Form **990** 

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**Open to Public** 

Department of the Treasury Internal Revenue Service

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

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

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

Inspection

A	For the 2	019 calend	dar year, or tax year beginning	07/01	, 2019, and en	ding	06/3	0	, 20	20
В	Check if ap	oplicable:	C Name of organization UNITED S	STATES FUND FOR	UNICEF			D Employ	yer identifi	ication number
	Address ch	nange	Doing business as UNICEF US	A					13-1760	)110
	Name char	nge	Number and street (or P.O. box if	mail is not delivered to s	street address)	Roon	n/suite	E Telepho	one numbe	r
	Initial retur	n	125 Maiden Lane 10th Floor						212-686-	-5522
$\overline{\Box}$	Final return	/terminated	City or town, state or province, co	untry, and ZIP or foreign	postal code					
	Amended i	return	New York, NY, 10038					<b>G</b> Gross r	receipts \$	575,517,240
	Application	n pending	F Name and address of principal offi	cer: Brett D Robinso	on		H(a) Is this a gro	up return for	subordinates'	? Yes V No
			125 MAIDEN LANE 10TH FLO	OR, NEW YORK, NY	10038		H(b) Are all su	bordinate	s included?	? 🗌 Yes 🔲 No
<u> </u>	Tax-exemp	ot status:	✓ 501(c)(3)	) ◀ (insert no.)	4947(a)(1) or 52	27	If "No," attach	a list. (se	e instructio	ns)
J	Website:	www.ur	nicefusa.org				H(c) Group ex	emption n	number <b>&gt;</b>	
K	Form of org	ganization: 🔽	Corporation Trust Associat	tion ☐ Other ►	L Year of fo	rmation	: 1947	M State o	of legal dom	nicile: NY
Р	art I	Summa	ry				•			
	1 E	Briefly des	cribe the organization's missi	on or most significa	ant activities: The	organ	ization's mis	sion is t	o suppor	t programs
e S			ndraising, advocacy and educa							
Governance			on Schedule O, Statement 2)							
er			box ► ☐ if the organization	discontinued its op	erations or dispos	sed of	more than 2	25% of i	ts net as	sets.
9	3 1	lumber of	voting members of the gover	rning body (Part VI,	line 1a)			3		26
ૐ	4 1	lumber of	independent voting members	s of the governing I	body (Part VI, line	1b)		4		25
ies	5 T	otal numb	per of individuals employed in	ı calendar year 201	9 (Part V, line 2a)			5		379
Activities &	6 T	otal numb	per of volunteers (estimate if r	necessary)				6		74,000
Ac			ated business revenue from F					7a		0
	b N	let unrelat	ed business taxable income	from Form 990-T, I	ine 39			7b		0
							Prior Year		Curi	rent Year
a)	8 0	Contributio	ons and grants (Part VIII, line <sup>-</sup>	535,7	76,656		571,213,232			
Revenue	9 F	rogram se	ervice revenue (Part VIII, line 2	2g)				0		0
e	10 Ir	nvestment	income (Part VIII, column (A)	), lines 3, 4, and 7d	)		1,40	00,615		1,508,991
Œ	<b>11</b> C	Other reve	nue (Part VIII, column (A), line	s 5, 6d, 8c, 9c, 10d	c, and 11e)		1,34	40,688		1,142,803
	12 T	otal reven	ue-add lines 8 through 11 (m	nust equal Part VIII,	column (A), line 12	)		17,959		573,865,026
	<b>13</b> G	ants and	l similar amounts paid (Part I)	K, column (A), lines	1–3)		407,9	98,341		479,134,967
	14 E	Benefits pa	aid to or for members (Part IX	, column (A), line 4)	)			0		0
S	<b>15</b> S	alaries, ot	her compensation, employee b	penefits (Part IX, col	umn (A), lines 5–10	)	33,8	21,607		39,399,003
Expenses	<b>16a</b> P	rofession	al fundraising fees (Part IX, co	olumn (A), line 11e)	)		4,1:	35,720		4,580,188
ĝ	b T	otal fundr	aising expenses (Part IX, colu	umn (D), line 25) ▶	59,756,515	5				
Ш	<b>17</b> C	Other expe	enses (Part IX, column (A), line	es 11a-11d, 11f-24	-e)		74,8	73,541		65,461,881
	18 T	otal expe	nses. Add lines 13–17 (must e	equal Part IX, colun	nn (A), line 25)		520,8	29,209		588,576,039
		Revenue le	ess expenses. Subtract line 18	8 from line 12			17,68	88,750		-14,711,013
Net Assets or Fund Balances						Beg	inning of Curre	ent Year	End	d of Year
sets	<b>20</b> T	otal asset	s (Part X, line 16)				406,7	58,577		394,704,546
A As	<b>21</b> T		ties (Part X, line 26)			. L	255,79	99,733		257,310,303
			or fund balances. Subtract li	ne 21 from line 20			150,9	58,844		137,394,243
P	art II	Signatu	re Block							
			I declare that I have examined this re						y knowledo	je and belief, it is
tru	e, correct, a	and complex	Street Avison of preparer (other than	officer) is based on all in	tormation of which pre	parer na	as any knowled	ge.		
٠.		15	1000/1/2							
Siç		Signate	84A E47951PRE4				Date	.lu	ne 23, 2	2021
He	re		D Robinson, COO/CFO & Trea	surer					110 20, 2	
		, ,,	r print name and title			12.				
Pa	iid	Print/Type	preparer's name	Preparer's signature		Date		Check	] if PTIN	1
Pr	eparer							self-empl	oyed	
	e Only	Firm's nan	ne <b>&gt;</b>				Firm's	EIN ►		
		Firm's add					Phone	no.		
Ma	y the IRS	discuss 1	this return with the preparer s	shown above? (see	instructions) .					_ Yes

Part	III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The Organization's mission is to support programs through fundraising, advocacy and education that provide lifesaving medicines,
	better nutrition, clean water, quality basic education and emergency relief to children, women and communities in over 190
	countries and territories. The Organization partners, in coordination and planning, with voluntary agencies engaged in child relief
	to create a better world for children.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	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
3	services?
	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.
	the total expenses, and revenue, if any, for each program service reported.
4-	(Code) \(\( \sum_{\text{conseq}} \\ \( \sum_{\text{conseq}} \\ \)
4a	(Code:) (Expenses \$19,484,864 including grants of \$0 ) (Revenue \$0 )
	Public Information: The USF has reached hundreds of thousands of supporters through issue oriented videos, television and
	public radio service announcements, a variety of publications, the internet via our website (www.unicefusa.org) and other mobile
	devices. The various USF communication teams work hard to educate the public about the challenges facing the worlds children
	which is the global mission of UNICEF. This year millions of children joined adult volunteers to support our trademark fundraiser
	Trick or Treat for UNICEF. Tens of thousands of companies and individuals were informed about UNICEF through the greeting
	cards program, and various special events. Educators using TeachUNICEF resources to increase awareness of the programs and
	activities of UNICEF. Through the UNICEF Kid Power program, kids are empowered to help other kids by being active like moving
	and learning, they can help feed hungry children.
4b	(Code:) (Expenses \$486,046,259 including grants of \$486,046,259 ) (Revenue \$0)
	Grants to UNICEF and Other Non-Government Organizations: The Board of Directors of the US Fund for UNICEF has authorized
	grants to the United Nations Childrens Fund and other Non-Government Organization assisted projects from contributions and
	in-kind gifts received by the USF. These grants were used by UNICEF and other NGOs in more than 190 countries and territories
	solely for those assistance projects approved by the board of directors. UNICEF HIV/AIDS projects included preventing HIV
	infection in young people, mother to child transmission and protection, care and support for orphans and children in families made
	vulnerable by HIV AIDS. UNICEF childhood immunization work included projects to prevent measles, polio, tuberculosis and
	maternal and neonatal tetanus in impoverished areas. UNICEF girls education projects included those designed to increase the
	number of girls in school in countries where girls lag behind boys in enrollment, training female teachers, improving girls safety,
	providing appropriate girls facilities and promoting curriculums and learning environments that are free of gender bias. UNICEF
	nutritional projects were implemented that focused on proper nourishment for both children and mothers that included providing
	Vitamin A supplements to strenthen immune systems and preventing iodine deficiency which can cause brain damage and
	(Continued on Schedule O, Statement 3)
4c	(Code:) (Expenses \$2,136,726 including grants of \$0) (Revenue \$0)
	Advocacy: Through USF's Office of Public Policy and Advocacy in Washington D. C., the USF acts as an advocate for the well
	being of the world's children. One of the special functions of the Public Policy Office is to advise both the Administration and
	Congress on the needs of the worlds children. Through the advocacy efforts of USF, the U S Government allocated \$134 million to
	UNICEF in 2019. The U S Government funding is provided directly to UNICEF and is not reflected as revenue in Part I.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
10	Total program service expenses • Foz. (7.2040)

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	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
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		~
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	~	
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		,
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		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		,
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		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V </i>	10	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	/	
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		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
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		,
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	~	
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	~	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
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	~	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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	~	
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	~	
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		,
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	~	
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	~	
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		,
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		~
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	~	

Part	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		/
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	~	
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	V	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		/
С	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		~
	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		/
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		<b>/</b>
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? <i>If "Yes," complete Schedule L, Part II</i>	26		~
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		V
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		>
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		>
С	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		<b>&gt;</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M </i>	30		/
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		/
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? <i>If "Yes," complete Schedule R, Part I </i>	33		/
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	~	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	~	
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		~
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	~	
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 b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	V	

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2  379  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sun of lines 1a and 2a is greater than 250, you may be required to e-tile (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  5a H**(Yes,** has it filed a Form 990-T for this year? If **No** to the 3b, provide an explanation on Schedule O.  5b H**(Yes,** has it filed a Form 990-T for this year? If **No** to the 3b, provide an explanation on Schedule O.  5d A 4 ard yith end during the caleadry 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)?  5d Was the organization aparty to a prohibited tax shelter transaction at any time during the class year?  5d Was the organization sharp to a prohibited tax shelter transaction at any time during the tax year?  5d 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 charlactible contributions and environment of the proper of the proper of the goods or services provided?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions and partly for goods and services provided to the payor?  7 If If "Yes," did the organization include with every solicitation an express alterment that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions and partly for goods and services provided to the payor?  8 If "Yes," did the organization notity the donor of the value	Part '	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
Statements, filed for the calendar year ending with or within the year covered by this return 2a 379  b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b v Note: if the sum of lines t and 2a is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b if "fes;" has it filed a Form 990-T for this year? #7%" to line 3b, provide an explanation on Schedule 0.  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 their financial accountry) b if "Yes," enter the name of the foreign country (such as a bank account, securities account, or their financial accountry) b if "Yes," enter the name of the foreign country (such as a bank account, securities account, or their financial accountry or the composition of the programization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a					Yes	No
Statements, filed for the calendar year ending with or within the year covered by this return 2a 379  b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b v Note: if the sum of lines t and 2a is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b if "fes;" has it filed a Form 990-T for this year? #7%" to line 3b, provide an explanation on Schedule 0.  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 their financial accountry) b if "Yes," enter the name of the foreign country (such as a bank account, securities account, or their financial accountry) b if "Yes," enter the name of the foreign country (such as a bank account, securities account, or their financial accountry or the composition of the programization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a	2a	Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax				
Note: if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 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 accounts? 5 Was the organization aparty to a prohibited tax scount, sourties account, or other suctions for filing requirements for ISO From 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 The Yes is to line 5 or 5b, did the organization that the was or is a party to a prohibited tax shelter transaction? 7 Organization solicit any contributions that were not tax deductible as charitable contributions? 8 If Yes, if did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions under section 170(e). 1 If Yes, indicate the number of Forms 8282 filed during the year 1 If Yes, indicate the number of Forms 8282 filed during the year 2 Did the organization eview any funds, directly or indirectly, on a personal benefit contract? 5 If the organization and access any funds, directly or indirectly, on a personal benefit contract? 6 If the organization and access any funds, directly or indirectly, on a personal benefit contract? 7 If the organization and access any funds of turned to require the organization for the value of turned transports of the organization for the value of turned transports of the organization for forms 8282 filed during the year  9 Sponsoring organization and funds, directly or indirectly, on a personal benefit contract? 9 If t		1 7 1	2a 379			
Note: if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 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 accounts? 5 Was the organization aparty to a prohibited tax scount, sourties account, or other suctions for filing requirements for ISO From 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 The Yes is to line 5 or 5b, did the organization that the was or is a party to a prohibited tax shelter transaction? 7 Organization solicit any contributions that were not tax deductible as charitable contributions? 8 If Yes, if did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions under section 170(e). 1 If Yes, indicate the number of Forms 8282 filed during the year 1 If Yes, indicate the number of Forms 8282 filed during the year 2 Did the organization eview any funds, directly or indirectly, on a personal benefit contract? 5 If the organization and access any funds, directly or indirectly, on a personal benefit contract? 6 If the organization and access any funds, directly or indirectly, on a personal benefit contract? 7 If the organization and access any funds of turned to require the organization for the value of turned transports of the organization for the value of turned transports of the organization for forms 8282 filed during the year  9 Sponsoring organization and funds, directly or indirectly, on a personal benefit contract? 9 If t	b		ax returns? .	2b	~	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  4b If 1*Yes,* has filled a Form 990-T for this year? If 1*No* to the 8b, provide an explanation on Schedule O  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 is purposed. The second of the provided o		· · · · · · · · · · · · · · · · · · ·				
b If "Yes," has it filed a Form 990-T for this year? If "No." to line 3b, provide an explanation on Schedule O.  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 by See instructions for filing requirements for infoCNF form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization a party to a prohibited tax shelter transaction? or If "Yes," to line 5a or 5b, did the organization file form 8886-T?  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 adeductible as charitable contributions?  5b   "Yes," did the organization include with every solicitation an express statement that such contributions or girts were not tax adeductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  9 If "Yes," did the organization notify the donor of the value of the goods or services provided?  9 If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to file Form 8282?  10 If "Yes," did the organization notify the donor of the value of the goods or services provided?  11 If "Yes," indicate the number of Forms 8282 filed during the year  22 If the organization received a contribution of qualified intellectual property, did the organization file a Form 10s4.  17 If the organization received a contribution of qualified intellectual property, did the organization file a Form 10s4.  18 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under s	За			3a		~
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 the foreign country (such as a bank account, securities account, or other financial account)?  b   ff "Yes," enter the name of the foreign country ▶  Sa   Was the organization of filing requirements for FinCEV From 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a   Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  b   Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c   ff "Yes," to line 5a or 5b, did the organization file Form 8986-17?  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?  b   ff "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  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?  7   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?  7   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?  7   Did the organization receive a payment in excess of \$75 made partly as a contribution of the year required to file Form \$282? etc.   Total Yes    10   Did the organization receive a contribution of qualified intellectual property, did the organization file a form 1986-07    11   Did the organization receive a contribution of qualified intellectual property, did the organization file a form 1986-07    12   Did the sponsoring organization ma						
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See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).  Was the organization a party to a prohibited tax shelter transaction?  If "Yes" to line ba or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes," do the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt was or is a party to a prohibited tax shelter transaction?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations shat may receive deductible contributions under section 170(c).  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization on sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  The thind of the organization of cars, boats, simplens, or other vehicles, did the organization file Form 899 as required?  The proparation of the vehicles of the organization file Form 899 as required?  The proparation of the vehicles of the organization file Form 899 as required?  The proparation of the vehicles of the organization file Form 899 as required?  The proparation of the vehicles of the organization file Form 1098-0?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any distribution of the organization file Form 1094.  Section 501(c)(7) organization received from them.)  Section 501(c)(7) organization included on Part VIII, l	b	- · · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  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?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  B Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross income from members or shareholders  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  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.  Enter the amount of reserves on hand  Did the organization subject to the section 4960 tax on payments(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  Is the organization and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net inv						
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   7g	е					~
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  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?  Sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Did the sponsoring organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  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.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 ex	f					~
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?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12	_					
sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Bection 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12	h			7h	~	
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b 11 Section 501(c)(12) organizations. Enter: a 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 11b 12b 12b 13 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b 14 Section 501(c)(29) qualified nonprofit health plans in more than one state? 12b 13a 14a 15b 15b 15b 16b 16b 16b 16b 16b 16b 16b 16b 16b 16	8		intained by the	_		
a Did the sponsoring organization make any taxable distributions under section 4966?	_			8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12						
Initiation fees and capital contributions included on Part VIII, line 12						
a Initiation fees and capital contributions included on Part VIII, line 12			on?	9b		
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			1			
Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders		· · · · · · · · · · · · · · · · · · ·				
a Gross income from members or shareholders			10b			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1 1 1 1 1 1				
against amounts due or received from them.)		<del>-</del>	11a			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	40	•		4.0		
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.  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  c Enter the amount of reserves on hand  13c  14a  Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  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.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		, , , , ,	1	12a		
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.  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  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  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.  16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			120			
Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				10-		
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	а			13a		
the organization is licensed to issue qualified health plans	_		O.			
c Enter the amount of reserves on hand			401-			
<ul> <li>Did the organization receive any payments for indoor tanning services during the tax year?</li></ul>						
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  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?		L.		44-		
<ul> <li>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?</li></ul>						\ <u>'</u>
excess parachute payment(s) during the year?				140		
If "Yes," see instructions and file Form 4720, Schedule N.  16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  16   16   16   17   18   19   19   10   10   11   11   12   13   14   15   16   16   16   16   17   18   19   19   10   10   10   10   10   10	15			4.5		,
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16				15		_
	16		etmont income?	16		.,
	10	If "Yes," complete Form 4720, Schedule O.	unent income?	10		

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

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year. . . 1a 26 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 25 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b / Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a 1 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **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 12b ~ Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 14 Did the organization have a written document retention and destruction policy? . . . . . . . . . . Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . . 15a 15b 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 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► See Schedule O, Statement 4 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Upon request ✓ Own website ✓ Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 ▶ Alpha Conteh, (212)922-2600

Part VI

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

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

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

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

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

Check this box in heither the organization hol		u o.g	<u> </u>		C)	ompo	71.00		amour, amoutor,	l i dotoo.
(A)	(B)	١,,			ition			(D)	(E)	(F)
Name and title	Average					e than d is both		Reportable	Reportable	Estimated amount
	hours					or/trust		compensation	compensation from related	of other
	per week (list any	Ind or o	Ins	읔	Ke.	em Hig		from the organization	organizations	compensation from the
	hours for	Individual to or director	titut	Officer	Key employee	Highest co	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related organizations	ual t	iona		old	ee t cor	,			related organizations
	below	Individual trustee or director	ī		yee	npe				
	dotted line)	ee 	Institutional trustee			Highest compensated employee				
Caryl M Stern	55.00									
Director/President/CEO (until 1/2/2020)	5.00	~		~				902,632	0	81,774
Edward G Lloyd	5.00							,		
President-UNICEF USA Impact Fund (1/2/2020)	55.00				~			468,466	0	81,024
Samuel Barron Segar	50.00									
Senior Vice President-Development (Until 1/13/20)	1.00				~			406,495	0	79,226
Andrew Rhodes	50.00									
Chief Information Officer	0.00				~			379,442	0	41,390
Anucha Browne	50.00									
SVP-Program & Engagement/Asst Secretary for IF-	1.00			~				309,704	0	73,749
Richard Esserman	50.00									
VP-Finance & Budget/Asst. Treasurer (Until 1/31/20	5.00			~				299,194	0	74,133
Gabriella Morris	50.00									
SVP-Foundation and Corporate Partnerships (Unti	2.00				~			296,692	0	74,116
Brett D Robinson	50.00									
Chief Financial & Administrative Officer/Treasurer	5.00			~				334,250	0	22,197
Shelley Effman	50.00									
Chief Marketing Officer	1.00				~			302,852	0	51,452
Chelsea Peters	50.00									
SVP-Regions (Until 3/27/20)	0.00				~			277,403	0	67,034
Helene Vallone-Rafaele	50.00									
VP, Direct & Interactive Marketing	0.00					~		241,851	0	67,657
Kristi Burnham	50.00									
Vice President-Professional Learning and Develop	1.00					~		228,002	0	73,385
Casey Marsh	50.00	1								
Vice President-Regions-West	0.00					~		204,560	0	73,131
Leslie Goldman	50.00	1								
Vice President-Global Cause Partnerships	1.00	<u> </u>				V		216,666	0	30,427

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

<b>(A)</b> Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	b office or directo	unles	Pos neck ss pe	rson	e than of the both or/trust Highest compensated employee	n an	(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
Lisa Szarkowski	50.00									
Vice President-Humanitarian Emergencies	0.00					~		196,806	0	30,323
Peter Lamm	5.00									
Director/Chairman (Until March 1, 2020)	1.00	~		~				0	0	0
Dolores Rice Gahan	5.00									
Director/Co-Chair (From March 1, 2020)	1.00	~		~				0	0	0
Ewout Steenbergen	5.00									
Director / Co-Chair (From 3/1/20)	0.00	~		~				0	0	0
Mindy Grossman	5.00									
Director/Vice Chair	0.00	~		~				0	0	0
John A Herrmann Jr	5.00									
Director/Secretary	1.00	~		~				0	0	0
Franklin Fritz Hobbs	2.00									
Director	0.00	~						0	0	0
Robert Manoukian	1.00									
Director (Until 5/6/20)	0.00	~						0	0	0
Bernard Taylor Sr	2.00									
Director	0.00	~						0	0	0
David Sable	1.00									
Director	0.00	~						0	0	0
Gary M Cohen	1.00									
Director	0.00	~						0	0	0
Tea Leoni	2.00									
Director	0.00	~						0	0	0
Henry Schleiff	1.00									
Director	0.00	~						0	0	0
Sherrie Rollins Westin	1.00									
Director	0.00	<b>'</b>						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	b office or directo	unles	Pos neck ss pe	rson	e than of the both or/trust Highest compensated employee	n an	(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
Hilary Gumbel	1.00									
Director	0.00	~						0	0	0
Joaquin Duato	1.00									
Director	0.00	~						0	0	0
Dikembe Matumbo	1.00									
Director	0.00	~						0	0	0
Robert T Brown	1.00									
Director	0.00	~						0	0	0
Carol Hamilton	1.00									
Director	0.00	~						0	0	0
Elizabeth Smith	1.00									
Director	0.00	~						0	0	0
Kelly Wilson	1.00									
Director	0.00	~						0	0	0
Shahriar Shahida	1.00									
Director	2.00	~						0	0	0
John O'Farrell	1.00									
Director	0.00	~						0	0	0
Andrew Hohns	1.00									
Director	0.00	~						0	0	0
Mary Erdoes	1.00									
Director (Until 10/15/2019)	0.00	~						0	0	0
Jim Barber	1.00									
Director (Until 10/23/2019)	0.00	~						0	0	0
Philippe Gilbert	1.00									
Director (From 5/20/2020)	0.00	~						0	0	0
Ghada Irani	1.00									
Director	0.00	~						0	0	0

<b>(A)</b> Name and title	<b>(B)</b> Average hours	box,	unles	Pos heck ss pe	erson	e than o is both or/trust	n an	(D) Reportable compensation	<b>(E)</b> Reporta compens	ation		other	
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rela organizat (W-2/1099-	ions	fro	oensation om the zation a organiza	and
Michael Nyenhuis	55.00												
Director/President/CEO (From 3/30/2020)	5.00	~		~		-		0		0			0
Alpha Conteh  VP-Finance & Budget/Asst. Treasurer (from 4/7/20	50.00	-		1				0		0			0
vr-rinance & Budger/Asst. Treasurer (from 4/7/20	5.00							U		0			
1b Subtotal								5,065,015		0		02.	1,018
c Total from continuation sheets to Part d Total (add lines 1b and 1c)						· ·	<b>&gt;</b>	5,065,015		0			1,018
Total number of individuals (including bureportable compensation from the organism)	t not limited						e) w	vho received more 95	e than \$10	00,000	of		
3 Did the organization list any former employee on line 1a? If "Yes," complete								loyee, or highes	t comper	nsated 	3	Yes	No V
4 For any individual listed on line 1a, is the organization and related organizations													
<ul><li>individual</li></ul>									· · · · · ion or indi		5		·
Section B. Independent Contractors	: 11 163, 0	Jorripi	CIC	361	ieui	ale o i	OI 3	sucri persori .		• •	<u> </u>		
Complete this table for your five hig compensation from the organization. Rep													
(A) Name and business add	dress							<b>(B)</b> Description of serv	rices	(	<b>(C)</b> Compens	ation	
3SIXTY FUNDRAISING, 33 IRVING PLACE, NEW Y								ACE TO FACE FUN					1,150
CHARLES RIVER INTERACTIVE INC, 890 WINTER		JITE 1	20,	WA	LTH	AM, N					1,259,758		
					Platform Application Services 927,500 Web Marketing Services 1,852,495								

BRIGHTVINE SOLUTIONS INC, 52 GLEN ROAD, HOPKINTON, MA 01748

received more than \$100,000 of compensation from the organization ▶

Total number of independent contractors (including but not limited to those listed above) who

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

843,137

Provide Non-Profit technolog

# Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ny line in this Pa	ırt VIII		🗆
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S S	1a	Federated campaign	ns .		1a	278,610				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b	0				
بي 10	С	Fundraising events			1c	8,732,921				
fts, r A	d	Related organization	ns .		1d	0				
, Gi Jila	е	Government grants	(cont	ributions)	1e	0				
Sin	f	All other contribution	ns, git	fts, grants,						
utic		and similar amounts no	ot inclu	uded above	1f	562,201,701				
rib Ott	g	Noncash contribution	ons in	cluded in						
Cont		lines 1a-1f			1g	\$ 143,605,944				
C	h	Total. Add lines 1a-	-1f .			<u> ▶</u>	571,213,232			
o)	_					Business Code				
Vic.	2a									
ser iue	b									
yram Ser Revenue	C									
yra Re	d									
Program Service Revenue	e f	All other program se		ravanua						
ъ.	g	Total. Add lines 2a-				•	0			
	3	Investment income					0			
		other similar amoun		-			1,508,991	0	0	1,508,991
	4	Income from investn					0	0	0	0
	5	B 101				_	902,134	0	0	902,134
				(i) Real		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6с		0	0				
	d	Net rental income o	r (loss	r'						
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets	_							
		other than inventory	7a							
Revenue	b	Less: cost or other basis	71.							
ver		and sales expenses .	7b 7c				-			
		Gain or (loss)   Net gain or (loss)			0	0				
Other		Gross income from		 ndraicina	_					
Oŧ	oa	events (not including		8,732,921						
		of contributions rep								
		1c). See Part IV, line			8a	1,652,214				
	b	Less: direct expense	es .		8b	1,652,214				
	С	Net income or (loss)	) from	fundraisin	g eve	nts <b>&gt;</b>	0		0	0
	9a	Gross income f	rom	gaming						
		activities. See Part I			9a					
		Less: direct expense			9b					
		Net income or (loss)			tivitie	es <b>&gt;</b>				
	10a	Gross sales of ir								
		returns and allowan			10a					
		Less: cost of goods			10b					
	С	Net income or (loss)	HOIT	sales of In	iveriic	Business Code				
snc (	11a	Crooting Cords Salar	c			511191	240.470	240 470	0	0
scellaneo Revenue	i ia b	Greeting Cards Sale				511191	240,669	240,669	U	U
ella	C									
Miscellaneous Revenue	d	All other revenue					0	0	0	0
Σ		Total. Add lines 11a				▶	240,669			Ţ.
	12	Total revenue. See					573,865,026	240,669	0	2,411,125

## 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 no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .	4,397,529	4,397,529		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	474,737,438	474,737,438		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	6,025,672	1,372,753	1,719,421	2,933,498
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	23,871,676	5,438,384	6,811,765	11,621,527
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,776,490	373,126	452,350	951,014
9	Other employee benefits	5,562,979	1,328,765	1,594,273	2,639,941
10	Payroll taxes	2,162,186	474,285	615,416	1,072,485
11	Fees for services (nonemployees):				
а	Management	0	0	0	0
b	Legal	488,360	68,292	224,545	195,523
С	Accounting	275,000	0	275,000	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	4,580,188			4,580,188
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.) .	9,254,541	3,451,295	741,654	5,061,592
12	Advertising and promotion	18,078,146	5,839,032	0	12,239,114
13	Office expenses	0	0	0	0
14	Information technology	1,876,709	0	1,876,709	0
15	Royalties	0	0	0	0
16	Occupancy	874,105	30,033	794,041	50,031
17	Travel	1,836,849	725,464	295,422	815,963
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	572,751	61,213	128,441	383,097
20	Interest	1,006,678	214,587	384,268	407,823
21	Payments to affiliates	7,011,302	7,011,302	0	0
22	Depreciation, depletion, and amortization .	2,468,910	522,533	487,773	1,458,604
23	Insurance	456,763	90,800	193,390	172,573
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column			,	
	(A) amount, list line 24e expenses on Schedule O.)				
a	Outside Printing and Telemarketing	8,731,938	839,353	95,436	7,797,149
b	Mailing List Rentals	821,757	0	0	821,757
C	Telephone and Communication Services	544,702	112,073	221,162	211,467
d	Postage and Shipping	6,334,989	29,939	38,287	6,266,763
e	All other expenses	4,828,381	549,653	4,202,322	76,406
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e  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)	588,576,039	507,667,849	21,151,675	59,756,515
					Form <b>990</b> (2019)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	tX		<u> U</u>
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	6,296,486	1	23,808,472
	2	Savings and temporary cash investments	67,736,869	2	37,356,109
	3	Pledges and grants receivable, net	252,914,778	3	237,442,077
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined		_	
	_	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
SS	8	Inventories for sale or use	0	8	0
٩	9	Prepaid expenses and deferred charges	3,782,231	9	3,596,360
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 54,404,896			
	b	Less: accumulated depreciation	32,033,475		31,035,750
	11	Investments—publicly traded securities	34,614,385		51,427,398
	12	Investments—other securities. See Part IV, line 11	9,380,353		10,038,380
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	406,758,577	16	394,704,546
	17	Accounts payable and accrued expenses	10,120,072	17	10,413,705
	18	Grants payable	179,467,694	18	201,847,898
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	34,183,527	20	32,644,654
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	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	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	6,583,900
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			2,222,222
		of Schedule D	32,028,440		5,820,146
	26	Total liabilities. Add lines 17 through 25	255,799,733	26	257,310,303
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here ► ✓ and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	55,846,423		63,012,694
d B	28	Net assets with donor restrictions	95,112,421	28	74,381,549
r Fun		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
0 8	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
et	32	Total net assets or fund balances	150,958,844	32	137,394,243
Z	33	Total liabilities and net assets/fund balances	406,758,577	33	394,704,546
					Form <b>990</b> (2019)

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			V
1	Total revenue (must equal Part VIII, column (A), line 12)	5	73,86	5,026
2	Total expenses (must equal Part IX, column (A), line 25)	5	88,57	6,039
3	Revenue less expenses. Subtract line 2 from line 1	-	14,71	1,013
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	1	50,95	8,844
5	Net unrealized gains (losses) on investments		1,28	5,821
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)		-13	9,409
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))	1	37,39	4,243
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  Cash  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		~
	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	~	
	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			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c	<b>'</b>	
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Single Audit Act and OMB Circular A-133?	3a		<b>/</b>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	_		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2019)

#### **SCHEDULE A** (Form 990 or 990-EZ)

## **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.

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

OMB No. 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Employer identification number Name of the organization UNITED STATES FUND FOR UNICEF 13-1760110 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) 8 ☐ An agricultural research organization described in section 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: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% 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.) 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 12d, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а 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. 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. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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. Check this box if the organization received a written determination from the IRS that it is a Type I. Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . Provide the following information about the supported organization(s). (iii) Type of organization (vi) Amount of (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total** 

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 **(e)** 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 550,839,158 471,461,166 564,169,559 535,776,656 571,213,232 2.693.459.771 Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge . . . . 0 0 0 0 0 0 Total. Add lines 1 through 3. . . . 4 550,839,158 471,461,166 564,169,559 535,776,656 571.213.232 2.693,459,771 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) . . . . 1,468,505,327 **Public support.** Subtract line 5 from line 4 1,224,954,444 **Section B. Total Support** Calendar year (or fiscal year beginning in) ▶ (c) 2017 (d) 2018 (e) 2019 (a) 2015 (b) 2016 (f) Total 7 Amounts from line 4 . . . . . . 550,839,158 471,461,166 564,169,559 535,776,656 571,213,232 2,693,459,771 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 2,323,510 2,283,983 2,356,751 2,527,361 2,411,125 11,902,730 Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 87,577 188,188 530,058 213,942 240,669 1,260,434 **Total support.** Add lines 7 through 10 11 2,706,622,935 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 45.26 % Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 Public support percentage from 2018 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . . 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 10%-facts-and-circumstances test - 2019. 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 10%-facts-and-circumstances test - 2018. 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

## 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 falls to qualify	under the te	sis listed bei	ow, piease co	implete Part	11.)	
	on A. Public Support		1				
Calen	dar year (or fiscal year beginning in) ▶	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business 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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
C1:	line 6.)						
	on B. Total Support	(a) 2015	(b) 0016	(-) 2017	(4) 2010	(a) 2010	(f) Total
Calen 9	dar year (or fiscal year beginning in) ► Amounts from line 6	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
э 10а	Gross income from interest, dividends,						
IUa	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
•••	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
-	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	e organization	n's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her	·е					`▶ □
Secti	on C. Computation of Public Suppor	t Percentag	e				
15	Public support percentage for 2019 (line 8	B, column (f), c	divided by line	13, column (f))		15	%
16	Public support percentage from 2018 Sch					16	%
Secti	on D. Computation of Investment Inc	come Perce	ntage				
17	Investment income percentage for 2019 (I			-		17	%
18	Investment income percentage from 2018					18	%
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2019. If the organi						
	17 is not more than 331/3%, check this box		=	-		=	_
b	331/3% support tests—2018. If the organiz						
	line 18 is not more than 331/3%, check this k		_				
20	Private foundation If the organization did	not chack a	nov on line 1/	102 or 10h	chack this hav	and ead inetru	ctions -

#### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

CCII	on 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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) 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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> 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 12a or 12b in Part I, answer (b) and (c) 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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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 (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	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 <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).			
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).	7		
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	8		
b	in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a		
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	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 <b>Part VI.</b>	9с		
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 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	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
L	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b> on B. Type I Supporting Organizations	11c		
Secu	on B. Type i Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
•	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 <b>Part VI</b> 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		
Secti	on 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	4		
Socti	on D. All Type III Supporting Organizations	1		
Section	on B. 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		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
0 11	supported organizations played in this regard.	3		
	on E. Type III Functionally Integrated Supporting Organizations			,
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	S).
a b	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> </ul>			
C	The organization is the parent of each of its supported organizations. <i>Complete inte 3 below.</i> The organization supported a governmental entity. <i>Describe in Part VI</i> how you supported a government entity (	'see in	struct	ions)
2	Activities Test. <i>Answer (a) and (b) below.</i>	300 111	Yes	
– a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
4	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	C:		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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		
<b>6</b> 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):			
a Average monthly value of securities	1a		
<b>b</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		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
<b>2</b> 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		
<b>6 Distributable Amount.</b> 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-functionall instructions).	y int	egrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)		
Secti	on D—Distributions			Current Year	
1	Amounts paid to supported organizations to accomplish	exempt purposes			
2					
	organizations, in excess of income from activity				
3_	3 Administrative expenses paid to accomplish exempt purposes of supported organizations				
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in <b>Part VI</b> ). See instructions.				
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive		
9	Distributable amount for 2019 from Section C, line 6				
10	Line 8 amount divided by line 9 amount				
Secti	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019	
1	Distributable amount for 2019 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2019				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2019				
a	From 2014				
b	From 2015				
c	From 2016				
d	From 2017				
e	From 2018				
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
h	Applied to 2019 distributable amount				
<u>i</u> _	Carryover from 2014 not applied (see instructions)				
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2019 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2019 distributable amount				
	Remainder. Subtract lines 4a and 4b from 4.				
	Remaining underdistributions for years prior to 2019, if				
5	any. Subtract lines 3g and 4a from line 2. For result				
J	greater than zero, explain in <b>Part VI.</b> See instructions.				
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
7	Excess distributions carryover to 2020. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2015				
b	Excess from 2016				
	Excess from 2017				
d	Excess from 2018				
	Excess from 2019				

Part VI

	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.)
Schedule A.	Part II, Line 10 - Sales of Greeting Cards and Other Miscellaneous Income
	<i>y</i>

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

2019
Open to Public

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** UNITED STATES FUND FOR UNICEF 13-1760110 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for 1 definition of "political campaign activities") Volunteer hours for political campaign activities (see instructions) . . . Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . Yes No Yes No **b** If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3) (4)(5) (6)

Page 2

d Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

	,					
Pa	rt II-A Complete if the organization section 501(h)).	is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	ection under
Α	Check 🕨 🗌 if the filing organization belongs				iated group memb	er's name,
	address, EIN, expenses, and sh			•		
<u>B</u>	Check ► ☐ if the filing organization checke			ovisions apply.		
	Limits on Lobby (The term "expenditures" mea				(a) Filing organization's totals	<b>(b)</b> Affiliated aroup totals
_					J .	9,000,000
	<ul><li>a Total lobbying expenditures to influence p</li><li>b Total lobbying expenditures to influence a</li></ul>			•	402.455	
	c Total lobbying expenditures to influence a	•		• •	492,455 492,455	
	d Other exempt purpose expenditures	•			588,083,584	
	e Total exempt purpose expenditures (add I				588,576,039	
	f Lobbying nontaxable amount. Enter th		•		300,370,037	
	columns.	io amount in		, table iii betii	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying i	nontaxable amount	is:	1/000/000	
	Not over \$500,000	20% of the am				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.				
	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 25%	6 of line 1f)			250,000	
	h Subtract line 1g from line 1a. If zero or les				0	
	i Subtract line 1f from line 1c. If zero or less	s, enter -0-			0	
	j If there is an amount other than zero o	n either line	1h or line 1i, did	the organization	file Form 4720	
	reporting section 4911 tax for this year?					Yes No
	(Some organizations that made a sect	ion 501(h) ele	Period Under Sec ction do not have uctions for lines	e to complete all	of the five colum	ns below.
	Lobbying E	Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	(e) Total
2	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
	b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
	c Total lobbying expenditures	635,587	623,448	486,408	492,455	2,237,898

250,000

0

Schedule C (Form 990 or 990-EZ) 2019

1,000,000

1,500,000

250,000

250,000

0

250,000

0

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)).	iled l	Form	ı 5768		
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	iption of the lobbying activity.	Yes	No	Ar	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), c	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF answered "Yes."				ine 3	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year	.	2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Part	• •					
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.					

# SCHEDULE D (Form 990)

### **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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number UNITED STATES FUND FOR UNICEF 13-1760110 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) . . Aggregate value at end of year . . . . . . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Tax Year 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 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. 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. 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: 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: 

Schedul	e D (Form 990) 2019								Page <b>2</b>
Part	Organizations Maintaining Co	ollections of A	Art. Hist	orical T	reasures	or Ot	her Similar A	ssets (co	
3	Using the organization's acquisition, accollection items (check all that apply):								
а	☐ Public exhibition		ď	∃ Loan d	or exchang	e progr	am		
b	☐ Scholarly research		e [						
C	☐ Preservation for future generations		<b>C</b> [						
_	Provide a description of the organization	'a collections o	nd avala	in how th	ook furtbor	the ere	ionization'a ava	mnt nurn	ooo in Dort
4	XIII.		·		•				ose in Pari
5	During the year, did the organization so assets to be sold to raise funds rather that							ilar . 🗌 <b>Y</b> e	es 🗌 No
Part	IV Escrow and Custodial Arrang	ements.							
	Complete if the organization ar 990, Part X, line 21.	swered "Yes"	on Forr	n 990, F	Part IV, line	e 9, or	reported an a	mount or	n Form
1a	Is the organization an agent, trustee, cu		er interm	ediary fo	r contribut	ions or	other assets i		
b	included on Form 990, Part X? If "Yes," explain the arrangement in Part		te the fol	 lowing ta	 able:			. ∐ <b>Y</b> €	es ∐ No
	, <sub> -</sub>							Amount	
С	Beginning balance					10			
d						1d			
e	Distributions during the year					1e			
f	Ending balance					1f	_		
2a	Did the organization include an amount of							hv2 🗆 <b>V</b> 4	es 🗆 No
	If "Yes," explain the arrangement in Part							-	
	Endowment Funds.	Am. Oncorrior	711 1110 07	piariation	11140 00011	provide	sa on rait xiii		
· ai	Complete if the organization ar	swered "Yes"	on Forr	n 990 F	Part IV line	10 ح			
		a) Current year	(b) Prio		(c) Two year		(d) Three years ba	ck (a) Four	years back
1a	Beginning of year balance	4,152,329		,142,329			• • • • • • • • • • • • • • • • • • • •	- ' '	·
b	Contributions	10,000	4	10,000	4,1	42,329 0	1,642,3	0	1,642,329
		10,000		10,000		U		0	0
С	Net investment earnings, gains, and losses	27.247		104.044		42.205			0
4		27,247		184,844		43,385		0	0
d	Grants or scholarships	0		0		0		0	0
е	Other expenditures for facilities and	07.047		404.044		40.005			
	programs	27,247		184,844		43,385		0	0
T	Administrative expenses	0		0		0		0	0
g	End of year balance	4,162,329		,152,329		42,329	1,642,3	29	1,642,329
2	Provide the estimated percentage of the			e (line 1g	, column (a	)) neid i	as:		
а	Board designated or quasi-endowment		%						
b	Permanent endowment ► 100	%							
С	Term endowment ► 0 %								
	The percentages on lines 2a, 2b, and 2c	•							
3a	Are there endowment funds not in the period organization by:	ossession of th	e organiz	ation tha	at are held	and ad	ministered for t	the 	Yes No
	(i) Unrelated organizations							3a(i)	·
	(ii) Related organizations							3a(ii)	V
b	If "Yes" on line 3a(ii), are the related orga	nizations listed	as requir	ed on Sc	hedule R?			. 3b	
4	Describe in Part XIII the intended uses of	the organizatio	n's endo	wment fu	ınds.				
Part			on For	m 000 F	Part IV/ lies	110	Soo Form 000	Dort V	lino 10
	Complete if the organization ar								
	Description of property	(a) Cost or oth		. ,	r other basis :her)		Accumulated epreciation	( <b>d</b> ) Boo	k value
1a	Land	,	0		0		•		0
b	Buildings		0		41,685,279		13,240,976		28,444,303
С	Leasehold improvements		0		64,166		57,526		6,640

0

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

433,486

12,221,965

**d** Equipment

17,398

2,567,409

31,035,750

416,088

9,654,556

. . >

Schedule D (Form 990) 2019 Page **3** 

Part VII	Investments – Other Securities.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11b. See F	orm 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		
	neld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	mn (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments—Program Related.	IV line 11e Coe E	form 000 Part V line 12
	Complete if the organization answered "Yes" on Form 990, Part		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(4)			Section and an year market raise
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
	mn (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 F	form 990 Part V line 15
	(a) Description	10, 1110 110. 0001	(b) Book value
(1)	(a) Bossiphon		(B) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		<b>•</b>
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 ir	ncome taxes		(
(2) DUE TO	AFFILIATE		2,207,077
(3) LIABILI	FIES UNDER SPLIT INTEREST AGREEMENTS		3,613,069
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 25.)		5,820,146
2. Liability for	runcertain tax positions. In Part XIII, provide the text of the footnote to the organ	nization's financial sta	tements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2019 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 575,011,438 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 1.285.821 Donated services and use of facilities 0 Recoveries of prior year grants . . . . 0 2d -139,409 Add lines **2a** through **2d** . . . . . . . . . . . . . . . . . 2e 1.146.412 Subtract line **2e** from line **1** . . . . . . . . . 3 3 573,865,026 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 4b 0 Add lines 4a and 4b 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) 5 573,865,026 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . . . 1 588,576,039 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 0 Prior year adjustments 2b 0 2c 0 Other (Describe in Part XIII.) . . . . . 0 Add lines 2a through 2d . . . . . . 2e 0 Subtract line **2e** from line **1** . . . . . . . . 3 3 588,576,039 Amounts included on Form 990. Part IX. line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 0 Add lines **4a** and **4b** . . . . . . . . . . . . 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . 5 588,576,039 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. Schedule D, Part V, Line 4 - The principal of the endowment is permanently restricted but the investment income can be used for operations to support the organization's mission Schedule D, Part X, Line 2 - The US Fund For UNICEF (USF) is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (IRC) and is classified as a publicly supported organization as defined in Section 509(a)(1) of the IRC and is also exempt from state and local income taxes and qualify for the maximum charitable contribution deduction by donors. USF recognizes the effects of income tax positions only if those positions are more likely than not of being sustained. No provision for income taxes has been made, as USF has not reported any taxable unrelated business income and any unrelated business income is offset by associated expenditures. USF evaluates, on an annual basis, the effects of any uncertain tax positions on its consolidated financial statements. As of June 30, 2020, USF has not identified or provided for any such positions Schedule D, Part XI, Line 2d - Change in value of split-interest agreements

Schedule D (Form 990) 2019

#### **SCHEDULE F** (Form 990)

# **Statement of Activities Outside the United States** ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

**Employer identification number UNITED STATES FUND FOR UNICEF** 13-1760110

Part	General Information Form 990, Part IV, line	<b>on Activit</b> 14b.	ies Outside	the United States. Com	nplete if the organization a	nswered "Yes" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistan	es' eligibility		ts or assistance, and the		✓ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorir	ng the use of its grants and	d other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	Sch F, Stmt 1					
	30111, 30110 1					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal					
b	Total from continuation sheets to Part I					
c	Totals (add lines 3a and 3b)	0	0			474 737 438

Page 2

Schedule F (Form 990) 2019

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. Part II

(i) Method of valuation (book, FMV, appraisal, other)																		Schodulo E (Eorm 990) 2019	(١٥١١١١ ععد) ددات
																	80	1 Schooling	ocileanie i
(h) Description of noncash assistance																	ıx-exempt		
(g) Amount of noncash assistance																	ry, recognized as ta		
(f) Manner of cash disbursement																	are recognized as charities by the foreign country, recognized as tax-exempt section 501(c)(3) equivalency letter		
(e) Amount of cash grant																	ognized as charities 501(c)(3) equivaler		
(d) Purpose of grant																	bove that provided a	es	
(c) Region	Sch F, Stmt 2																Enter total number of recipient organizations listed above that by the IRS, or for which the grantee or counsel has provided a	Enter total number of other organizations or entities	
(b) IRS code section and EIN (if applicable)																	nber of recipier for which the g	nber of other o	
<b>1 (a)</b> Name of organization	(1)	(2)	(3)	(4)	(5)	(9)	(7)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)		3 Enter total nun	

Page 3

Schedule F (Form 990) 2019

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. Part III

(h) Method of valuation (book, FMV, appraisal, other)																			Schedule F (Form 990) 2019
(g) Description of noncash assistance																			Sch
(f) Amount of noncash assistance																			
(e) Manner of cash disbursement																			
<b>(d)</b> Amount of cash grant																			
(c) Number of recipients																			
(b) Region																			
(a) Type of grant or assistance	(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

Schedule F (Form 990) 2019 Page **4** 

# Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	<b>☑</b> 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	<b>☑</b> 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

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019 Page **5** 

#### 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.

Schedule F, Part I, Line 2 - THE US FUND FOR UNICEF MONITORS THE GRANTS BY REQUIRING THE GRANTEE TO SUBMIT
REPORTS AND MILESTONES AS DEFINED IN THE GRANT AGREEMENT. GRANTEES ARE RESPONSIBLE FOR INSURING THAT
PROJECTS ARE EXECUTED IN ACCORDANCE WITH DEFINED TIMELINES AND MILESTONES AS SET FORTH IN THE GRANT. IN
CERTAIN SITUATIONS, SITES VISITS ARE MADE TO ASCERTAIN COMPLIANCE TO GRANT AGREEMENTS. IN THE CASE OF
OTHER PROGRAMS LIKE THE COUNTDOWN 2030 AND OTHER SIMILAR PROGRAMS , AN ANNUAL MEETING OF THE GRANTEES
IS HELD TO ASCERTAIN THAT PROGRAMS AND PROJECTS ARE EXECUTED IN ACCORDANCE WITH THE DEFINED TIMELINES
AND MILESTONES AS SET FORTH IN THE AGREEMENT AND ANY MODIFICATIONS, REVISIONS AND AMENDMENTS ARE
EXECUTED AS NEEDED.

#### **UNITED STATES FUND FOR UNICEF**

Form: **Schedule F (2019)** EIN: **13-1760110** 

Page: **1** 

Part I, Line 3

#### **Accounts and Activities Outside the United States**

		Offices	Employees	Total
Region Activities Services	Central America and the Caribbean Grantmaking TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION AND EMERGENCY PROGRAMS	0	0	19,248,987
Region Activities Services	East Asia and the Pacific Grantmaking TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION, EMERGENCIES, IMMUNIZATION INCLUDING POLIO ERADICATION AND OTHER RELATED PROGRAMS	0	0	15,677,222
Region Activities Services	Europe (including Iceland and Greenland) Grantmaking TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION AND OTHER RELATED PROGRAMS	0	0	1,744,164
Region Activities Services	Middle East and North Africa Grantmaking TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION, IMMUNIZATIO AND EMERGENCY PROGRAMS	0 DN	0	21,725,677
Region Activities Services	South Asia Grantmaking TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION, EMERGENCIES, IMMUNIZATION INCLUDING POLIO ERADICATION AND OTHER RELATED PROGRAMS	0	0	123,202,986
Region Activities Services	Sub-Saharan Africa Grantmaking TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION, EMERGENCIES, HEALTH AND NUTRITION, WATER AND SANITATION, IMMUNIZATION AND OTHER RELATED PROGRAMS	0	0	293,138,402
	Total:	0	0	474,737,438

#### UNITED STATES FUND FOR UNICEF

Form: **Schedule F (2019)** EIN: **13-1760110** 

Page: **2** 

Part II, Line 1

#### **Grants To Organization Outside US**

		Cash Grant	Non-Cash Assistance
Region Grant Cash Disbursement Desc. of Non-Cash Asst. Valuation	Central America and the Caribbean TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION AND EMERGENCY PROGRAMS WIRE NOT APPLICABLE NOT APPLICABLE	19,248,987	0
Region Grant  Cash Disbursement Desc. of Non-Cash Asst.	East Asia and the Pacific TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION, EMERGENCIES, IMMUNIZATION INCLUDING POLIO ERADICATION AND OTHER RELATED PROGRAMS WIRE NOT APPLICABLE	15,677,222	0
Valuation Region Grant	NOT APPLICABLE  Europe (including Iceland and Greenland)  TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION AND OTHER RELATED PROGRAMS	1,744,164	0
Cash Disbursement Desc. of Non-Cash Asst. Valuation	WIRE NOT APPLICABLE NOT APPLICABLE		
Region Grant  Cash Disbursement Desc. of Non-Cash Asst. Valuation	Middle East and North Africa TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION AND EMERGENCY PROGRAMS WIRE Clothing, freight and other services used for emergencies FAIR VALUE	19,381,482	2,344,195
Region Grant  Cash Disbursement Desc. of Non-Cash Asst.	South Asia TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION, IMMUNIZATION INCLUDING POLIO ERADICATION AND EMERGENCY PROGRAMS WIRE NOT APPLICABLE	123,202,986	0
Valuation	NOT APPLICABLE		
Region Grant Cash Disbursement	Sub-Saharan Africa TO SUPPORT CHILD PROTECTION, CHILD SURVIVAL, EDUCATION, WATER & SANITATION, IMMUNIZATION AND EMERGENCY PROGRAMS WIRE	151,876,652	141,261,750
Desc. of Non-Cash Asst. Valuation	Pharmaceutical product for the treatment of river blindness FAIR VALUE		

### **SCHEDULE G** (Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

UNITE	STATES FUND FOR UNICEF					13-1	1760110
Part	Fundraising Activities. Form 990-EZ filers are no				vered "Yes" on I	Form 990, Part IV, I	ine 17.
1	Indicate whether the organization	n raised funds	through any	of the follo	owing activities. C	heck all that apply.	
а	Mail solicitations		e 🖟	☑ Solicitati	ion of non-govern	ment grants	
b	Internet and email solicitation	ıs	f [	☐ Solicitati	ion of government	t grants	
С	Phone solicitations		g 🖟	Special 1	fundraising events	3	
d	<ul><li>In-person solicitations</li></ul>						
	Did the organization have a writt or key employees listed in Form						
	If "Yes," list the 10 highest paid compensated at least \$5,000 by			draisers) pu	ursuant to agreem	nents under which the	e fundraiser is to be
(	i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1 Se	e Schedule G, Part IV, Statement		Yes	No			
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				▶	38,807,869	4,580,188	34,227,681
AL, AR	List all states in which the orgar registration or licensing. , AZ, CA, CO, CT, DC, DE, FL, GA, R, PA, PR, RI, SC, SD, TN, TX, UT, V	HI, IA, ID, IL, IN,	KS, KY, LA,				•

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

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			SNOWFLAKE GALA	GOLF EVENT	8	(add col. <b>(a)</b> through col. <b>(c)</b> )
4			(event type)	(event type)	(total number)	COI. (C))
Revenue	1	Gross receipts	6,717,561	176,185	3,491,429	10,385,175
Ä	2		5,679,400	128,177	2,925,344	8,732,921
	3	Gross income (line 1 minus line 2)	1,038,161	48,008	566,085	1,652,254
	4	Cash prizes	0	0	0	0
	5	Noncash prizes	0	0	0	0
sesu	6	Rent/facility costs	0	0	0	0
Direct Expenses	7	Food and beverages	549,102	41,550	151,584	742,236
Direc	8	Entertainment	450,617	0	338,668	789,285
	9	Other direct expenses .	38,442	6,458	75,833	120,733
	10 11		•	, , ,		1,652,254
Pa					000 Part IV line 10	or reported more than
1 (4		\$15,000 on Form 990-E2		ored res on rolling	550, 1 art 1v, iiiic 15,	or reported more than
Ф			(a) Din na	(b) Pull tabs/instant	(a) Oth an aranin a	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
3ev						
_	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
<b>Direct</b>	4	Rent/facility costs				
_	5	Other direct expenses .				
	6		<ul><li>☐ Yes %</li><li>☐ No</li></ul>	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)		
	a	Enter the state(s) in which the or is the organization licensed to co	onduct gaming activities	s in each of these states		🗌 Yes 🗌 No
	b					
10		Were any of the organization's g	_	•	ated during the tax year	

	ule G (Form 990 or 990-EZ) 2019		Page 3
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		☐ No
13	Indicate the percentage of gaming activity conducted in:	ſ	
a	The organization's facility		%
b 14	An outside facility		%
	Name ►		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		□ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party:		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ▶		
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		□No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$		
Part			

### **UNITED STATES FUND FOR UNICEF**

Form: Schedule G (2019)

Page: **1** 

Part I, Line 2b

EIN: 13-1760110

### **Fundraiser Activity Information**

Name and Address	Activity	C1	Gross Receipts	C2	C3
3Sixty Fundraising LLC 33 Irving Place New York, NY 10003	Face to Face Fundraising to acquire sustainer donations which can take up to five years to fulfill	No	874,469	1,741,150	-866,681
Marketeam LLC 600 North Park Center 1200 Abernathy Road NE Atlanta, GA 30328	Direct Mail Fundraising	No	24,503,391	513,000	23,990,391
Globalfaces Direct 30 Lesmill Road Unit 2 Toronto, Ontario M3B 2T6 Canada	Door to Door Fundraising	No	165,541	352,214	-186,673
Blue State Digital 62187 Collection Center Drive Chicago, IL 60693-0621	Internet and e-mail marketing	No	12,051,183	1,852,495	10,198,688
Outerwall Inc PO Box 91258 Bellevue, WA 98009	Tick or Treat Fundraising	No	1,213,285	121,329	1,091,956
Total:			38,807,869	4,580,188	34,227,681

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

## SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

OMB No. 1545-0047

▶ Attach to Form 990.

Open to Public Inspection **Employer identification number** 

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

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. **ջ** (h) Purpose of grant or assistance √ Yes 13-1760110 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of noncash assistance (e) Amount of non-cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (b) EIN UNITED STATES FUND FOR UNICEF 1 (a) Name and address of organization Sch I, Stmt 1 Partl Part II Ξ 6 ุด

<u>8</u>

(9)

4

3

9

E

8

9

 $\Xi$ 

(12)

Schedule I (Form 990) (2019)

Cat. No. 50055P

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

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

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

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Schedule I (F	Schedule I (Form 990) (2019)
Part III	<b>Grants and Other Assistance to Domestic Individuals.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(f) Description of noncash assistance								onal information.	gress reports as outlined in the grant set forth in the agreement.						
(e) Method of valuation (book, FMV, appraisal, other)								tion required in Part I, line 2; Part III, column (b); and any other additional information.	oorts and in certain cases prog the guidelines and milestones						
(d) Amount of noncash assistance								ie 2; Part III, columr	o submit an annual reped in accordance with						
(c) Amount of cash grant								equired in Part I, lir	requiring the grantee so hat projects are execut ponding budget.						
<b>(b)</b> Number of recipients								the information	tors the grants by sible for insuring t						
(a) Type of grant or assistance	1	2	3	4	5	9	7	Part IV Supplemental Information. Provide the informat	Schedule I, Part I, Line 2 - The US Fund for UNICEF monitors the grants by requiring the grantee so submit an annual reports and in certain cases progress reports as outlined in the grant agreement. Grantees are held to account and are responsible for insuring that projects are executed in accordance with the guidelines and milestones set forth in the agreement.  Additionally, the grantee are held to account for the funding and the corresponding budget.						

Schedule I (Form 990) (2019)

UNITED STATES FUND FOR UNICEF

Form: **Schedule I (2019)** EIN: **13-1760110** 

Page: 1 Part II, Line 1

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	Harvard University 501 (C) (3) CASH N/A To support the project called "Countdown to 2030 which aims to contribute to women's, children's, and adolescent's health by analyzing and reporting the data coverage of effective health and nutrition interventions accross the continuum of care and key coverage determinants	04-2103580	2,000,000	C
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	African Population and Health Research Center 501 (C) (3)  Cash N/A  To strengthen the evidence in support of reproductive, maternal, newborn, child and adolescent health and nutrition programs through multi-country studies and enhance the capacity of country and regional institutions to conduct analyses and research and effectively communicate the findings to policy makers.	06-1608361	262,000	0
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	Local Initiatives Support Corporation 501 (C)(3) Cash N/A To support community development initiatives for the recovery in Puerto Rico caused by the emergency	13-3030229	46,500	0
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	Church World Service 501 (C) (3) Not Applicable N/A To fund the placement of long term volunteers in the Border Shelter Corp programs	13-4080201	76,577	0
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	American University of Beirut 501 (c)(3) N/A N/A To support and foster tolerance and respect for diversity	13-5996846	87,780	0
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	Young Center for Immigrant Children 501 (c)(3) N/A N/A To promote the best interests of unaccompanied immigrant children with due regard to the child's expressed wishes, according to the Convention on the rights of the Child and State and Federal Law	26-1839249	142,038	0
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	Kids in Need of Defence 501 (c)(3) N/A N/A To protect unaccompanied children who enter the US immigration system alone and ensure that no child appears in court without an attorney	26-2763038	10,000	0

Schedule I, Part IV, Statem	ICHL I	UNITED S	TATES FUND FOR	UNICE
Name and address	Brigham and women's Hospital Inc	42-3120909	11,952	(
IRC code section	501 (c)(3)			
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To support care by proving the best patient care while also pursuing			
	innovative ways to treat patients			
Name and address	Hope Rising	46-0973280	50,000	(
IRC code section	501 (c)(3)			
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To provide long-term care and recovery for minor children who have been rescued			
Name and address	John Hopkins Bloomberg School	52-0595110	524,477	(
IRC code section	501(c)(3)			
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To support the contribution of women's, children's and adolescent's health			
	by collecting, synthesizing, analyzing and reporting on the best available			
	data on coverage of effective health and nutrition interventions.			
Name and address	Special Olympics	52-0889518	145,500	C
IRC code section	501 (c)(3)		,	
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To support ongoing partnership programming in Jamaica, Peru, Brazil,			
, ,	Mexico, Moldova, Bosnia, Herzegovina and Zambia for children with disabilities			
Name and address	The Aga Khan University	52-1231983	27,950	C
IRC code section	501 (c)(3)		•	
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To support improving the quality of life in the developing world and beyond through world class teaching, research and heath care delivery.			
Name and address	Foundation for Professional Development	52-1929345	400,000	C
IRC code section	501 (c)(3)		,	
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To support strengthening the nation's global competitiveness by			
. •	empowering professionals to promote engineering, science, and technolog	у		
	to underrepresented men and women through professional and career			
	development, education programs, awards and other career programs.			
Name and address	Elton John Aids Foundation	58-2033460	70,000	
IRC code section	501 (c)(3)	30 2000 100	. 5,550	
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To support the prevention and treatment of HIV/AIDS			
Name and address	Mental Health America of Greater Houston	74-1272394	149,989	
IRC code section	501 (c)(3)	17-121203 <del>4</del>	140,000	U
Method of valuation	N/A			
Desc. of Non-Cash Asst.	N/A			
Purpose of grant	To support children and educators in Bay District Schools with psychosocia	al		
pood of grant	training and services	··		
Name and address	University of Texas Rio Grande Valley Foundation	74-2246970	99,785	C
	-			

Schedule I, Part IV, Statem	nent 1	UNITED S	TATES FUND FOR I	JNICEF
IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	501 (c)(3)  N/A  N/A  To fund the establishment of the first case management and care coordination infrastructure along the Texas-Mexico border. The program will address the needs of pregnant women and their unborn children who are among the most vulnerable immigrants who have been released from government detention and given permission to remain in the country			
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	Center for Success and Independence 501 (c)(3) N/A N/A To support the encouragement of self awareness, self-determination, self-advocacy and independence	76-0604033	32,000	0
Name and address IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	The University of Manitoba 501 (c)(3) N/A N/A To support the program of Countdown 2030 which aims to provide rigorous analysis on global, regional and country progress on women's, children's and adolescent's health and support capacity for data analysis and use for	98-6008078	260,981	0

their health and nutrition programs

### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 2019

Open to Public Inspection

Name of the organization **UNITED STATES FUND FOR UNICEF**  Employer identification number

13-1760110

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
		_		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
•	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	·			
	✓ Compensation committee ✓ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		~
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
3	compensation contingent on the revenues of:			
		_		
a	The organization?	5a		<i>'</i>
b	Any related organization?	5b		~
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		~
b	Any related organization?	6b		~
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		~
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
•	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		V
		0		
0	If "Voo" on line 9 did the examination also follow the reputtable presumption precedure described in			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?			

# Schedule J (Form 990) 2019

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

Page 2

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

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

Mote. The sufficient of columns (B)(I)-(III) for each instead individual files equal to	ממ	(B) Breakdown of W-2 and/		or 1099-MISC compensation	0.0000000000000000000000000000000000000	מאסייילק א	or 1099-MISC compensation	פוסו נוומר ווומואומממו.
(A) Name and Title	•	(i) Base	(ii) Bonus & incentive	(iii) Other	(C) Retirement and other deferred	( <b>D)</b> Nontaxable benefits	( <b>E)</b> Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported
		compensation	compensation	reportable compensation	compensation			as deferred on prior Form 990
Caryl M Stern,	()	191,761	212,500	72,371	50,200	31,574	984,406	0
ugno	Œ	0		0	0	0	0	0
	()	443,466	25,000	0	50,200	30,824	249,490	0
	<b>(E)</b>	0			0	0	0	0
	()	386,495	20,000	0	47,652	31,574	485,721	0
pment	(ii)	0	0	0	0	0	0	0
ief	()	354,442	25,000	0	918'6	31,574	420,832	0
	(ii)	0			0	0	0	0
	<b>E</b>	334,250	0	0	0	22,197	356,447	0
	<b>(E)</b>	0	0	0	0	0	0	0
am &	€	309,704	0	0	43,361	30,388	383,453	0
tary	€	0	0	0	0	0	0	0
ice	€	238,657	0	60,537	43,459	30,674	373,327	0
	(ii)	0	0	0	0	0	0	0
eo	(E)	269'967	0	0	24,074	50,042	308'01'8	0
_	<b>(E)</b>	0	0	0	0	0	0	0
/ Effman, Chief Marketing	€	302,852	0	0	2,640	48,812	354,304	0
	€	0		0	0	0	0	0
Chelsea Peters, SVP-Regions	€	277,403	0	0	22,716	44,318	344,437	0
	€	0	0	0	0	0	0	0
	€	241,851	0	0	18,600	49,057	309,508	0
	€	0		0	0	0	0	0
dent-	€	218,002	10,000	0	17,315	56,070	301,387	0
	€	0	0	0	0	0	0	0
dent-	€	216,666	0	0	18,808	11,619	247,093	0
	<b>E</b>	0		0	0	0	0	0
Casey Marsh, Vice President	€	204,560	0	0	16,704	56,427	277,691	0
-	<b>E</b>	0	0	0	0	0	0	0
Lisa Szarkowski, Vice President	€	196,806	0	0	9,840	20,483	227,129	0
15	<b>(E)</b>	0	0	0	0	0	0	0
	€							
16	▣							

Page 3 Schedule J (Form 990) 2019

Part III Supplemental Information

**SCHEDULE K** (Form 990) UNITED STATES FUND FOR UNICEF

Name of the organization Department of the Treasury Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

13-1760110

▶ Attach to Form 990.

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

(i) Pooled financing ŝ 7 Yes ŝ (h) On behalf of issuer Yes No 7 Δ Yes (g) Defeased ŝ 7 Yes ŝ O (f) Description of purpose 39,100,000 REFINANCE NYCIDA BONDS Yes ŝ Ω Yes (e) Issue price 0 0 0 0 0 0 0 0 0 2007 1,581,936 ŝ 7 7 ⋖ (d) Date issued Yes 09/22/2016 7 7 Were the bonds issued as part of a refunding issue of taxable bonds (or, if Does the organization maintain adequate books and records to support the Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, . . . . . . . . . . . . (c) CUSIP# 13-2577233 (b) Issuer EIN Has the final allocation of proceeds been made? . issued prior to 2018, an advance refunding issue)? if issued prior to 2018, a current refunding issue)? Working capital expenditures from proceeds Capital expenditures from proceeds Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Year of substantial completion . Gross proceeds in reserve funds Proceeds in refunding escrows. Issuance costs from proceeds **Build NYC Resource Corporation** final allocation of proceeds? Other unspent proceeds . Total proceeds of issue . Amount of bonds retired . Other spent proceeds . (a) Issuer name Bond Issues **Proceeds** Part I Part II 2 9 ω စ 10 16 က 4 ~ F 15 ⋖ Ω O 42 4 17

Schedule K (Form 990) 2019

Cat. No. 50193E

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

Was the organization a partner in a partnership, or a member of an LLC,  which owned property financed by tax-exempt bonds?	Ves	<u>o</u>	V Kes V S S S S S S S S S S S S S S S S S S	9	Yes	o Z
Was the organization a partner in a partnership, or a member of an LLC,  which owned property financed by tax-exempt bonds?	% % % 0 0 0 0			Ŷ.	Yes	o Z
which owned property financed by tax-exempt bonds?	% % % 0 0 0 0					
Are there any lease arrangements that may result in private business use of bond-financed property?			0,00			
bond-financed property?			,0 ,0 ,0			
Are there any management or service contracts that may result in private business use of bond-financed property?  If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?  Are there any research agreements that may result in private business use of bond-financed property?  If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?  Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government.  Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶  Total of lines 4 and 5			9 9 9			
If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?  Are there any research agreements that may result in private business use of bond-financed property?  If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?  Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government.  Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government			9 9 9			
Are there any research agreements that may result in private business use of bond-financed property?  If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?  Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government.  Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government.  Total of lines 4 and 5			0,00			
If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?  Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government.  Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government   Total of lines 4 and 5			0 0 0			
outside counsel to review any research agreements relating to the financed property?  Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government   Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government   Total of lines 4 and 5	% % 0		9 99			
Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government \(\bigveright\) Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government \(\bigcirc\)  Total of lines 4 and 5	% % 0	8 88	9 9			
Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government •  Total of lines 4 and 5	% 0	% %	9 9	%		%
another section 501(c)(3) organization, or a state or local government • Total of lines 4 and 5	% 0	% %	9 9			
Total of lines 4 and 5	% 0	%	9	%		%
Does the bond issue meet the private security or payment test?				%		%
8a Has there been a sale or disposition of any of the bond-financed property to a nondovernmental person other than a 501(c)(3) organization since the bonds were issued?						
disposed of	%	%	9	%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?						
<ul> <li>9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?</li> </ul>						
Part IV Arbitrage	-			-	-	
<b>4</b>		<b>a</b>	S		۵	
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Yes No Penalty in Lieu of Arbitrage Rebate?	No Yes	o N	Yes	o <sub>Z</sub>	Yes	8
2 If "No" to line 1, did the following apply?						
a Rebate not due yet?						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed						
3 Is the bond issue a variable rate issue?	<b>,</b>					

Schedule K (Form 990) 2019

Part IV Arbitrage (continued)

Page 3

	(								
		⋖			8	O		۵	
<b>4</b> a		Yes	No No	Yes	N <sub>o</sub>	Yes	No	Yes	N <sub>o</sub>
	hedge with respect to the bond issue?		`						
q	Name of provider								
ပ	. Term of hedge								
ס	1								
Ø	Was the hedge terminated?								
5a	1		>						
٩	Name of provider	1							
ن									
ס									
۷	Work any grace and proposed potential polyclicate and proposed for the pro		3						
<b>~</b>			•						
Dog	Procedures To Undertake Corrective Action	>							
0 L									
		∢-			   ه	اد		7	
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?	yes /	ON CONTRACT	Yes	o Z	Yes	02	Yes	o Z
Par	nformation. Provide	onses to c	questions	on Schedu	ıle K. See i	See instructions			
							•	Schedule K (Form 990) 201	orm 990) 20 <sup>-</sup>

### **SCHEDULE M** (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990.

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

UNITED STATES FUND FOR UNICEF

Employer identification number 13-1760110

Part	Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c)  Noncash contribution amounts reported on Form 990, Part VIII, line 1q	Method o			
1	Art—Works of art			, ,				
2	Art—Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods	· /		423.582	FAIR VALUE			
6	Cars and other vehicles	~	219		CASH			
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	~	498	0	CASH			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities-Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate - Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies	~	1	141,261,750	FAIR VALUE			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (Freight for Emergency:)	~	2		Fair Value			
26	Other ► (Platform Services )	~	1	864,900	FAIR VALUE			
27	Other ► ()							
28	Other ► (							
29	Number of Forms 8283 received which the organization completed				29	4		
	which the organization completed	FUIII 0203	o, Fait IV, Donee Acknowled	ugement	29	<del>'</del>	Yes	No.
00	B. San Harrison (P.H.Harrison and A.		L	and the second of the second o	<b>4</b> 11 1		163	140
30a	During the year, did the organizate 28, that it must hold for at least the state of the control							
	to be used for exempt purposes f					30a		~
b	If "Yes," describe the arrangemen		c notating penda!			Jua		
	_		stance policy that require	os the review of any s	netandard			
31	Does the organization have a contributions?	-	tance policy that require		nistandard	31	~	
322	Does the organization hire or use						-	
32a		•				32a	_	
b	If "Yes," describe in Part II.					JEG		
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a) i	s checked,			

Schedule M (Form 990) 2019 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Line 32b - The US Fund for UNICEF contracted an outside vendor to manage and sell donated vehicles Schedule M, Part I, Line 33 - The US Fund for UNICEF contracted an outside vendor to manage and sell donated vehicles. The total of 219 vehicles received during the year with a total donation value of \$152,372. The donation is recorded when cash is received. In addition, USF received 498 stock gifts that are, upon receipt, liquidated for cash and had a donation value of \$7,489,559. The donation is recorded when cash is received.

### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury

### 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

2019

**Open to Public** Inspection

Internal Revenue Service **Employer identification number** Name of the organization UNITED STATES FUND FOR UNICEF 13-1760110 Form 990, Part VI, Section A, Line 1a - The Board has delegated the authority to an Executive Committee to act o behalf of the Board between meetings of the Board of Directors. The Executive Committee consists of the Chair, the Vice Chair, the Secretary and the Immediate Past Chair, the President and the Chairs of the Standing Committees (including the Chair of the Executive Committee), the Chair of the Development Committee, the Chair of the Strategic Planning Committee. In the event that any of the named committee has co-chairs, the co-chairs of such committee shall designate which of them will attend the respective Executive Committee meeting. Except, as otherwise provided in the By-Laws or by resolution of the Board, the Executive Committee shall have and may exercise all the powers and authority of the Board except that the Executive Committee may not reverse any action taken by the Board. In all cases in which specific directions shall not have been given by the Board, The Executive Committee may appoint sub-committees and shall advise and aid the officers of the Organization in all matters concerning its interests and activities. Form 990, Part VI, Section B, Line 11b - After the return is prepared by Staff, it is reviewed by the Controller, VP of Finance and Budget and Chief Operating Officer & CFO. Additionally, a copy of the return is sent to the organization's legal counsel for review. The COO/CFO reviews the return with the Chair of the Audit Committee and shares with the members of the Board the return prior to filing. After the review process is completed, the return is filed electronically with the COO/CFO signing the return. Form 990, Part VI, Section B, Line 12c - Every Staff member of the USF and its Affiliate is required annually to sign a form that ensures everyone is aware of and in compliance with the conflict of interest policy. The Human Resources Department collects these information. In addition, every Board member and principal officer annually completes a conflict of interest disclosure statement disclosing the facts relating to any actual or potential financial interest or stating the he or she has no reportable financial interest that would constitute a conflict or potential conflict of interest and acknowledging that they reviewed, understand and agree to comply with the conflict of interest policy. The USF and its Affiliate have an extensive conflict on interest policy that essentially requires any Board member or principal officers with a conflict or potential conflict on interest to disclose the existence and all material facts regarding any interest in a transaction or matter being considered by the Board or a Board committee and recuse himself or herself from the meeting in which the transaction or matter is discussed and voted upon. Form 990, Part VI, Section B, Line 15 - THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS HAS THE RESPONSIBILITY AND AUTHORITY TO DETERMINE THE NATURE AND AMOUNT OF COMPENSATION TO BE INCLUDED IN THE PRESIDENT'S CONTRACT. DURING THE CONTRACT PROCESS, A COMPARABILITY STUDY (THE "STUDY") IS CONDUCTED BY AN OUTSIDE EMPLOYEE COMPENSATION AND BENEFITS FIRM WHICH TAKES INTO CONSIDERATION COMPARABLE OTHER ORGANIZATIONS IN THE NEW YORK AREA IN DETERMINING THE TOTAL COMPENSATION OF THE PRESIDENT TO INCLUDE SALARY, BENEFITS AND INCENTIVES AS APPROPRIATE. ALSO, COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES ARE CONDUCTED UNDER A SIMILAR COMPARABLE PROCESS. Form 990, Part VI, Section C, Line 18 - THE ORGANIZATION'S FORM 1023 AND FORM 990 ARE AVAILABLE UPON REQUEST. THE ORGANIZATION'S FORMS 990 ARE POSTED IN THE ORGANIZATION'S WEBSITE @ WWW.UNINCEFUSA.ORG AND ARE ALSO AVAILABLE IN GUIDESTAR AND CHARITY NAVIGATOR. Form 990, Part VI, Section C, Line 19 - THE ORGANIZATION GENERALLY DOES NOT MAKE AVAILABLE TO THE PUBLIC ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY, HOWEVER, THESE DOCUMENTS ARE MADE AVIALABLE UPON REQUEST. THE FINANCIAL STATEMENTS ARE POSTED IN THE ORGANIZATION'S WEBSITE AT WWW.UNICEFUSA.ORG Form 990, Part XI, Line 9 - Change in Value of Split Interest Agreements

Schedule O, Statement 1 UNITED STATES FUND FOR UNICEF

Form: Form 990 (2019) EIN: 13-1760110

Page: 1 Header Section

Reasonable Cause Explanations

Explanation

Not Applicable

Schedule O, Statement 2 UNITED STATES FUND FOR UNICEF

Form: Form 990 (2019) EIN: 13-1760110

Page: 1 Part I, Line 1

### **Activity Or Mission Description**

### Description

education and emergency relief to children, women and communities in over 190 countries and territories. The organization partners in coordination and planning with voluntary agencies engaged in child relief to create a better world for children.

Schedule O, Statement 3

**UNITED STATES FUND FOR UNICEF** 

Form: Form 990 (2019) EIN: 13-1760110
Page: 2 Part III, Line 4b

**Second Program Service Accomplishments Description** 

### Description

physical retardation. UNICEF and USF also assisted a number of emergency situations by providing clean water, medical supplies, basic health services, educational and recreational supplies. USF supported UNICEF's Global Polio Eradication Initiative activities by piloting the introduction of oral cholera vaccines in emergency settings; scaling up routine immunization; support for the Countdown to 2015 and 2030 for Maternal, Newborn and Child Survival, and scaling up community approaches to total sanitation. USF also supported UNICEF's Schools for Africa and Asia Initiatives including support for water and sanitation and hygiene interventions in schools, teacher training and school materials and improvements and improving access to quality education.

UNITED STATES FUND FOR UNICEF

EIN: **13-1760110** 

Form: Form 990 (2019)

Page: 6

Part VI, Section C, Line 17

States where Copy Of Return is Filed	
States	
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Schedule O, Statement 4	UNITED STATES FUND FOR UNICEF
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# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

**Employer identification number** 

Schedule R (Form 990) 2019 (g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity ŝ Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Yes 13-1760110 7 7 (f)
Direct controlling entity UNITED STATES FUND FOR **UNITED STATES** (e) End-of-year assets **FUND FOR** Public charity status (if section 501(c)(3)) (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Line 12a, 1 Line 12a, 1 (d) Exempt Code section (c)
Legal domicile (state or foreign country) 501 (c) (3) 501 (c) (3) Cat. No. 50135Y Legal domicile (state or foreign country) (b) Primary activity ≥ ≥ PROVIDE MEDICINE AND OPERATE THE (b) Primary activity (2) BRIDGE FUND GRANT ASSISTANCE CORPORATION (46-0898424 INACTIVE 125 MAIDEN LANE 10TH FLOOR, NEW YORK, NY 10038 For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) UNICEF USA IMPACT FUND FOR CHILDREN INC (20-3287404) (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization 125 Maiden Lane 10th Floor, New York, NY 10038 UNITED STATES FUND FOR UNICEF Part I Part II ල ල Ξ 2 4 3 9 4 3 9 6

Page 2

Schedule R (Form 990) 2019

Part III

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

(k) Percentage ownership									art IV,	(i) Section 512(b)(13) controlled entity?	Yes No								Schedule R (Form 990) 2019
(j) General or managing partner?	s No								990, Pa	age Sec hip	۶								R (For
	Yes								-orm	(h) Percentage ownership									hedule
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, zations treated as a corporation or trust during the tax year.	(g) Share of end-of-year assets									Š
(h) Disproportionate allocations?	s No								swere										
of- Dispra	Yes								ion an year.	(f) Share of total income									
(g) Share of end-of- year assets									organizat g the tax										
(f) Share of total S income									te if the cast	(e) Type of entity (C corp, S corp, or trust)									
Share o									emplet or tru										
(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)									<b>Trust.</b> Co	(d) Direct controlling entity									
Predo income unre exclud tax u									on or										
(d) Direct controlling entity									<b>orporatic</b> treated a	(c) Legal domicile (state or foreign country)									
Direct co									as a C	(st									
(c) Legal domicile (state or foreign country)									Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization are line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	(b) Primary activity									
									tions relate	Prin									
tetivity									<b>aniza</b> more										
(b) Primary activity									<b>d Org</b> ne or	zation									
<u></u>									<b>8elate</b> had o	d organiz									
<del>-</del>									on of Fause it	(a) Name, address, and EIN of related organization									
and EIN c zation									<b>ficatic</b> 1, beca	(a) and EIN									
<b>(a)</b> me, address, and EIN related organization									Identi line 34	address,									
(a) Name, address, and EIN of related organization									2	Name,									
		<b>E</b>	[2]	(3)	(4)	(2)	9	(2)	Part IV			(£)	(2)	(3)	(4)	(2)	9	(2)	

Schedule R (Form 990) 2019

Part V

Page 3

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

During the tay even, cut the organization of the following transactions with one or more related organizations listed in Parts II-IV7 19 1 10 1 10 1 10 1 10 1 10 1 10 1 10	Note: Complete line 1 if any entity is listed in Parts II, III, or IV of thi	or IV of this schedule.					Yes	2
from a controlled entity	ization engage	any of the following transactions with one	or more related organ	izations listed in Part	s II–IV?			
10	s, (iii) royalties,	(iv) rent from a controlled entity				<b>1</b> a		7
10	to related orga	:ation(s)				1b	7	
1d   1f   1f   1f   1f   1f   1f   1f	from related or	nization(s)				<del>1</del>		7
16   16   17   17   17   17   17   17	or related organi:	tion(s)				19		7
14   16   17   17   18   19   19   19   19   19   19   19	ited organization					<del>1</del>		7
16   19   19   19   19   19   19   19								
10   11   11   11   11   11   11   11	Dividends from related organization(s)					<b>1</b> ŧ		7
anization(s)  reganization(s)  ritations for related organization(s)  swith related organization(s)  the relationships and transaction threshold for the transaction threshold fo	Sale of assets to related organization(s)					1g		7
11   14   17   18   19   19   19   19   19   19   19	Purchase of assets from related organization(s)					두		7
anization(s) itations for related organization(s) itations by related organization(s) itations for related organization(s) itations by related organization(s)  s with related organization(s)  s with related organization(s)  s with related organization(s)  the second organization ship is a site or in the second organization or who must complete this line, including covered relationships and transaction thresholds on the second organization involved organization involves organization involves organization involves organization involves organization involves organization organization involves organization involv	organization(s)					=		7
riganization(s)  itations for related organization(s)  itations by related organization(s)  itation by related organization(s)  itations by related organizatio	other assets to	ated organization(s)	· · · · · · · · · · · · · · · · · · ·	  	  	=		. 2
1k     1		)						
11   1m	other assets fro	related organization(s)				<b>+</b>		7
1m   1n   1n   1n   1n   1n   1n   1n	bership or fundr	sing solicitations for related organization(s)				=		7
s with related organization(s)	pership or fundr	sing solicitations by related organization(s)				Ę		>
(s)	nailing lists, or c	er assets with related organization(s)				두		7
(s) Transaction to who must complete this line, including covered relationships and transaction thresholds type (a – s) The early and transaction thresholds the early type (a – s) Transaction three is a mount involved to the termining amount involved to the early three is a mount involved t	elated organizat					9		7
10   10   10   10   10   10   10   10								
(s)	ganization(s) fo rganization(s) fc	xpenses				<del>6</del> ф	7	7
(s)	to related orga	zation(s)				÷	7	
s for information on who must complete this line, including covered relationsh (b)  Transaction Amount involved type (a – s)	from related or	inization(s)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		<u>\$</u>	,	7
Transaction Amount involved type (a—s)  Transaction Amount involved type (a—s)	is "Yes," see th	instructions for information on who must co	complete this line, inclu	Iding covered relation	ships and transacti	ion thre	shold	ds.
	(a) ame of related orgar	ation	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determinin	) ng amoun	lovol)	Ned

Schedule R (Form 990) 2019

Page 4

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets

or gross reveriue) triat was not a related organization. See instructions regarding exclusion for certain investment partitiers in by	garıızatıdır. See	Instructions re	gardırıg exciusid	on lor cel	tain investment pa	armersmps.				
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512		rs Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) General or managing partner?	( <b>k)</b> Percentage ownership
			200000000000000000000000000000000000000	Yes No			Yes No		Yes No	
(1)										
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								Sche	dule R (For	Schedule R (Form 990) 2019

	Form 990) 2019	Page <b>5</b>
Part VII	Supplemental Information	
	Provide additional information for responses to questions on Schedule R. See instructions.	

Schedule R, Part VII, Statement 1

### **UNITED STATES FUND FOR UNICEF**

Form: **Schedule R (2019)** EIN: **13-1760110** 

Page: 3 Part V, Line 2

### **Description of Covered Relationships and Transaction Thresholds** Amt. involved UNICEF USA IMPACT FUND FOR CHILDREN INC 228,289 Name Transaction type b Method of determining amt. involved Cash contribution for Net Worth UNICEF USA IMPACT FUND FOR CHILDREN INC Name 1,119,000 Transaction type q Method of determining amt. involved Reimbursements of expenses paid by USF on behalf of UNICEF USA Impact Fund for Children Inc UNICEF USA IMPACT FUND FOR CHILDREN INC 5,664,013 Name Transaction type Method of determining amt. involved Payment in support of the UNICEF USA Impact Fund for Children Inc bridge fund

transactions