD SEYDEL. R. E. TURNER IS FATHER OF LAURA TURNER SEYDEL AND FATHER-IN-LAW OF RUTHERFORD SEYDEL. RUTHERFORD SEYDEL IS SPOUSE TO LAURA TURNER SEYDEL AND SON-IN-LAW TO R. E. TURNER.
FORM 990, PART VI, LINE 11B:	THE DRAFT FORM IS REVIEWED BY THE CHIEF FINANCIAL OFFICER, THE ORGANIZATION'S LEGAL COUNSEL, AND THE BOARD OF DIRECTORS. THE DRAFT IS THEN FINALIZED, INCORPORATING ANY CHANGES OR COMMENTS, AND THE FINAL APPROVED VERSION IS FILED WITH THE IRS AND POSTED ON OUR WEBSITE.
FORM 990, PART VI, LINE 12C:	OFFICERS, DIRECTORS OR TRUSTEES, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE IN WRITING INTERESTS THAT COULD GIVE RISE TO CONFLICTS ANNUALLY OR WHEN CIRCUMSTANCES CHANGE. THESE CIRCUMSTANCES ARE REVIEWED BY MANAGEMENT ON AN ON-GOING BASIS IN THE COURSE OF OUR DAY-TO-DAY OPERATIONS. WHEN A CONFLICT OF INTEREST ARISES, RECUSAL FROM THE DECISIONS AND DELIBERATION IS REQUIRED. THERE WERE NO SUCH CIRCUMSTANCES IN THE PERIOD COVERED BY THIS REPORT.
FORM 990, PART VI, LINES 15A & 15B:	ANY CHANGES TO THE PRESIDENT'S COMPENSATION REQUIRE BOARD APPROVAL. THE BOARD REVIEWS THE PRESIDENT'S COMPENSATION ANNUALLY AND IT WAS LAST UNDERTAKEN IN NOVEMBER 2019. COMPARABLE DATA FROM PEER ORGANIZATIONS IS USED IN DETERMINING THE PRESIDENT'S COMPENSATION. ANY CHANGES TO THE PRESIDENT'S COMPENSATION ARE DOCUMENTED BY THE ORGANIZATION. THERE ARE NO KEY EMPLOYEES LISTED, ONLY OFFICERS. FOR OFFICERS, COMPENSATION IS DETERMINED BASED ON QUALIFICATIONS, DUTIES AND SALARIES PAID BY PEER ORGANIZATIONS.
FORM 990, PART VI, LINE 19:	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL STATEMENTS AND FORM 990S ARE AVAILABLE ON OUR WEBSITE.
FORM 990, PART IX, LINE 9:	OTHER CHANGES IN NET ASSETS: UR FOREIGN EXCHANGE GAIN: 1,148,175 ---------- $1,148,175

Additional Data

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

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2020

Open to Public Inspection

Name of the organization
UNITED NATIONS FOUNDATION INC

Employer identification number
58-2368165

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1)BETTER WORLD FUND 1750 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20006 58-2366765	SUPPORT OF UN	GA	501(C)(3)	7	UNF	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

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

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o	Yes	
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BETTER WORLD FUND	B	3,108,000	GAAP
(2) BETTER WORLD FUND	Q	1,075,085	GAAP

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation

Additional Data

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