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
NIA TERO FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 501 E PINE ST NO 300 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code
SEATTLE, WA 98122

D Employer identification number
82-1949563

E Telephone number
(206) 339-1293

G Gross receipts $ 4,303,474

F Name and address of principal officer:
PETER SELIGMANN
501 E PINE ST NO 300
SEATTLE,WA 98122

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.NIATERO.ORG

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

L Year of formation: 2017 **M** State of legal domicile: DE

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO SECURE INDIGENOUS GUARDIANSHIP OF VITAL ECOSYSTEMS.

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	10
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	26
6	Total number of volunteers (estimate if necessary)	6	12
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,677,148	3,408,997
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	615,298	893,978
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	499
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,292,446	4,303,474
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	8,050,349	9,142,508
	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)	3,329,831	4,447,433
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,743,936	3,926,783
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	16,124,116	17,516,724
	19	Revenue less expenses. Subtract line 18 from line 12	-12,831,670	-13,213,250

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	139,867,198	126,478,550
	21	Total liabilities (Part X, line 26)	4,697,559	4,186,253
	22	Net assets or fund balances. Subtract line 21 from line 20	135,169,639	122,292,297

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 2021-10-19

▶ LEIGH MORGAN CHIEF STRATEGY & OP. OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P00288314
Firm's name ▶ GELMAN ROSENBERG & FREEDMAN			Firm's EIN ▶ 52-1392008	
Firm's address ▶ 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 208142930			Phone no. (301) 951-9090	

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:

NIA TERO WORKS ALONGSIDE INDIGENOUS PEOPLES TO SECURE THEIR GUARDIANSHIP OF VITAL ECOSYSTEMS. INDIGENOUS PEOPLES ARE GUARDIANS OF EARTH.(SEE SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ 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 $ 8,369,174 including grants of $ 6,720,608) (Revenue $)

UPHOLD: PLACE-ANCHORED PARTNERSHIP WITH INDIGENOUS PEOPLES:NIA TERO IS COMMITTED TO WORKING ALONGSIDE INDIGENOUS PEOPLES IN GEOGRAPHIES CENTRAL TO THE WELL-BEING OF ALL HUMANITY. OUR INITIAL REGIONS INCLUDE THE PACIFIC ISLANDS, AMAZONIA, AND THE BOREAL FORESTS OF CANADA, WHERE WE WORK WITH INDIGENOUS PEOPLES WHO SHARE A COLLECTIVE TERRITORY AND HAVE STRONG GOVERNANCE SYSTEMS IN PLACE TO PROTECT THEIR HOMELANDS AND WATERS. IN ADDITION TO OUR GROWING NETWORK OF PARTNERS IN REGIONS, WE ALSO ARE PARTNERING ON AN INITIATIVE CALLED THE WAYFINDERS CIRCLE, A FELLOWSHIP OF 12 INITIAL MEMBERS FROM ACROSS SEVEN SOCIO-CULTURAL REGIONS WITH A WILLINGNESS AND CAPACITY TO SHARE THEIR VISION AND EXPERIENCES TO INSPIRE ALL PEOPLE TO RE-IMAGINE DEVELOPMENT, CONSERVATION, AND THE WAY WE RELATE TO EACH OTHER AND EARTH. (SCHED. O) IN TOTAL, OUR PLACE-ANCHORED PARTNERSHIPS SUPPORT INDIGENOUS PEOPLES WHO ARE GUARDIANS OF OVER 100 MILLION HECTARES OF TERRITORY.

4b (Code:) (Expenses $ 3,800,570 including grants of $ 2,421,900) (Revenue $)

EXPAND: AMPLIFICATION AND SCALING:IN ORDER TO EXPAND RECOGNITION AND SUPPORT FOR INDIGENOUS GUARDIANSHIP WORLDWIDE, NIA TERO IS PURSUING THREE ONGOING BODIES OF WORK THAT INTEGRATE BOTH OUR PLACE-ANCHORED PARTNERSHIPS AS WELL INDIGENOUS PEOPLES, AS WELL AS ALIGNED ORGANIZATIONS, NETWORKS AND INITIATIVES, OUTSIDE OF THOSE PARTNERSHIPS. FIRST, THROUGH GRANTMAKING, CONVENING AND DIRECT TECHNICAL SUPPORT TO INDIGENOUS PEOPLES AND THEIR CHOSEN ALLIES, WE PROVIDE SUPPORT TO STRENGTHEN POLICY FRAMEWORKS, SECURITY AND SELF-GOVERNANCE OF INDIGENOUS PEOPLES. SECOND, THROUGH STRATEGIC CONVENING AND FACILITATION, AS WELL AS TARGETED GRANTMAKING AND FUNDRAISING, WE ARE WORKING TO INCREASE DIRECT FINANCING FOR INDIGENOUS GUARDIANSHIP. (SEE SCHEDULE O) AND LASTLY, THROUGH COMPELLING STORYTELLING AND COMMUNICATIONS, WE SUPPORT THE ELEVATION OF VOICE, WAYS AND MEANS OF INDIGENOUS PEOPLES TO INCREASE AWARENESS OF INDIGENOUS GUARDIANSHIP AND INSPIRE CHANGE.

4c (Code:) (Expenses $ 639,904 including grants of $) (Revenue $)

SCIENCE & LEARNING:NIA TERO IS COMMITTED TO GATHERING KNOWLEDGE THAT CAN ENABLE MEASUREMENT OF THE IMPACT OF OUR PARTNERSHIPS THROUGH BOTH STANDARD SOCIAL AND ECOLOGICAL INDICATORS AS WELL AS INDICATORS OF WELL-BEING DEFINED BY OUR INDIGENOUS PARTNERS THEMSELVES. THIS INCLUDES DEVELOPING SYSTEMS THAT COMBINE TRADITIONAL ENVIRONMENTAL METRICS WITH BIOCULTURAL METRICS THAT ARE DEFINED AND MEASURED BY OUR INDIGENOUS PARTNERS.

(Code:) (Expenses $ 1,922,351 including grants of $) (Revenue $)

OTHER PROGRAM SERVICES: ALL OF NIA TERO'S WORK IS DONE THROUGH AND WITH OTHERS, FROM THE INDIGENOUS PEOPLES WHO INSPIRE AND LEAD US, TO OUR FOUNDING PARTNERS AND LIKE-MINDED INSTITUTIONS. NIA TERO HAS BEEN WORKING WITH REGIONAL AND GLOBAL ADVISORS, PLACE-ANCHORED PARTNERS, AND LIKE-MINDED INSTITUTIONS TO DESIGN AND DEVELOP STRATEGIES THAT WILL HELP US ACHIEVE OUR MISSION.

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

(Expenses $ 1,922,351 including grants of $) (Revenue $)

4e **Total program service expenses ▶** 14,731,999

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		No
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	Yes	
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		No
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	Yes	
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		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		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	71			
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**	26			
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**		No
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**		
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**		No
b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
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**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
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? If "Yes," see instructions and file Form 4720, Schedule N.			**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** 10			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**	Yes	
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**	Yes	
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**	Yes	
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▶ CA,HI,NJ,NY

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:

▶JESSICA SCHROEDER 501 E PINE ST NO 300 SEATTLE, WA 98122 (206) 339-1293

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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) PETER SELIGMANN CHIEF EXECUTIVE OFFICER	40.00	X		X				550,000	0	46,849
(2) VICTORIA TAULI CORPUZ CHAIR	2.00	X		X				0	0	0
(3) PAUL KLINGENSTEIN VICE-CHAIR	2.00	X		X				0	0	0
(4) MANDY BAYHA DIRECTOR (START 05/2020)	1.00	X						0	0	0
(5) MICHAEL CROW DIRECTOR (START 05/2020)	1.00	X						0	0	0
(6) LAURENE POWELL JOBS DIRECTOR	1.00	X						0	0	0
(7) MYRNA CUNNINGHAM KAIN DIRECTOR	1.00	X						0	0	0
(8) JENNIFER MORRIS DIRECTOR (UNTIL 04/2020)	1.00	X						0	0	0
(9) NEMONTE NENQUIMO DIRECTOR (START 05/2020)	1.00	X						0	0	0
(10) BRENDA PIPESTEM DIRECTOR (START 05/2020)	1.00	X						0	0	0
(11) KEVIN STARR DIRECTOR	1.00	X						0	0	0
(12) LEIGH MORGAN CHIEF STRATEGY AND OPERATING OFFICER	40.00			X				360,294	0	40,941
(13) CHRISTOPHER FILARDI CHIEF PROGRAM OFFICER	40.00			X				306,964	0	49,525
(14) TRACY RECTOR MANAGING DIRECTOR, STORYTELLING	40.00					X		213,720	0	46,207
(15) MARGARITA MORA TERAN MANAGING DIRECTOR, PARTNERSHIPS	40.00					X		218,519	0	37,675
(16) MARC BALLANDRAS DIRECTOR OF INFRASTRUCTURE	40.00					X		202,061	0	42,724
(17) JESSICA SCHROEDER DIRECTOR OF OPERATIONS	40.00					X		185,243	0	35,215

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) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
(18) DAVID ROTHSCHILD SENIOR PARTNERSHIP LEAD	40.00					X		191,141	0	28,497

	(D)	(E)	(F)
1b Sub-Total . . . . ▶			
c Total from continuation sheets to Part VII, Section A . . . . ▶			
d Total (add lines 1b and 1c) . . . . ▶	2,227,942	0	327,633

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 ▶ 14

			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
CONSERVATION METRICS 145 MCALLISTER WAY SANTA CRUZ, CA 95060	BIOCULTURAL MONITORING CONSULTING	376,874
SIX SEASONS 11B MADELEY STREET OCEAN GROVE, VICTORIA AS	STRATEGIC SUPPORT SERVICES	225,600
ERJEN KHAMAGANOVA ULAANBAATAR MONGOLIA BAYAN ZURH DUUREG 2-13 MG	INDIGENOUS WAY & KNOWING SUPPORT SVCS	125,438
CATHERINE SPARKS PO BOX 1189 PORT VILA NH	SUPPORT SERVICES	125,438
TAHOLO KAMI PO BOX 197415 SUVA FJ	SUPPORT SERVICES	103,800

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 ▶ 5

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts					
1a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c				
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f 3,408,997				
g Noncash contributions included in lines 1a - 1f:$	1g				
h **Total.** Add lines 1a-1f ▶		3,408,997			
Program Service Revenue	Business Code				
2a					
b					
c					
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f.					
Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts) ▶		893,978			893,978
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties ▶					
	(i) Real / (ii) Personal				
6a Gross rents	6a				
b Less: rental expenses	6b				
c Rental income or (loss)	6c				
d Net rental income or (loss) ▶					
	(i) Securities / (ii) Other				
7a Gross amount from sales of assets other than inventory	7a				
b Less: cost or other basis and sales expenses	7b				
c Gain or (loss)	7c				
d Net gain or (loss) ▶					
8a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c). See Part IV, line 18	8a				
b Less: direct expenses	8b				
c Net income or (loss) from fundraising events ▶					
9a Gross income from gaming activities. See Part IV, line 19	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities ▶					
10a Gross sales of inventory, less returns and allowances	10a				
b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory ▶					
Miscellaneous Revenue	Business Code				
11a MISCELLANEOUS	900099	499			499
b					
c					
d All other revenue					
e **Total.** Add lines 11a–11d ▶		499			
12 **Total revenue.** See instructions ▶		4,303,474	0	0	894,477

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	3,788,543	3,788,543		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	121,250	121,250		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	5,232,715	5,232,715		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,354,573	356,489	998,084	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,524,919	1,743,129	781,790	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	103,321	64,743	38,578	
9 Other employee benefits	252,447	155,860	96,587	
10 Payroll taxes	212,173	116,236	95,937	
11 Fees for services (non-employees):				
a Management				
b Legal	77,114	49,073	28,041	
c Accounting	32,764		32,764	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	83,419		83,419	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,659,573	2,333,298	326,275	
12 Advertising and promotion				
13 Office expenses	32,089	9,392	22,697	
14 Information technology	1,320		1,320	
15 Royalties . .				
16 Occupancy	202,110	107,224	94,886	
17 Travel	206,830	176,306	30,524	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	311,521	303,544	7,977	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization . .	85,805	48,565	37,240	
23 Insurance . . .	85,262	53,164	32,098	
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 EQUIPMENT AND SOFTWARE	120,904	55,931	64,973	
b SUBS. & PUB'L	21,479	14,224	7,255	
c MISCELLANEOUS	3,633	419	3,214	
d LICENSES, FEES & TAXES	2,960	1,894	1,066	
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	17,516,724	14,731,999	2,784,725	0
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	35,449,858	1	17,287,759
	2	Savings and temporary cash investments	17,251,132	2	5,378,955
	3	Pledges and grants receivable, net	86,666,588	3	60,365,785
	4	Accounts receivable, net	52,667	4	20,140
	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		5	
	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)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	139,871	9	109,015
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 428,892			
	b	Less: accumulated depreciation — 10b: 200,825	295,622	10c	228,067
	11	Investments—publicly traded securities		11	42,901,882
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	11,460	15	186,947
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	139,867,198	16	126,478,550
Liabilities	17	Accounts payable and accrued expenses	966,827	17	970,465
	18	Grants payable	3,730,732	18	3,215,788
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	**Total liabilities.** Add lines 17 through 25	4,697,559	26	4,186,253
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	48,403,051	27	61,676,512
	28	Net assets with donor restrictions	86,766,588	28	60,615,785
		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	135,169,639	32	122,292,297
	33	Total liabilities and net assets/fund balances	139,867,198	33	126,478,550

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	4,303,474
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,516,724
3	Revenue less expenses. Subtract line 2 from line 1	3	-13,213,250
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	135,169,639
5	Net unrealized gains (losses) on investments	5	335,908
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	122,292,297

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
NIA TERO FOUNDATION

Employer identification number
82-1949563

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?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
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.") . .		5,000,000	150,599,440	2,677,148	3,408,997	161,685,585
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 **Total.** Add lines 1 through 3		5,000,000	150,599,440	2,677,148	3,408,997	161,685,585
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). .						55,052,719
6 **Public support.** Subtract line 5 from line 4.						106,632,866

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. .		5,000,000	150,599,440	2,677,148	3,408,997	161,685,585
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .		9,925	248,914	615,298	893,978	1,768,115
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .			-952		499	-453
11 **Total support.** Add lines 7 through 10						163,453,247

12 Gross receipts from related activities, etc. (see instructions) . . . . | 12 |

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 |

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

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	**Employer identification number**
NIA TERO FOUNDATION	82-1949563

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
NIA TERO FOUNDATION

Employer identification number
82-1949563

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

(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.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
NIA TERO FOUNDATION	82-1949563

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
NIA TERO FOUNDATION

Employer identification number
82-1949563

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
NIA TERO FOUNDATION

Employer identification number
82-1949563

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
d ☐ Loan or exchange programs
b ☐ Scholarly research
e ☐ Other ....
c ☐ Preservation for future generations

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		373,514	186,750	186,764
d Equipment		9,878	4,950	4,928
e Other		45,500	9,125	36,375
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				228,067

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		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, 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	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 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	4,555,963
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	335,908		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	335,908
3	Subtract line **2e** from line **1**			3	4,220,055
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	83,419		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	83,419
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	4,303,474

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	17,433,305
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	0
3	Subtract line **2e** from line **1**			3	17,433,305
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	83,419		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	83,419
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	17,516,724

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
PART X, LINE 2:	FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019, THE FOUNDATION HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

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
NIA TERO FOUNDATION

Employer identification number
82-1949563

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)	CENTRAL AMERICA AND THE CARRIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		32,500
(2)	EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		1,569,034
(3)	EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		150,000
(4)	NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		402,200
(5)	SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		2,913,981
(6)	SUB SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		165,000
(7)	NORTH AMERICA	0	1	PROGRAM SERVICES	STRATEGIC SUPPORT ACROSS ALL REGIONS	7,000
(8)	EAST ASIA AND THE PACIFIC	0	16	PROGRAM SERVICES	STRATEGIC SUPPORT ACROSS ALL REGIONS	814,620
(9)	RUSSIA AND THE NEWLY INDEPENDENT STATES	0	1	PROGRAM SERVICES	STRATEGIC SUPPORT ACROSS ALL REGIONS	139,134
(10)	SOUTH AMERICA	0	7	PROGRAM SERVICES	STRATEGIC SUPPORT ACROSS ALL REGIONS	320,109
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total	0	17			6,054,335
b	Total from continuation sheets to Part I . . .	0	8			459,243
c	**Totals** (add lines 3a and 3b)	0	25			6,513,578

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)			CENTRAL AMERICA AND THE CARRIBBEAN	COVID RESPONSE	10,000	WIRE TRANSFER			
(2)			SOUTH AMERICA	SUPPORT OF INDIGENOUS SOLAR USE	305,000	WIRE TRANSFER			
(3)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS CONVENING	80,000	WIRE TRANSFER			
(4)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS DECRIMINLIZATION	300,000	WIRE TRANSFER			
(5)			EAST ASIA AND THE PACIFIC	COVID RESPONSE	10,000	WIRE TRANSFER			
(6)			EAST ASIA AND THE PACIFIC	SUPPORT VIDEO SERIES IN INDIGENOUS MUSIC PRACTICES	10,000	WIRE TRANSFER			
(7)			EUROPE	SUPPORT INDIGENOUS FORUM	150,000	WIRE TRANSFER			
(8)			NORTH AMERICA	SUPPORT INDIGENOUS DOCUMENTARY FILM	25,000	WIRE TRANSFER			
(9)			NORTH AMERICA	SUPPORT INDIGENOUS EXHIBITIONS	25,000	WIRE TRANSFER			
(10)			NORTH AMERICA	SUPPORT INDIGENOUS IMPACT CAPACTIY	250,000	WIRE TRANSFER			
(11)			SUB SAHARAN AFRICA	COVID RESPONSE	10,000	WIRE TRANSFER			
(12)			SUB SAHARAN AFRICA	COVID RESPONSE	10,000	WIRE TRANSFER			
(13)			SUB SAHARAN AFRICA	INDIGENOUS COMMUNITY SUPPORT TO SUSTAIN THEIR CULTURE AND LIVLIHOOD	10,000	WIRE TRANSFER			
(14)			SUB SAHARAN AFRICA	SUPPORT DEVELOPMENT ON DETAILED CURRICULUM FOR ONLINE COURSE FOR INDIGENOUS POLICY AND ADVOCACY	135,000	WIRE TRANSFER			
(15)			EAST ASIA AND THE PACIFIC	SUPPORT CONSERVATION OF SACRED LAND WITH INDIGENOUS LANDHOLDERS	200,000	WIRE TRANSFER			
(16)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS VOYAGING EDUCATION	20,000	WIRE TRANSFER			
(17)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS LEGAL PARTNERSHIP	200,000	WIRE TRANSFER			
(18)			EAST ASIA AND THE PACIFIC	COVID 19 RESPONSE	10,000	WIRE TRANSFER			
(19)			EAST ASIA AND THE PACIFIC	SUPPORT MAINTENACE WORK TO INDIGENOUS LODGE	191,926	WIRE TRANSFER			
(20)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS QUILT MAKING	14,625	WIRE TRANSFER			
(21)			EAST ASIA AND THE PACIFIC	SUPPORT ENVIRONMENTAL HEALTH AWARNESS TO INDIGENOUT COMMUNITIES	168,000	WIRE TRANSFER			
(22)			EAST ASIA AND THE PACIFIC	COVID RESPONSE	10,000	WIRE TRANSFER			
(23)			EAST ASIA AND THE PACIFIC	COVID RESPONSE	5,500	WIRE TRANSFER			
(24)			EAST ASIA AND THE PACIFIC	SUPPORT STRENGTHENING INDIGENOUS GUARDIANSHIP	75,000	WIRE TRANSFER			
(25)			EAST ASIA AND THE PACIFIC	COVID RESPONSE	9,950	WIRE TRANSFER			
(26)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS RIVER GUARDIANSHIP	30,000	WIRE TRANSFER			
(27)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS CULTURAL FESTIVAL	40,000	WIRE TRANSFER			
(28)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS SOMMUNICATIONS CAPACITY	8,000	WIRE TRANSFER			
(29)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS FORUM	25,000	WIRE TRANSFER			
(30)			SOUTH AMERICA	SUPPORT ESTABLISHMENT OF INDIGENOUS DISTRICT COUNCILS	30,000	WIRE TRANSFER			
(31)			SOUTH AMERICA	SUPPORT POLICY APPRENTICESHIP PROGRAM	40,000	WIRE TRANSFER			
(32)			SOUTH AMERICA	SUPPORT TELECOMMUNICATIONS FOR INDIGENOUS COMMUNITY	100,000	WIRE TRANSFER			
(33)			SOUTH AMERICA	STRENGTHENING NETWORKS FOR THE DEFENSE OF THE RIGHTS OF INDIGENOUS PEOPLES	140,621	WIRE TRANSFER			
(34)			SOUTH AMERICA	COVID RESPONSE	31,624	WIRE TRANSFER			
(35)			SOUTH AMERICA	SUPPORT COMMUNICATION STRATEGY RESEARCH TO UNDERSTAND PUBLIC RESPONSE TO ISSUES AFFECTING INDIGENOUS PEOPLES	20,000	WIRE TRANSFER			
(36)			SOUTH AMERICA	STRENGTHENING NETWORKS FOR THE DEFENSE OF THE RIGHTS OF INDIGENOUS PEOPLES	130,000	WIRE TRANSFER			
(37)			SOUTH AMERICA	SUPPORT INDIGENOUS SORT FILM	36,171	WIRE TRANSFER			
(38)			SOUTH AMERICA	COVID RESPONSE	17,567	WIRE TRANSFER			
(39)			SOUTH AMERICA	SUPPORT SUSTAINABILITY AND SAFETY OF INDIGENOUS PEOPLES	138,000	WIRE TRANSFER			
(40)			SOUTH AMERICA	SUPPORT PROTECTING RIGHTS OF INDIGENOUS PEOPLES	100,000	WIRE TRANSFER			
(41)			SOUTH AMERICA	COVID RESPONSE	30,000	WIRE TRANSFER			
(42)			SOUTH AMERICA-CHANGE	COVID RESPONSE	10,000	WIRE TRANSFER			
(43)			SOUTH AMERICA-CHANGE	SUPPORT STRATEGIC COMMUNICATION RESEARCH	23,110	WIRE TRANSFER			
(44)			SOUTH AMERICA	SUPPORT PROTECTION OF INDIGENOUS PEOPLES	102,911	WIRE TRANSFER			
(45)			SOUTH AMERICA	COVID RESPONSE	100,000	WIRE TRANSFER			
(46)			SOUTH AMERICA	COVID RESPONSE	10,000	WIRE TRANSFER			
(47)			SOUTH AMERICA	SUPPORT PROTECTION OF INDIGENOUS PEOPLES	100,000	WIRE TRANSFER			
(48)			SOUTH AMERICA	SUPPORT SEGMENTATION RESEARCH IN INDIGENOUS AREAS	29,022	WIRE TRANSFER			
(49)			SOUTH AMERICA	COVID RESPONSE	275,000	WIRE TRANSFER			
(50)			SOUTH AMERICA	SUPPORT INDIGENOUS EFFORTS TO PROTECT LAND	50,000	WIRE TRANSFER			
(51)			SOUTH AMERICA	COVID RESPONSE	100,000	WIRE TRANSFER			
(52)			SOUTH AMERICA	SUPPORT INFORMATION ACCESSS TO INDIGENOUS PEOPLE	7,800	WIRE TRANSFER			
(53)			SOUTH AMERICA	COVID RESPONSE	19,912	WIRE TRANSFER			
(54)			SOUTH AMERICA	SUPPORT PROTECTION OF INDIGENOUS PEOPLES	50,000	WIRE TRANSFER			
(55)			SOUTH AMERICA	SUPPORT PUBLICATION OF INDIGENOUS BOOK	8,000	WIRE TRANSFER			
(56)			SOUTH AMERICA	COVID RESPONSE	10,000	WIRE TRANSFER			
(57)			SOUTH AMERICA	COVID RESPONSE	61,000	WIRE TRANSFER			
(58)			SOUTH AMERICA	COVID RESPONSE	20,540	WIRE TRANSFER			
(59)			SOUTH AMERICA	SUPPORT ADVOCACY AND RECOGNITION OF INDIGENOUS RIGHTS	99,850	WIRE TRANSFER			
(60)			SOUTH AMERICA	SUPPORT POLICY APPRENTICESHIP PROGRAM	40,000	WIRE TRANSFER			
(61)			SOUTH AMERICA	SUPPORT INDIGENOUS CAPACITY BUILDING	155,559	WIRE TRANSFER			
(62)			SOUTH AMERICA	COVID RESPONSE	9,326	WIRE TRANSFER			
(63)			SOUTH AMERICA	COVID RESPONSE	9,968	WIRE TRANSFER			
(64)			SOUTH AMERICA	SUPPORT INDIGENOUS ENVIRONMENTAL PROTECTION	400,000	WIRE TRANSFER			
(65)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS COUNCIL	60,000	WIRE TRANSFER			
(66)			CENTRAL AMERICA AND THE CARRIBBEAN	HURRICANE SUPPORT IN INDIGENOUS AREAS	10,000	WIRE TRANSFER			
(67)			SOUTH AMERICA	SUPPORT INDIGENOUS PARTNERSHIP	75,000	WIRE TRANSFER			
(68)			CENTRAL AMERICA AND THE CARRIBBEAN	HURRICANE SUPPORT IN INDIGENOUS AREAS	10,000	WIRE TRANSFER			
(69)			EAST ASIA AND THE PACIFIC	SUPPORT INDIGENOUS SCHOOL	70,000	WIRE TRANSFER			
(70)			NORTH AMERICA	SUPPORT INDIGENOUS YOUTH AND CULTURE PROGRAMS	100,000	WIRE TRANSFER			

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 . . . . . . ▶ 70

3 Enter total number of other organizations or entities . . . . ▶ 0

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

	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)	FELLOWSHIP STIPEND	EAST ASIA AND THE PACIFIC	4	35,000	WIRE TRANSFER			
(2)	FELLOWSHIP STIPEND	SOUTH AMERICA	1	28,000	WIRE TRANSFER			
(3)	FELLOWSHIP STIPEND	NORTH AMERICA	5	2,200	WIRE TRANSFER			
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Part IV Foreign Forms

		Yes	No
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
PART I, LINE 2:	NIA TERO EMPLOYS A VARIETY OF TECHNIQUES TO MONITOR GRANT FUNDS. NIA TERO EVALUATES THE FINANCIAL AND PROGRAMMATIC CAPACITY OF ALL PROSPECTIVE GRANTEES THROUGH A RISK-BASED APPROACH THAT INCLUDES DEVELOPING AN UNDERSTANDING OF THE PROSPECTIVE GRANTEE, PRE-AWARD SITE VISITS AND RISK ASSESSMENT PROPOSALS AND BUDGETS ARE REVIEWED AND ANALYZED BY NIA TERO STAFF. MONITORING PROCEDURES ARE BASED UPON THE RISK ASSESSMENT OF THE PROSPECTIVE GRANTEE UPON AWARD, GRANTEES ARE MONITORED THROUGH REVIEW OF TECHNICAL AND FINANCIAL REPORTS SUBMITTED BY TRUSTEES, THROUGH ONLINE MEETINGS ON A REGULAR BASIS, AND THROUGH SITE VISITS TO OBSERVE TECHNICAL PROGRESS AND FINANCIAL COMPLIANCE.
PART III ACCOUNTING METHOD:	

Additional Data

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

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

Name of the organization
NIA TERO FOUNDATION

Employer identification number
82-1949563

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) AMERICANS FOR INDIAN OPPORTUNITY INC 1001 MARQUETTE AVE NW ALBUQUERQUE,NM 87102	52-0900964	501(C)(3)	10,000				INDIGENOUS SHORT FILM SUPPORT
(2) AMPLIFIER FOUNDATION 901 HIAWATHA PLACE S UNIT 100 SEATTLE,WA 98144	47-1612420	501(C)(3)	50,000				INDIGENOUS ART CAMPAIGN
(3) BIG SKY FILM INSTITUTE INC 216 W MAIN STREET STUDIO 7 MISSOULA,MT 59802	20-1937230	501(C)(3)	30,000				$5K FILM FESTIVAL SUPPORT/$25K INDIGENOUS SHORT FILM SUPPORT
(4) CASTLE LEGACY LLC 525 W TOWNVIEW CIRCLE MANSFIELD,OH 44907	83-4042353	OTHER	25,000				INDIGENOUS SUPPORT
(5) CENTER FOR INDEPENDENT DOCUMENTARY INC 1300 SOLDIERS FIELD ROAD 5 BOSTON,MA 02135	04-2738458	501(C)(3)	25,000				INDIGENOUS SUPPORT
(6) CHIEF SEATTLE CLUB 410-2ND AVE EXTENSION S SEATTLE,WA 98104	91-0852503	501(C)(3)	25,000				$5K INDIGENOUS EVENT SPONSORSHIP/ $20K COVID 19 RESPONSE
(7) DTWO LTD (DIGITAL DEMOCRACY) 3-4953 DESMOND STREET OAKLAND,CA 94618	26-3761772	501(C)(3)	20,000				INDIGENOUS SUPPORT
(8) EARTH ISLAND INSTITUTE INC 2150 ALLSTON WAY SUITE 460 BERKELEY,CA 94704	94-2889684	501(C)(3)	10,000				COVID-19 RESPONSE
(9) GARDEN RAISED BOUNTY 2016 ELLIOTT AVE NW OLYMPIA,WA 98502	91-1594312	501(C)(3)	10,000				INDIGENOUS SUPPORT
(10) GLOBAL GREENGRANTS FUND INC 2840 WILDRENESS PLACE SUITE A BOULDER,CO 80301	84-1612422	501(C)(3)	50,000				INDIGENOUS SUPPORT
(11) GRIST MAGAZINE INC 1201 WESTERN AVE SUITE 410 SEATTLE,WA 98101	06-1664153	501(C)(3)	25,000				INDIGENOUS SUPPORT
(12) HOLES IN THE WALL COLLECTIVE INC 495 E 7TH STREET APT 2C BROOKLYN,NY 11218	83-1062956	501(C)(3)	25,000				INDIGENOUS SHORT FILM SUPPORT
(13) IF NOT US THEN WHO 1112 MONTANA AVE SUITE 379 SANTA MONICA,CA 90403	81-4186787	501(C)(3)	10,000				INDIGENOUS PROGRAMMING SUPPORT
(14) INTERNEWS NETWORK 876 7TH STREET ARCATA,CA 05521	94-3027931	501(C)(3)	25,000				INDIGENOUS JOURNALISM SUPPORT
(15) MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVE CAMBRIDGE,MA 02138	04-2103594	501(C)(3)	20,000				INDIGENOUS GATHERING SUPPORT
(16) MUTUAL AID MEDIA LLC 3109 ESTARA AVE LOS ANGELES,CA 90065	47-4391149	OTHER	25,000				INDIGENOUS SHORT FILM SUPPORT
(17) NAAH ILLAHEE FUND 1620 18TH AVE SUITE 101 SAEATTLE,WA 98122	05-0630992	501(C)(3)	10,000				COVID-19 RESPONSE
(18) NEW VENTURE FUND 1201 CONNECTICUT AVE NW SUITE 300 WASHINGTON,DC 20036	20-5806345	501(C)(3)	25,000				INDIGENOUS EVENT SUPPORT
(19) NEW YORK WOMEN IN FILM & TELEVISION INC 1100 AVENUE OF THE AMERICAS NEW YORK,NY 10036	13-2983705	501(C)(3)	25,000				INDIGENOUS SHORT FILM SUPPORT
(20) NORTHWEST FILM FORUM 1515 12TH AVE SEATTLE,WA 98122	91-1702331	501(C)(3)	10,000				INDIGENOUS EVENT SUPPORT
(21) OPEN ARMS PERINATAL SERVICES 2524 16TH AVE S 207 SEATTLE,WA 98144	91-1868021	501(C)(3)	10,000				COVID-19 RESPONSE
(22) PHOTOGRAPHERS WITHOUT BORDERS INC 3023 S DAKOTA STREET SEATTLE,WA 98108	20-5480911	501(C)(3)	10,000				INDIGENOUS ART SUPPORT
(23) REDFORD CENTER INC 1016 LINCOLN BLVD SUITE 322 SAN FRANCISCO,CA 94129	46-4549706	501(C)(3)	35,793				COVID-19 RESPONSE
(24) SEATTLE INDIAN HEALTH BOARD 611 12TH AVE S SEATTLE,WA 98444	91-0869056	501(C)(3)	20,000				JOURNALISM SUPPORT
(25) SOUTH SEATTLE EMERALD PO BOX 28505 SEATTLE,WA 98118	47-3677408	501(C)(3)	25,000				COVID-19 RESPONSE
(26) SPIRET FOUNDATION 1753 W WIESBROOK ROAD WHEATON,IL 60189	36-4311514	501(C)(3)	10,000				INDIGENOUS SHORT FILM SUPPORT
(27) THE ALLIANCE FOR MEDIA ARTS - CULTURE INC 1919 SOUTH SYRINGA ROAD SPOKANE,WA 99203	13-3044606	501(C)(3)	25,000				COVID-19 RESPONSE
(28) UNITED INDIANS OF ALL TRIBES FOUNDATION PO BOX 99100 SEATTLE,WA 98139	91-0889016	501(C)(3)	10,000				INDIGENOUS YOUTH TECHNOLOGY SUPPORT
(29) URBAN AMERICAN INDIAN ALASKA NATIVE EDUCATION ALLIANCE 12353 8TH AVE NE SEATTLE,WA 98125	27-4272577	501(C)(3)	10,000				SUPPORT
(30) CONSERVATION INTERNATIONAL 2011 CRYSTAL DRIVE SUITE 600 ARLINGTON,VA 22202	52-1497470	501(C)(3)	1,000,000				SUPPORT
(31) IDENTITY INC 801 W FIREWEED LANE SUITE 103 ANCHORAGE,AK 99503	92-0091087	501(C)(3)	75,000				SUPPORT
(32) RUDOLPH STEINER FOUNDATION 241 HUNGRY HOLLOW RD SPRING VALLEY,NY 10977	13-3531581	501(C)(3)	1,610,250				SUPPORT
(33) PACIFIC RESOURCES FOR EDUCATION AND LEARNING 119 MERCHANT STREET HONOLULU,HI 96813	99-0279789	501(C)(3)	100,000				SUPPORT
(34) AMAZON FRONTLINES 425 BUSH ST SUITE 300 SAN FRANCISCO,CA 94108	47-5221013	501(C)(3)	32,500				SUPPORT
(35) EXPEDICIONARIOS DA SAUDE INC 6106 PARADISE POINT DRIVE PALMETTO BAY,FL 33157	47-1861209	501(C)(3)	290,000				SUPPORT
(36) LAND IS LIFE 185 WYTHE AVE 2ND FLOOR BROOKLYN,NY 11249	22-3101280	501(C)(3)	50,000				SUPPORT
(37) RAINFOREST FOUNDATION 100 DEAN STREET SUITE 40 BROOKLYN,NY 11238	95-1622945	501(C)(3)	10,000				SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 35

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 2

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) FELLOWSHIP STIPEND	30	121,250			
(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
PART I, LINE 2:	NIA TERO EMPLOYS A VARIETY OF TECHNIQUES TO MONITOR GRANT FUNDS. NIA TERO EVALUATES THE FINANCIAL AND PROGRAMMATIC CAPACITY OF ALL PROSPECTIVE GRANTEES THROUGH A RISK-BASED APPROACH THAT INCLUDES DEVELOPING AN UNDERSTANDING OF THE PROSPECTIVE GRANTEE, PRE-AWARD SITE VISITS AND RISK ASSESSMENT PROPOSALS AND BUDGETS ARE REVIEWED AND ANALYZED BY NIA TERO STAFF. MONITORING PROCEDURES ARE BASED UPON THE RISK ASSESSMENT OF THE PROSPECTIVE GRANTEE UPON AWARD, GRANTEES ARE MONITORED THROUGH REVIEW OF TECHNICAL AND FINANCIAL REPORTS SUBMITTED BY TRUSTEES, THROUGH ONLINE MEETINGS ON A REGULAR BASIS, AND THROUGH SITE VISITS TO OBSERVE TECHNICAL PROGRESS AND FINANCIAL COMPLIANCE.

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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
NIA TERO FOUNDATION

Employer identification number
82-1949563

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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ 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	Yes	
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	Yes	
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 ☐ Independent compensation consultant ☑ Form 990 of other organizations ☐ Written employment contract ☑ Compensation survey or study ☑ 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? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		No
	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? . . . . If "Yes," on line 5a or 5b, describe in Part III.	5b		No
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? . . . . If "Yes," on line 6a or 6b, describe in Part III.	6b		No
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	Yes	
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				
1 PETER SELIGMANN CHIEF EXECUTIVE OFFICER	(i)	550,000	0	0	17,100	29,749	596,849	0
	(ii)	0	0	0	0	0	0	0
2 LEIGH MORGAN CHIEF STRATEGY AND OPERATING OFFICER	(i)	339,900	20,394	0	11,872	29,069	401,235	0
	(ii)	0	0	0	0	0	0	0
3 CHRISTOPHER FILARDI CHIEF PROGRAM OFFICER	(i)	289,351	17,613	0	17,100	32,425	356,489	0
	(ii)	0	0	0	0	0	0	0
4 TRACY RECTOR MANAGING DIRECTOR, STORYTELLING	(i)	199,510	14,210	0	6,513	39,694	259,927	0
	(ii)	0	0	0	0	0	0	0
5 MARGARITA MORA TERAN MANAGING DIRECTOR, PARTNERSHIPS	(i)	204,099	14,420	0	8,340	29,335	256,194	0
	(ii)	0	0	0	0	0	0	0
6 MARC BALLANDRAS DIRECTOR OF INFRASTRUCTURE	(i)	166,697	9,900	25,464	6,988	35,736	244,785	0
	(ii)	0	0	0	0	0	0	0
7 JESSICA SCHROEDER DIRECTOR OF OPERATIONS	(i)	172,986	12,257	0	11,196	24,019	220,458	0
	(ii)	0	0	0	0	0	0	0
8 DAVID ROTHSCHILD SENIOR PARTNERSHIP LEAD	(i)	178,884	12,257	0	11,529	16,968	219,638	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
PART I, LINE 1A	IN REMOTE LOCATIONS WHERE COMMERICIAL SERVICE IS NOT AVAILABLE, NIA TERO WILL CHARTER PLANES/HELICOPTERS. OUR TEAM HAS THE OPTION OF FLYING BUSINESS/FIRST CLASS FOR FLIGHTS.
PART I, LINE 7	THE FOLLOWING INDIVIDUALS RECEIVED BONUSES ON PART VII: - LEIGH MORGAN $20,394 - CHRISTOPHER FILARDI $17,613 - TRACY RECTOR $14,210 - MARGARITA MORA TERAN $14,420 - MARC BALLANDRAS $9,900 - JESSICA SCHROEDER $12,257 - DAVID ROTHSCHILD $12,257 MARC BALLANDRAS ALSO RECIEVED $25,464 OF RELOCATION EXPENSES COVERED BY THE ORGANIZATION.

Additional Data

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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.	OMB No. 1545-0047 **2020** **Open to Public Inspection**

Name of the organization	Employer identification number
NIA TERO FOUNDATION	82-1949563

Return Reference	Explanation
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	THEIR TERRITORIES COVER AN AREA THE SIZE OF THE UNITED STATES, CANADA, AND RUSSIA COMBINED, AND ARE HOME TO 80% OF THE EARTH'S BIODIVERSITY AND NEARLY HALF OF ITS REMAINING INTACT ECOSYSTEMS. THEY MAINTAIN THE CULTURAL HERITAGE OF HUMANITY, COMMUNICATING IN 95% OF THE WORLD'S LANGUAGES. INDIGENOUS PEOPLES' INTRICATE KNOWLEDGE OF THEIR HOMELANDS HOLDS AN UNPARALLELED GUIDE FOR ALL OF HUMANITY. INCREASED CO2 EMISSIONS AND THE AGGRESSIVE EXPLOITATION OF LANDS, WATERS, AND OCEANS THREATEN ALL OF US. INDIGENOUS PEOPLES' WISDOM AND LEADERSHIP CAN GUIDE HUMANITY'S EFFORTS TO COEXIST WITH THE NATURAL WORLD. WHEN INDIGENOUS PEOPLES THRIVE, THE PLACES CRITICAL FOR HUMANITY THRIVE AS WELL. WE UNDERSTAND GUARDIANSHIP AS INDIGENOUS PEOPLES' RIGHT, CAPACITY, AND ACCEPTANCE OF RESPONSIBILITY TO SUSTAIN VITAL NATURAL SYSTEMS WITHIN THEIR COLLECTIVE TERRITORIES. THIS MISSION SUPPORTS OUR VISION OF AN EARTH WHERE INDIGENOUS PEOPLES DEFEND AND UPHOLD THE WORLD'S THRIVING FORESTS, OCEANS AND GRASSLANDS; WHERE THEIR WISDOM MAINTAINS VAST GEOGRAPHIES THAT UNDERPIN THE WELL-BEING OF ALL HUMANITY; AND WHERE RECOGNITION AND SUPPORT FOR INDIGENOUS IDENTITY EQUALS THAT OF NATION STATES AND OTHERS IN POWER. NIA TERO ACKNOWLEDGES THAT SOCIETIES GROUNDED IN THE CONCEPT OF RECIPROCITY AND INTERCONNECTION AMONG ALL BEINGS SHOW THE WAY TO A THRIVING PLANET. WITH THAT UNDERSTANDING, NIA TERO, ITS NETWORKS, ITS PARTNERS, AND ITS ALLIES ASPIRE TO EXPAND RECOGNITION OF, AND SUPPORT FOR, INDIGENOUS GUARDIANSHIP AS ESSENTIAL TO A VIBRANT FUTURE EARTH. OVER THE NEXT DECADE, NIA TERO'S STRATEGY IS FOCUSED ON TWO INTERRELATED ASPIRATIONS THAT CONTRIBUTE TO INDIGENOUS GUARDIANSHIP OF ANCESTRAL TERRITORY ENABLED EVERYWHERE POSSIBLE ON EARTH. NIA TERO IS WORKING TO UPHOLD A NETWORK OF PLACE-ANCHORED PARTNERSHIPS WITH INDIGENOUS PEOPLES IN KEY REGIONS WHO CARE FOR TERRITORIES WITH AN OUTSIZED IMPACT ON THE WELL-BEING OF HUMANITY AND EARTH. ALONGSIDE THIS, WE ARE ENGAGING PARTNERS WITHIN AND BEYOND THIS NETWORK TO EXPAND RECOGNITION AND SUPPORT FOR INDIGENOUS GUARDIANSHIP WORLDWIDE. ASPIRATION 1: UPHOLD A NETWORK OF PARTNERSHIPS WITH INDIGENOUS PEOPLES TO UPHOLD A NETWORK PLACE-ANCHORED PARTNERSHIPS IN KEY REGIONS, NIA TERO IS COMMITTED TO WORKING ALONGSIDE INDIGENOUS PEOPLES IN GEOGRAPHIES CENTRAL TO THE WELL-BEING OF ALL HUMANITY. OUR INITIAL REGIONS INCLUDE THE PACIFIC ISLANDS, AMAZONIA, AND THE BOREAL FORESTS OF CANADA, WHERE WE WORK WITH INDIGENOUS PEOPLES WHO SHARE A COLLECTIVE TERRITORY AND HAVE STRONG GOVERNANCE SYSTEMS IN PLACE TO PROTECT THEIR HOMELANDS AND WATERS. BY HEARING AND WORKING WITH INDIGENOUS LEADERS, WE ENSURE THEIR VISION GUIDES DEVELOPMENT OF SOUND LOCAL, NATIONAL AND GLOBAL POLICIES. NIA TERO'S CONTRIBUTION TO UPHOLDING THESE PARTNERSHIPS IS FOCUSED ON TWO GENERAL BODIES OF WORK. FIRST, WE PROVIDE SUPPORT TO INDIGENOUS PEOPLES EFFORTS TO SECURE GUARDIANSHIP OF TERRITORY THROUGH GRANT-MAKING, CONVENING, FACILITATION, FUNDRAISING AND DIRECT TECHNICAL SUPPORT TO ASSIST SELF-DETERMINED GOVERNANCE, CULTURAL VITALITY, DIRECT TERRITORIAL DEFENSE, LEGAL AND FINANCIAL REPRESENTATION, AND IN BUILDING STRONG ORGANIZATIONS. AND SECOND, WITH SIMILAR ISSUES AND NEEDS IN MIND, WE PROVIDE SUPPORT TO STRENGTHEN INDIGENOUS ORGANIZATIONS AND NETWORKS ACROSS REGIONS. IN ADDITION TO OUR GROWING NETWORK OF PARTNERS IN REGIONS, WE ALSO ARE PARTNERING ON AN INITIATIVE CALLED THE WAYFINDERS CIRCLE, A FELLOWSHIP OF 12 INITIAL MEMBERS FROM ACROSS SEVEN SOCIO-CULTURAL REGIONS WITH A WILLINGNESS AND CAPACITY TO SHARE THEIR VISION AND EXPERIENCES TO INSPIRE ALL PEOPLE TO RE-IMAGINE DEVELOPMENT, CONSERVATION AND THE WAY WE RELATE TO EACH OTHER AND EARTH. THE WAYFINDERS CIRCLE INCLUDES 12 INITIAL MEMBERS FROM ACROSS THE SEVEN SOCIAL-CULTURAL REGIONS OF EARTH DEFINED BY INDIGENOUS PEOPLES WITH PLANS TO GROW THE CIRCLE IN COMING YEARS. THE WAYFINDERS CIRCLE INITIATIVE IS A PART OF OUR NETWORK OF PARTNERSHIPS BUT ALSO DIRECTLY BRIDGES INTO OUR SECOND ASPIRATION FOR POSITIVE IMPACT AND CHANGE. ASPIRATION 2: EXPAND RECOGNITION AND SUPPORT FOR INDIGENOUS GUARDIANSHIP WORLDWIDE: TO ACHIEVE THIS ASPIRATION, NIA TERO IS PURSUING THREE ONGOING BODIES OF WORK THAT INTEGRATE BOTH OUR PLACE-ANCHORED PARTNERSHIPS AS WELL INDIGENOUS PEOPLES, AND ALIGNED ORGANIZATIONS, NETWORKS AND INITIATIVES, OUTSIDE OF THOSE PARTNERSHIPS. FIRST, THROUGH GRANTMAKING, CONVENING AND DIRECT TECHNICAL SUPPORT TO INDIGENOUS PEOPLES AND THEIR CHOSEN ALLIES, WE PROVIDE SUPPORT TO STRENGTHEN POLICY FRAMEWORKS, SECURITY AND SELF-GOVERNANCE OF INDIGENOUS PEOPLES. SECOND, THROUGH STRATEGIC CONVENING AND FACILITATION, AS WELL AS TARGETED GRANTMAKING AND FUNDRAISING, WE ARE WORKING TO INCREASE DIRECT FINANCING FOR INDIGENOUS GUARDIANSHIP. AND LASTLY, THROUGH COMPELLING STORYTELLING AND COMMUNICATIONS, WE SUPPORT THE ELEVATION OF VOICE, WAYS AND MEANS OF INDIGENOUS PEOPLES TO INCREASE AWARENESS OF INDIGENOUS GUARDIANSHIP AND INSPIRE CHANGE. THESE BODIES OF WORK MANIFEST ACROSS OUR GRANTMAKING, PROGRAMS AND CONVENINGS. TO SECURE AND AMPLIFY OUR PARTNERSHIPS, NIA TERO IS INVESTING IN KEY ACTIONS THAT SUPPORT GLOBAL POLICY ESSENTIAL TO THE SECURITY OF INDIGENOUS GUARDIANSHIP, CULTURAL CONTINUITY AND SPIRITUALITY AMONG OUR PARTNERS, ECOSYSTEM AND SOCIAL MONITORING SYSTEMS, AND MECHANISMS TO SECURE DURABLE SUPPORT FOR INDIGENOUS GUARDIANSHIP. OUR EFFORT HAS BEEN TO TRAIN INDIGENOUS NEGOTIATORS, TO GIVE THEM THE RESOURCES TO ATTEND KEY POLICY FORA AND TO CO-DESIGN WITH THESE INDIGENOUS PARTNERS, THE VISUALIZATION TOOLS NEEDED TO CONVINCE THE POLICY FRAMEWORKS TO ACKNOWLEDGE, ENGAGE, AND SUPPORT INDIGENOUS PARTNERS IN ADDRESSING BIODIVERSITY AND CLIMATE SOLUTIONS. ADDITIONALLY, NIA TERO SUPPORTS EFFORTS TO REDUCE AND END THE CRIMINALIZATION OF INDIGENOUS PEOPLES IN OUR THREE PRIORITY REGIONS. WE INVEST IN STORYTELLING TO AMPLIFY THE IMPORTANCE OF EQUITABLE PARTNERSHIP WITH INDIGENOUS PEOPLES AS A WAY OF ADDRESSING SOME OF THE GREAT SOCIO-ENVIRONMENTAL/CULTURAL CHALLENGES OF OUR TIME. IN 2019 WE ADVANCED THE DEVELOPMENT OF OUR STORYTELLING STRATEGY AND IDENTIFIED THREE PRIORITIES: 1. SUPPORTING INDIGENOUS STORYTELLERS 2. INVESTING IN PARTNERSHIPS THAT ELEVATE VISIBILITY OF INDIGENOUS STORIES AND STORYTELLERS IN OUR PLACE-BASED REGIONS AND GLOBALLY 3. INVESTING IN PLATFORMS TO ACCELERATE AND EASE ACCESS TO PRODUCTION FACILITIES FOR INDIGENOUS STORYTELLERS
FORM 990,	THE ORGANIZATION HAS ON CLASS OF MEMBERSHIP CALLED FOUNDING MEMBERS.

Return Reference	Explanation
PART VI, SECTION A, LINE 6	
FORM 990, PART VI, SECTION A, LINE 7A	FOUNDING MEMBERS HAVE THE POWER TO REMOVE AND/OR APPOINT THE PRESIDENT/CHIEF EXECUTIVE OFFICER AND ADDITIONAL FOUNDING MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7B	THE ORGANIZATION MUST ALSO RECEIVE THE APPROVAL OF MEMBERS FOR THE FOLLOWING: A. AMENDMENTS TO THE CERTIFICATE OF INCORPORATION; B. AMENDMENTS TO THE BYLAWS AFFECTING THE RIGHTS OF THE FOUNDING MEMBERS, INCLUDING BY DECREASING THE MINIMUM, OR INCREASING THE MAXIMUM, NUMBER OF DIRECTORS SERVING ON THE BOARD OF DIRECTORS, OR THE PURPOSES OF CORPORATION; C. MERGER OR CONSOLIDATION WITH ANOTHER ENTITY; D. SALE OF THE MAJORITY OF THE CORPORATION'S ASSETS; E. FORMATION OF A FOR-PROFIT AFFILIATE; F. CHANGE IN THE CORPORATION'S TAX-EXEMPT STATUS; AND G. DISSOLUTION.
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 WAS PREPARED BY OUTSIDE ACCOUNTANTS AND REVIEWED BY THE AUDIT COMMITTEE. A COMPLETE COPY OF THE RETURN WAS THEN PROVIDED TO THE BOARD PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS ANNUALLY REVIEWS CONFLICT OF INTEREST ISSUES AND SIGNS INDIVIDUAL CONFLICT OF INTEREST FORMS. IF THE BOARD OF DIRECTORS OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A COVERED PERSON HAS FAILED TO DISCLOSE A FINANCIAL INTEREST, IT INFORMS THE COVERED PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORDS THE COVERED PERSON AN OPPORTUNITY TO EXPLAIN THE FAILURE TO DISCLOSE. IF, AFTER HEARING THE RESPONSE OF THE COVERED PERSON AND, AFTER MAKING FURTHER INVESTIGATIONS AS IT CONCLUDES IS WARRANTED BY THE CIRCUMSTANCES, THE BOARD OF DIRECTORS OR COMMITTEE DETERMINES THE COVERED PERSON HAS FAILED TO DISCLOSE A FINANCIAL INTEREST, IT TAKES APPROPRIATE STEPS TO PROTECT THE CORPORATION, INCLUDING, BUT NOT LIMITED TO, REPAYMENT OF APPROPRIATE FUNDS TO THE CORPORATION BY THE COVERED PERSON.
FORM 990, PART VI, SECTION B, LINE 15A	AN INDEPENDENT COMPENSATION FIRM WAS HIRED TO REVIEW AND RESEARCH COMPARATIVE ORGANIZATIONS C-LEVEL COMPENSATION PACKAGES. THE RESEARCH WAS PRESENTED TO THE EXECUTIVE COMMITTEE. THE COMPENSATION REVIEW PROCESS WAS DISCUSSED AND DOCUMENTED. THE LAST REVIEW TOOK PLACE IN JULY 2020. THE CEO REVIEWS THE COMPENSATION PROCESS FOR OTHER OFFICERS.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART IX, LINE 11G	BRANDING AND COMMUNICATIONS: PROGRAM SERVICE EXPENSES 39,142. MANAGEMENT AND GENERAL EXPENSES 81,125. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 120,267. CONSULTING: PROGRAM SERVICE EXPENSES 1,675,718. MANAGEMENT AND GENERAL EXPENSES 30,580. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 1,706,298. TEMPORARY STAFF: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 54,627. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 54,627. COMPLANCE SERVICES: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 13,709. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 13,709. CONTRACT WORK: PROGRAM SERVICE EXPENSES 615,883. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 615,883. PAYROLL & RECRUITMENT SERVICES: PROGRAM SERVICE EXPENSES 2,555. MANAGEMENT AND GENERAL EXPENSES 146,234. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 148,789.

Additional Data

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