# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047
2023
<u> </u>
Open to Public
Inspection

<u>A</u>	For the	2023 calendar year, or tax year beginning JU	L 1, 2023 and	ending J	UN 30, 2024		
В	Check if applicable	C Name of organization			D Employer i	dentific	ation number
	Addres	UNITED STATES FUND FOR UNICEF					
	Name	D INTORE HGA			13-176	50110	
F	Initial return	Number and street (or P.O. box if mail is not deli	vered to street address)	Room/suite	E Telephone	number	
F	Final return/	125 MAIDEN LANE 10TH FLOOR	10.00 10 01.001 000.000)		212-686		
	termin- ated	City or town, state or province, country, and 2	ZIP or foreign postal code		<b>G</b> Gross receipts	\$	744,726,336.
	Amend return				H(a) Is this a g	roup ret	:urn
	Application	F Name and address of principal officer: MICHA	EL J. NYENHUIS		for subore	dinates?	Yes X No
	pendin	SAME AS C ABOVE			H(b) Are all subor	dinates inc	luded? Yes No
1	Tax-exe	empt status: X 501(c)(3) 501(c) ( )	(insert no.) 4947(a)(1)	or 527	If "No," a	ttach a li	ist. See instructions
	Websit				H(c) Group ex	emption	number
		organization: X Corporation Trust Ass	sociation Other	<b>L</b> Year	of formation: 194	47 <b>M</b>	State of legal domicile: NY
	_	Briefly describe the organization's mission or most	significant activities: THE OR	GANIZATIO	ON'S MISSION	IS TO	
9	1	RELENTLESSLY PURSUE A BETTER WORLD FOR					
Governance	2	Check this box if the organization discon	tinued its operations or dispos	sed of more	than 25% of its	net asse	ets.
Ver	3	Number of voting members of the governing body (	•			1 1	21
		Number of independent voting members of the gov					20
တ္	5	Total number of individuals employed in calendar ye					386
)ţį	6	Total number of volunteers (estimate if necessary)					18759
Ċ	7 a	Total unrelated business revenue from Part VIII, colo					0.
_	b	Net unrelated business taxable income from Form S	990-T, Part I, line 11	·····		. 7b	0.
					Prior Year		Current Year
<u>o</u>	8				825,269		714,685,813.
enc	9 1					0.	0.
ě	10	nvestment income (Part VIII, column (A), lines 3, 4,			3,671		7,355,560.
_	11 '	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,				,306.	-1,636,418.
		Total revenue - add lines 8 through 11 (must equal l			829,050	_	720,404,955.
		Grants and similar amounts paid (Part IX, column (A			734,644		592,208,009.
		Benefits paid to or for members (Part IX, column (A)			46,087	0.	0.
es	15	Salaries, other compensation, employee benefits (P			21,128		52,570,581. 24,057,093.
ens	16a i	Professional fundraising fees (Part IX, column (A), lin			21,120	, 133.	24,037,093.
ă	17 /	Total fundraising expenses (Part IX, column (D), line			56,059	832	58,845,067.
	'' '	Other expenses (Part IX, column (A), lines 11a-11d, Total expenses. Add lines 13-17 (must equal Part IX			857,921		727,680,750.
		Revenue less expenses. Subtract line 18 from line 1			-28,870		-7,275,795.
		nevertue less experises. Subtract line 16 from line 1	2	Be	ginning of Curren		End of Year
ets (	20	Total assets (Part X, line 16)			295,994		275,185,035.
Ass	21	Total liabilities (Part X, line 26)			94,774		83,189,858.
let let	22	Net assets or fund balances. Subtract line 21 from I	ine 20		201,219		191,995,177.
_	art II	Signature Block		•			
Und	ler penal	ties of perjury, I declare that I have examined this return,	ncluding accompanying schedules	s and statem	ents, and to the be	st of my l	knowledge and belief, it is
true	, correct	t, and complete. Declaration of preparer (other than officer	r) is based on all information of wh	nich preparer	has any knowledg	e.	
Sig	n	Signature of officer			Date		
He	re	MICHAEL S CHEN, CFO/TREASURER					
		Type or print name and title					
		Print/Type preparer's name	Preparer's signature		Date	Check if	PTIN
	- H	TOBY RUTH FRIEDMAN KERSLAKE				self-employed	
Und true Sig Her Paid	1	Firm's name KPMG LLP			Firm's	EIN 1	3-5565207
Use	Only	Firm's address 345 PARK AVENUE				0.1.5	
_		NEW YORK, NY 10154-0102			Phone	no.212-	758-9700
Ma	y the IP	S discuss this return with the preparer shown above	e? See instructions				Yes No

Pai	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE ORGANIZATION'S MISSION IS TO RELENTLESSLY PURSUE A BETTER WORLD  FOR EVERY CHILD. SEE SCHEDULE O.	
	TOK EVERT CRILLD. SEE SCREDULE O.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	100110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	d by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to	* :
	revenue, if any, for each program service reported.	, ,
4a	(Code:) (Expenses \$ 592,208,009. including grants of \$ 592,208,009. ) (Revenue \$	)
	GRANTS TO UNICEF AND OTHER NON-GOVERNMENTAL ORGANIZATIONS: THE NATIONAL	
	BOARD OF DIRECTORS OF THE UNITED STATES FUND FOR UNICEF (UNICEF USA)	
	HAS AUTHORIZED GRANTS TO THE UNITED NATIONS CHILDREN'S FUND (UNICEF)	
	AND OTHER NON-GOVERNMENTAL ORGANIZATIONS (NGOS) FROM CONTRIBUTIONS AND	
	IN-KIND GIFTS RECEIVED BY UNICEF USA. THESE GRANTS WERE APPROVED BY THE	
	NATIONAL BOARD OF DIRECTORS AND USED BY UNICEF AND OTHER NGOS FOR	
	PROGRAMS IN MORE THAN 190 COUNTRIES AND TERRITORIES. UNICEF USA'S	
	GRANTS SUPPORT WORK TO DELIVER THE ESSENTIALS THAT GIVE EVERY CHILD A	
	BETTER CHANCE IN LIFE: HEALTH CARE AND IMMUNIZATIONS, SAFE WATER AND	
	SANITATION, NUTRITION, EDUCATION, EMERGENCY RELIEF AND MORE.	
4b	(Code: ) (Expenses \$ 22,889,350. including grants of \$ ) (Revenue \$	
40	(Code:) (Expenses \$ 22,889,350. including grants of \$) (Revenue \$)  PUBLIC INFORMATION: UUSA HAS RALLIED THE AMERICAN PUBLIC TO SUPPORT THE	,
	WORLD'S MOST VULNERABLE CHILDREN, REACHING HUNDREDS OF THOUSANDS OF	
	SUPPORTERS THROUGH ISSUE-ORIENTED VIDEOS, TELEVISION AND PUBLIC RADIO	
	SERVICE ANNOUNCEMENTS, A VARIETY OF PRESS AND PUBLICATIONS, THE	
	INTERNET VIA OUR WEBSITE (WWW.UNICEFUSA.ORG) AND OTHER MOBILE AND	
	SOCIAL PLATFORMS. THE UUSA COMMUNICATIONS TEAM WORKS RELENTLESSLY TO	
	EDUCATE THE PUBLIC ABOUT THE CHALLENGES FACING THE WORLD'S CHILDREN.	
	THIS YEAR, CHILDREN AND ADULTS ADDED MEANING TO THEIR HALLOWEEN-ING BY	
	SUPPORTING OUR TRADEMARK FUNDRAISER, TRICK-OR-TREAT FOR UNICEF. TENS OF	
	THOUSANDS OF COMPANIES AND INDIVIDUALS WERE INFORMED ABOUT THE WORK OF	
	UNICEF AND UUSA THROUGH IN-PERSON AND VIRTUAL GALAS, OUR "NO TIME TO	
	WAIT" SERIES AND PROGRAM VISITS. SEE SCHEDULE O.	
4c		)
	ADVOCACY: UNICEF USA ENGAGES IN EDUCATION AND ADVOCACY RELATED TO CHILD	
	RIGHTS, BOTH DOMESTIC AND INTERNATIONAL, INTERNATIONAL DEVELOPMENT, AND HUMANITARIAN ASSISTANCE WITH THE OBJECTIVE OF ENSURING EVERY CHILD IS	
	HEALTHY EDUCATED PROTECTED AND RESPECTED UNICEF USA ALSO WORKS WITH	
	PARTNERS, VOLUNTEERS, INFLUENCERS, COALITIONS, AND OTHER STAKEHOLDERS	
	TO RALLY THE AMERICAN PUBLIC TO SUPPORT UNICEF'S GLOBAL WORK AND PUBLIC	
	POLICY PRIORITIES. FINALLY, UNICEF USA WORKS WITH U.S. POLICYMAKERS TO	
	ADVANCE FEDERAL AND STATE POLICIES THAT POSITIVELY IMPACT CHILDREN AND	
	TO SECURE FUNDING FROM THE U.S. GOVERNMENT IN SUPPORT OF INTERNATIONAL	
	DEVELOPMENT AND HUMANITARIAN AID.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses 616,724,484.	
		Form <b>990</b> (2023)

15260326 153541 KLP2812475

#### 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7		-		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
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_		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments?  f "Yes," complete Schedule D, Part V	10	Х	
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	Х	
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		х
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		х
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f				
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
124	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
b		12b	х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
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		v	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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		v	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
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		<u> </u>
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	Х	
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	Х	
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
	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	Х	

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# Form 990 (2023) UNITED STATES FUND FOR UNICE Part IV Checklist of Required Schedules (continued)

22   X   X   X   X   X   X   X   X   X		· (continued)		V	N <sub>2</sub>
Part IX, column (A), line 27 (if "yes," complete Schedule I, Parts I and III 20 Dit the organization assert "yes" to Part IVII Sciention A, line 3.4 or 6, shoot compensation of the organization is current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule II. Part IVI (in the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last sky of the year, that was issued after becember 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule IX. If No." go to line 25s.  24b. Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  24c. Did the organization mixest any proceeds of tax exempt bonds beyond a temporary period exception?  24d. X.  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 of unity the year?  25b. It is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have not been reported on any of the organization with a disqualified person in a prior year, and that the transaction have not been reported on any of the organization with a disqualified person in a prior year, and that the transaction have not been reported on any of the organization with a disqualified person in a prior year, and that the transaction have not been reported on any of the organization with a disqualified person in a prior year, and that the transaction have not been reported on any of the organization with a disqualified person in a prior year, and that the transaction have the organization provide a part or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or any immediately organization reported to a business transaction with an of the following parties? See	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		res	No
22 Did the organization answer "Yes" to Part VII, Section A, lins 3, 4, or 6, about compensation of the organization is current and former offices, director, stustees, key employees, and highest compensated employees? If "Yes," complete Schedule J and the organization have a take 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 "Yes," to fine 25a.  Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  24b	22		22		x
and former officers, directors, trustees, key employees, and highest compensated employees? #"Yes," complete Schedule 1 have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last 64g of the year, that was issued after becember 31,2002? #"Yes," answer lense 24b through 24d and complete Schedule K. if Yes," go to line 25a  24b Dt die organization minert any proceeds of faxe-exempt bonds beyond a temporary period exception? 24b X  24b Dt die organization minert any proceeds of faxe-exempt bonds beyond a temporary period exception? 24b X  25c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a discussified person during the year? 44d X  25c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a discussified person during the year? #"Yes," complete Schedule L, Part I 25b X  b is the organization avair as in or behalf of issuer for bonds outstanding at any time during the year? 24d X  25c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a discussified person of the present transaction with a discussified person of the present interestication with a discussified person of the organization provide and any other organization prior Forms 990 or 990-EZ? #"Yes," complete Schedule L, Part II 25b X  25c Tortoriole directly or family member of any of these persons? #"Yes," complete Schedule L, Part II 25b X  27c Tortoriole directly or family member of any of these persons? #"Yes," complete Schedule L, Part II X  28c Yes the organization provide a grant or other assistance to any current or former officers, director, trustee, key employee, creator or founder, substantial contributor? #"Yes," complete Schedule L, Part II X  28c Yes the organization provide any part or other assistance to any current or former officer, director, trustee, former officers, director,	23				
Schedule J. Was 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.  1 bill the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  24b X  25c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  24c X  25d Did the organization invest any proceeds of tax exempt bonds period outstanding starty time during the year to defease any tax exempt bonds?  25d Did the organization invest and as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d Section 501(58), 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 I, Part I  25d Section 501(58), 501(c)(4), and 501(c)(29) organizations are start in the replaced in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  25d Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year?  25d Is the organization aware that it engaged in an excess benefit transaction with a disqualified person or payables to any current or former offere, exception, trustee, key employee, creator or former former starting and the part of these senting the part of these senting the part of the seatence of the part of the part of t					
24a Dit 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, it was selected file. Pecerber 31, 2002? If "Yes," arrawser lines 24b through 24d and complete Schedule K. If "No." yo to line 25a		•	23	х	
standard or 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  b) Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  d) Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  d) Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  d) Did the organization can be an invest any proceeds of tax exempt bonds?  d) Did the organization can be an invest any proceeds of tax exempt bonds outstanding at any time during the year?  d) Did the organization and 54 (R)(20) and 50	24a				
Schedule K. If 'No.' go to line 25a					
b Dit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  246			24a	Х	
any tax excempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d	b		24b		Х
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d   X  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 in a prior year, and that the transaction has not been reported on any of the organizations with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 980 or 990 E27   "Yes," complete Schedule I. Part I   25b   X  25b   X  25c   25c   X  25c	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d   X  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 in a prior year, and that the transaction has not been reported on any of the organizations with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 980 or 990 E27   "Yes," complete Schedule I. Part I   25b   X  25b   X  25c   25c   X  25c		any tax-exempt bonds?	24c		Х
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I   25a   X   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 sprior Forms 990 er 990 E27 If "Yes," complete Schedule L, Part I   25b   X   25b Did the organization provide a grant or other assistance to any current or former officer, director, frustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II   26   X   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 or family member of any of these persons? If "Yes," complete Schedule L, Part III   27   X   28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part III   27   X   28 Was the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part III   27   X   28 Was the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part III   28   X   X   X   X   X   X   X   X   X	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
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	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? #"Yes," complete Schedule L, Part I 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 of rainily member of any of these persons? #"Yes," complete Schedule L, Part II  26		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
Schedule L, Part I	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 25		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part II 27		Schedule L, Part I	25b		Х
controlled entity or family member of any of these persons? // "Yes," complete Schedule L, Part // Late or particular or 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? // "Yes," complete Schedule L, Part 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 55% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III					
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			26		X
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1		
Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 288					17
instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV  28b			27		×
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  "Yes," complete Schedule L, Part IV  28c	28				
"Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV  28c					
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV  28b	а				v
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 Did 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 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 Section 501c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI inse 1 Dand 19?  38 Note: All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19?  39 Note: All Form 990 filers are required to complete Schedule O.  29 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  10 Enter the number of Forms W-2G included on line 1a. Enter -0 if not applicable  10 Did the organization comply with backup withholding rules for reportable payments to v					
"Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X  31 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  Tax Enter the number reported in box 3 of Form 1096. Enter 0- if not applicable  C Did the organization comply with backup withholdi			280		
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contributions? If "Yes," complete Schedule M 30		, ,	29		
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I John Organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I John Organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I John Organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 John Organization have a controlled entity within the meaning of section 512(b)(13)? John Organization have a controlled entity within the meaning of section 512(b)(13)? John Organization solid 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, Iine 2 John Organization solid the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 John Organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V I Inne 1 John Organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  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  The Inter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1b 0 0  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 0  C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	30		30		x
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32	31				<del></del>
Schedule N, Part II  32			"		
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33	OZ.	,	32		х
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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  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  10 In Enter the number of prize winners?  10 In Enter the number of prize winners?	35 a			Х	
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X					
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37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X		If "Yes," complete Schedule R, Part V, line 2	36		Х
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Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  Telephone  The Inter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  10  38  X  Yes  No  1a  1a  215  b  1b  0  C  1b  1b  1c  X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
Part V Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	1		
Check if Schedule O contains a response or note to any line in this Part V  Yes No  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	_	Note: All Form 990 filers are required to complete Schedule O	38	X	
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	Par				
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c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X	1a	Zitter the Hamber reported in box 6 or 1 offin 1666. Zitter 6 in het applicable	-		
(gambling) winnings to prize winners?		Little the number of Forms w-2d included of line 1a. Little 10- if not applicable	-		
	С			v	
332004 12-21-23 Form <b>990</b> (202)				L	(0000

13-1760110

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 386			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		77	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		x
لم	to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  7d	7c		Λ
d		7e		х
e f		7 <del>6</del>		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Х	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.			
D	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  13b			
	Did the appropriate the propriate for independent of the latest of the l	14a		х
14a h	K IIV - II has 't Challe Fare 700 have set the second set of the second second set of the second set of the second se	14b		<del></del> -
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	ידט		
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	.5		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

332005 12-21-23

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	to mile sa, so, or real sector, asserble sire ametariases, processes, or changes on contents of sectors.			
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	tion A. Governing Body and Management			
			Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year 1a 21			
	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 0.  Enter the number of voting members included on line 1a, above, who are independent.			
b	Enter the flamber of voting members included of line ra, above, who are independent	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Х
•	officer, director, trustee, or key employee?	2		Λ
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		х
4	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?	<u>3</u> 4		X
4 5	Did the consideration because the constant of	5		X
6	Did the consectation have marked as a stable black	6		X
о 7а		-		
1 a		7a		х
h	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	ra_		
b	and the three three transfers had 0	7b		х
8	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	76		
а		8a	х	
b	The governing body?  Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00		
•	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		ļ.	
	(This Section B requests information about policies not required by the internal nevenue Gode.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	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	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on 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	Х	
b	and the same of th	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
_	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finand	cial	
	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			
	MICHAEL S. CHEN - 212-922-2495  125 MAIDEN LANE 10TH FLOOR, NEW YORK, NY 10038			
	TAN MATABU MANG INIU PUOON, NEW IONN, NI IOOO			

#### 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization no	or any related	orga	niza	tion	con	nper	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos			nne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	ia a a	irecto	r/trus	tee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	ıl trustee		/ee	m pen		1099-NEC)	1099-1420)	and related
	below	ndividual trustee or director	utiona	_	Key employee	st co	<u>-</u>	.555		organizations
	line)	Indivi	Institutional t	Officer	Key e	Highest compensated employee	Former			· ·
(1) MICHAEL J. NYENHUIS	54.00									
DIRECTOR/PRESIDENT/CEO	1.25	х		х				881,582.	0.	47,476.
(2) CRISTINA SHAPIRO-ALSTER	20.00									
CHIEF STRATEGY OFF. & PRES. OF IF4C	35.25			Х				463,357.	0.	44,346.
(3) RENEE CUTTING	50.00									
CHIEF PHILATHROPY OFFICER	0.00				Х			460,726.	0.	41,582.
(4) JESSICA LEINWAND	52.00									
CHIEF LEGAL OFFICER & GENERAL COUNSE	3.25			Х				415,401.	0.	31,150.
(5) MICHELE WALSH	54.00									
EVP & CHIEF PHILANTHROPY OFFICER	1,25			Х				398,826.	0.	38,206.
(6) SHELLEY EFFMAN	50.00									
CHIEF MARKETING OFFICER	0.00				Х			337,106.	0.	41,844.
(7) MICHAEL KLOMPUS	50.00									
CHIEF PEOPLE & OPERATIONS OFFICERS	0.00				Х			332,184.	0.	39,035.
(8) DARLA SILVA	50.00									
CHIEF PROGRAM OFFICER	0.00				Х			321,544.	0.	37,997.
(9) MICHAEL S CHEN	54.00									
CFO/TREASURER	1.25			Х				332,892.	0.	8,953.
(10) KATHLEEN MCDONNELL	50.00									
SENIOR VICE PRESIDENT	0.00					Х		303,222.	0.	1,516.
(11) HELENE L VALLONE-RAFFAELE	50.00									
VP - DONOR STRATEGY & EXPERIENCE	0.00					Х		263,626.	0.	32,542.
(12) SHANNON CONGEMI	50.00									
VP - TECHNOLOGY	0.00					Х		265,524.	0.	26,070.
(13) KRISTAN BURNHAM	50.00									
VP - EMPLOYEE ENGAGEMENT & DEVELOPME	0.00					Х		248,911.	0.	31,788.
(14) LESLIE GOLDMAN	50.00									
VP - GLOBAL CAUSE PARTNERSHIP	0.00					Х		239,251.	0.	29,083.
(15) GLEN BAPTIST	1.00									
DIRECTOR	1.25	Х						0.	0.	0.
(16) ROBERT T. BROWN	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(17) STEVE EATON	1.00									
DIRECTOR (AS OF 7/1/23)	0.00	Х						0.	0.	0.

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Part VII Section A. Officers, Directors, Tr	ES FUND FOR			anc	ı Li.	ahoc	+ 0	amponented Employee	13-1/6011	0 Page C
(A)	(B)	loy	ees,		<u>я пі</u> С)	gnes	i C	(D)	(continued)	(F)
Name and title	Average hours per week	box	not c	Pos heck i ss per	ition more rson i	than of the state	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) PHILIPPE GILBERT	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(19) NICOLE GILES	1.00									
DIRECTOR	0.00	Х				<u> </u>		0.	0.	0.
(20) CAROL J. HAMILTON	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(21) ANDREW HOHNS, PH.D.	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(22) TEA LEONI	2.00									
DIRECTOR	0.00	Х				<u> </u>		0.	0.	0.
(23) AARON MITCHELL	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(24) JOHN O'FARRELL	1.00									
DIRECTOR	0.00	Х				<u> </u>		0.	0.	0.
(25) HENRY SCHLEIFF	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(26) BERNARD TAYLOR	2.00									
DIRECTOR/VICE CHAIR	0.00	Х		Х				0.	0.	0.
1b Subtotal								5,264,152.	0.	451,588.
c Total from continuation sheets to Part	VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								5,264,152.	0.	451,588.

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

161

			162	INO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3_		Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization?  f "Yes." complete Schedule J for such person	5		Х
_				

#### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MARKETEAM, 600 NORTHPARK TOWN CENTER SUITE	2 seeding tient of cell vices	Componication
400, ATLANTA, GA 30328	DIRECT MAIL FUNDRAISING	20,557,351.
DELVE PARTNERS, LLC, 183 S TAYLOR AVE UNIT		
156, LOUISVILLE, CO 80027	ADVERTISING AND PROMOTION	17,573,293.
GOOGLE LLC, 1600 AMPHITHEATRE PKWY,		
MOUNTAIN VIEW, CA 94043	ADVERTISING	7,709,403.
META PLATFORMS, INC. (FORMERLY FACEBOOK)		
1601 WILLOW RD, MENLO PARK, CA 94025	ADVERTISING	2,913,406.
BLUE STATE DIGITAL, 62187 COLLECTIONS		
CENTER DRIVE, CHICAGO, IL 60693-0621	DIGITAL MARKETING SERVICES	1,960,608.
2 Total number of independent contractors (including but not limited	to those listed above) who received more than	
\$100,000 of compensation from the organization	59	
		000

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 UNITED STATES	S FUND FOR	UNI	CEF						13-17601	110
Part VII   Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd F	ligh	est (	Compensated Employe	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
	hours	(cl			that		ly)	compensation	compensation	amount of
	per week (list any hours for related	e or director	itee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related
	organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest comper	Former			organizations
(27) BRANNIGAN THOMPSON	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(28) JANET TRUNCALE	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(29) DAVID M. SABLE	1.00									
DIRECTOR (END 1/1/24)	0.00	Х						0.	0.	0.
(30) ELIZABETH (LIZ) SMITH	1.00									
DIRECTOR	0.00	х						0.	0.	0.
(31) EWOUT STEENBERGEN	2.00									
DIRECTOR / CHAIR	0.00	Х		х				0.	0.	0.
(32) KELLY WILSON	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(33) KEN GRABOYS	1.00									
DIRECTOR (AS OF 7/1/23)	0.00	Х						0.	0.	0.
(34) LATA N. REDDY	1.00									
DIRECTOR (AS OF 7/1/23)	0.00	Х						0.	0.	0.
(35) LAURA JONES	1.00									
DIRECTOR (AS OF 7/1/23)	0.00	Х						0.	0.	0.
Total to Part VII, Section A, line 1c										

13-1760110

Form 990 (2023) UNITED STAR

		Check if Schedule O contains a respons	se or note to any lin	e in this Part VIII			
			,,,,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SS	1 :	a Federated campaigns 1a	103,222.				
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b					
S S		c Fundraising events 1c	6,462,999.				
fts,		d Related organizations 1d	0,202,555				
ية إق							
ons,		e Government grants (contributions)  1e					
utic	1	f All other contributions, gifts, grants, and	709 110 502				
ĕ		similar amounts not included above 1f	708,119,592.				
ont		g Noncash contributions included in lines 1a-1f	190,456,874.	714 605 012			
O g		h Total. Add lines 1a-1f		714,685,813.			
			Business Code				
<u>ic</u> e	2		-				
erv		b	-				
n S	•	c	_				
ran 3ev	(	d	_				
Program Service Revenue	•	e	_				
Δ		f All other program service revenue					
	!	g Total. Add lines 2a-2f					
	3	Investment income (including dividends, into	erest, and				
		other similar amounts)		6,229,389.			6,229,389.
	4	Income from investment of tax-exempt bond					
	5	Royalties		454,894.			454,894.
		(i) Real	(ii) Personal				
	6	a Gross rents 6a					
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7 :	a Gross amount from sales of (i) Securities	s (ii) Other				
		assets other than inventory <b>7a</b> 17,856,45	2.				
	ı	<b>b</b> Less: cost or other basis					
ē		and sales expenses <b>7b</b> 16,730,28	1.				
her Revenue	,	<b>c</b> Gain or (loss) <b>7c</b> 1,126,17	1.				
Jev		d Net gain or (loss)		1,126,171.			1,126,171.
e		a Gross income from fundraising events (not					
G		including \$ 6,462,999. of					
		contributions reported on line 1c). See					
		' '	3,470,800.				
			3b 7,591,100.				
		c Net income or (loss) from fundraising events	•	-4,120,300.			-4,120,300.
		a Gross income from gaming activities. See		, ,			, ,
			9a				
		I	9b				
		c Net income or (loss) from gaming activities_	56				
		a Gross sales of inventory, less returns					
	10		0a				
		······	0b				
			OD				
$\dashv$		c Net income or (loss) from sales of inventory	Business Code				
ns	44 .	a PFP REVENUE	561499	950,000.			950,000.
eo ne		b MISC REVENUE	523999	734,986.			734,986.
llan			_				<del></del>
Miscellaneous Revenue		c GREETING CARDS SALES	- 511191	344,002.			344,002.
Ξ̈́		d All other revenue		2 028 008			
		e Total. Add lines 11a-11d		2,028,988.	^	0	5 710 142
	12	Total revenue. See instructions		720,404,955.	0.	0.	5,719,142.

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13-1760110

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

Do :	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	8b, 9b, 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	16,276,744.	16,276,744.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	555 004 065	555 004 065		
	individuals. See Part IV, lines 15 and 16	575,931,265.	575,931,265.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	2 520 546	540 150	0 740 310	455.050
	trustees, and key employees	3,739,516.	540,152.	2,742,312.	457,052
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	25 425 254		0.004.044	22 22 525
7	Other salaries and wages	37,135,371.	7,715,955.	9,031,911.	20,387,505
8	Pension plan accruals and contributions (include				4
	section 401(k) and 403(b) employer contributions)	2,486,049.	522,070.	745,815.	1,218,164
9	Other employee benefits	6,536,411.	1,770,059.	1,373,744.	3,392,608
10	Payroll taxes	2,673,234.	641,576.	695,041.	1,336,617
11	Fees for services (nonemployees):				
а	Management				
b	Legal	808,366.		808,366.	
С	Accounting	287,379.		287,379.	
d	Lobbying	603,919.		603,919.	
е	Professional fundraising services. See Part IV, line 17	24,057,093.			24,057,093
f	Investment management fees	182,129.		182,129.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	12,684,185.	5,043,211.	2,484,468.	5,156,506
12	Advertising and promotion	3,334,503.	3,334,323.	180.	
13	Office expenses				
14	Information technology	6,668,205.	2,148,862.	1,475,063.	3,044,280
15	Royalties				
16	Occupancy	818,328.	208,288.	228,003.	382,037
17	Travel	1,636,082.	663,286.	264,039.	708,757
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,228,318.	65,235.	925,569.	237,514
20	Interest	799,600.	220,956.	170,386.	408,258
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,945,030.	394,006.	252,179.	1,298,845
23	Insurance	444,629.	114,641.	117,828.	212,160
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 0.)				
а	OUTSIDE PRINTING/TELEMA	11,604,115.	299,016.	17,734.	11,287,365
b	POSTAGE AND SHIPPING	11,076,700.	48,369.	17,472.	11,010,859
c	SERVICE CHARGES	3,593,649.	2,328.	2,722.	3,588,599
d	DATA PROCESSING SERVICE	356,670.	39,424.	20,960.	296,286
	All other expenses	773,260.	744,718.	14,388.	14,154
25	Total functional expenses. Add lines 1 through 24e	727,680,750.	616,724,484.	22,461,607.	88,494,659
26	Joint costs. Complete this line only if the organization	.,,	,,	_,,_	, , = , = , = , = , = , = , = , = , = ,
_0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				
			ı		Form 990 (2022

## Form 990 (2023) Part X | Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any l	ine in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			43,611,431.	1	52,272,973.
	2	Savings and temporary cash investments			31,726,862.	2	32,938,385
	3	Pledges and grants receivable, net			125,173,923.	3	86,552,677
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current	t or former o	fficer, director,			
		trustee, key employee, creator or founder, su	bstantial co	ntributor, or 35%			
		controlled entity or family member of any of t	hese person	s		5	
	6	Loans and other receivables from other disqu	ualified perso	ons (as defined			
		under section 4958(f)(1)), and persons descri	bed in section	on 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
۲	9	Prepaid expenses and deferred charges			2,491,670.	9	3,859,177
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D		50,422,778.			
	b	Less: accumulated depreciation		25,437,326.	26,609,661.	10c	24,985,452
	11	Investments - publicly traded securities			54,967,406.	11	63,012,819
	12	Investments - other securities. See Part IV, lin			11,413,495.	12	11,563,552
	13	Investments - program-related. See Part IV, li				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must e			295,994,448.	16	275,185,035
	17	Accounts payable and accrued expenses			7,138,717.	17	9,061,808
	18	Grants payable	51,859,514.	18	44,258,472		
	19	Deferred revenue			27 725 102	19	26 000 017
	20	Tax-exempt bond liabilities			27,735,183.	20	26,000,917
	21	Escrow or custodial account liability. Comple				21	
es	22	Loans and other payables to any current or fo					
<u> </u>		trustee, key employee, creator or founder, su		·			
Liabilities		controlled entity or family member of any of t		·····		22	
_	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li	•	·	8,041,376.	O.E.	3,868,661
	26	of Schedule D  Total liabilities. Add lines 17 through 25			94,774,790.	25 26	83,189,858
	20	Organizations that follow FASB ASC 958, o	hock here	X	31,771,730,	20	03,103,030
Se		and complete lines 27, 28, 32, and 33.	JIICCK HEIC				
ü	27				19,459,915.	27	109,948,487
3ala	28				181,759,743.	28	82,046,690
ğ		Organizations that do not follow FASB ASG			, , , -		, ,
F.		and complete lines 29 through 33.	5 000, 01100				
ō	29	Capital stock or trust principal, or current fun	ds	ľ		29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated		Г		31	
Net Assets or Fund Balances	32				201,219,658.	32	191,995,177
z	33	Total liabilities and net assets/fund balances			295,994,448.	33	275,185,035

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	720	,404,	955.
2	Total expenses (must equal Part IX, column (A), line 25)	2	727	,680,	750.
3	Revenue less expenses. Subtract line 2 from line 1	3	-7	,275,	795.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	201	,219,	658.
5	Net unrealized gains (losses) on investments	5	6	,091,	946.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-8	,040,	632.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	191	,995,	177.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			_	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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	Х	
	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 X 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	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

**Employer identification number** 

UNITED STATES FUND FOR UNICEF 13-1760110 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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).) 3 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 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) 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 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. 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) 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 II, 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). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions)) Total

#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	568,044,094.	496,866,276.	1058998716.	825,202,943.	714,685,813.	3663797842.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	568,044,094.	496,866,276.	1058998716.	825,202,943.	714,685,813.	3663797842.
	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)						1337764975.
6	Public support. Subtract line 5 from line 4.						2326032867.
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	568,044,094.	496,866,276.	1058998716.	825,202,943.	714,685,813.	3663797842.
	Gross income from interest,	, , ,	, , ,		, , ,	, ,	
Ū	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2,411,125.	2,356,074.	2,292,872.	5,510,591.	6 684 283	19,254,945.
0	***	2,111,123.	2,330,071.	2,232,072.	3,310,331.	0,001,200.	15,251,515.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	1 902 993	572,141.	1,750,799.	949,565.	5 /00 788	10,665,176.
	assets (Explain in Part VI.)	1,892,883.	3/2,141.	1,730,733.	949,303.	5,499,788.	3693717963.
	<b>Total support.</b> Add lines 7 through 10		`			40	3093717903.
	Gross receipts from related activities,	,	,			12	
13	First 5 years. If the Form 990 is for the	•		•		. , . ,	
Sec	organization, check this box and stop ction C. Computation of Publi						
	Public support percentage for 2023 (I			olumn (fl)		14	62.97 %
						15	
	Public support percentage from 2022 33 1/3% support test - 2023. If the control of the control o						
10a		-					
<b>L</b>	stop here. The organization qualifies		•			or mare shook thi	·····
b	33 1/3% support test - 2022. If the condition have						
47-	and <b>stop here.</b> The organization qual						
1/a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact		•	-		•	
	meets the facts-and-circumstances te	-	· ·	*	-	7	
b	10% -facts-and-circumstances test	-					IU% Or
	more, and if the organization meets the						
40	organization meets the facts-and-circu		-				
18	Private foundation. If the organization	n ala not check a l	box on line 13, 16a	a, 160, 1/a, or 17b	o, cneck this box ai		(Form 990) 2023

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	Т	T	T	1	T	1
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)				-		
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	04(-)(0) - : ::	
14	First 5 years. If the Form 990 is for the	•		•	•		
Se	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (fl)		15	%
	Public support percentage from 2022	, (,,	,			16	<u>%</u> %
	ction D. Computation of Inves					, 10	70
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from					18	<u> </u>
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

332023 12-21-23

Schedule A (Form 990) 2023

Т.,

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **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.)

		Yes	No
	1		
	0		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		_
	5c		
	6		
	7		
	7		
	8		
	9a		
	9b		
	90		
	9c		
	10a		
	10b		
_	100	~ 000	

Pa	rt IV   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 on lines 11b and				
		la			
b	A family member of a person described on line 11a above?	b			
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide				
		lc			
Sec	tion B. Type I Supporting Organizations				
			Yes	No	
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		100	110	
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,				
	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 officers, directors, or trustees were allocated among the				
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,				
		2			
Sec	tion C. Type II Supporting Organizations				
			Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors				
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
	or management of the supporting organization was vested in the same persons that controlled or managed				
	the supported organization(s).	í			
Sec	tion D. All Type III Supporting Organizations				
		,	Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the				
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax				
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the				
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	ı			
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 on line 2, above, did the organization's supported organizations have a				
	significant voice in the organization's investment policies and in directing the use of the organization's				
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
	supported organizations played in this regard.	š			
Sec	tion E. Type III Functionally Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).				
а	The organization satisfied the Activities Test. Complete line 2 below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruc	tion <u>s</u>	;) <u> </u>		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify				
	those supported organizations and explain how these activities directly furthered their exempt purposes,				
	how the organization was responsive to those supported organizations, and how the organization determined				
	that these activities constituted substantially all of its activities.	а			
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in				
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in				
	these activities but for the organization's involvement.	o			
3	Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.	а			
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each				
	of its supported organizations? If "Vas " describe in Part VI the role played by the organization in this regard	ь			

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	Nov. 20, 1970 ( explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990) 2023

Par	t V Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations (continued)			
Secti	on D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish exer	mpt purposes	1			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported					
	organizations, in excess of income from activity		2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3			
4	Amounts paid to acquire exempt-use assets		4			
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5			
_6	Other distributions (describe in Part VI). See instructions.		6			
_7_	Total annual distributions. Add lines 1 through 6.		7			
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.		8			
9	Distributable amount for 2023 from Section C, line 6		9			
10	Line 8 amount divided by line 9 amount		10			
		(i)	(ii)	(iii)		
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023	Distributable Amount for 2023		
1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
_3_	Excess distributions carryover, if any, to 2023					
<u>a</u>	From 2018					
<u>b</u>	From 2019					
c	From 2020					
d	From 2021					
<u>e</u>	From 2022					
<u>f</u>	Total of lines 3a through 3e					
<u>g</u>	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2023 distributable amount					
<u>_i</u>	Carryover from 2018 not applied (see instructions)					
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
<u>a</u>	Applied to underdistributions of prior years					
<u>b</u>	Applied to 2023 distributable amount					
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
	and 4c.					
_8_	Breakdown of line 7:					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
<u>a</u>	Excess from 2022  Excess from 2023					

Schedule A (Form 990) 2023

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
SALES OF GREETING CARDS AND OTHER MISCELLANEOUS INCOME
2019 AMOUNT: \$ 1,892,883.
2020 AMOUNT: \$ 572,141.
2021 AMOUNT: \$ 1,750,799.
2022 AMOUNT: \$ 949,565.
2023 AMOUNT: \$ 5,499,788.

### Schedule B

(Form 990)

### **Schedule of Contributors**

OMB No. 1545-0047

**2023** 

Department of the Treasury Internal Revenue Service Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

Name of the organization

UNITED STATES FUND FOR UNICEF

Employer identification number

13-1760110

Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
•	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a)(1) a contributor, during	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).						

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Page **2** 

Name of organization

Employer identification number

UNITED STATES FUND FOR UNICEF

13-1760110

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$\$\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023) Page **3** 

Name of organization

Employer identification number

UNITED STATES FUND FOR UNICEF

13-1760110

Partii	Noticasti Property (see instructions). Use duplicate copies of Part	ii it additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	PHARMACEUTICALS	_	
2		_	
		\$\$	06/30/24
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		_	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		-	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	

Schedule B (Form 990) (2023)

Name of organization **Employer identification number** UNITED STATES FUND FOR UNICEF 13-1760110 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Page 4

#### SCHEDULE C (Form 990)

### Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 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 \_\_\_\_\_\_\$ \_\_\_\_ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 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 promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2023

	t II-A Complete if the org			nd for unicer	501(a)(3) and file		otion under
Part	section 501(h)).	jariizatior	i is exem	iipt under section		a Form 5700 (etc	ection under
A Ch		ation belongs	s to an affi	liated group (and list ir	Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and shar	re of excess	lobbying 6	expenditures).			
<b>B</b> Ch	neck if the filing organiza	ation checke	d box A ar	nd "limited control" pro	visions apply.		
	Limi	ts on Lobby	/ing Expe	•		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a 1	Total lobbying expenditures to influ	uence public	opinion (	grassroots lobbying)			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)							
С	Total lobbying expenditures (add li	nes 1a and	1b)				
	Other exempt purpose expenditure						
e T	Total exempt purpose expenditure			`			
f l	Lobbying nontaxable amount. Ente	er the amour	nt from the		ſ		
ſ	If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable am	ount is:		
	not over \$500,000,	` '		the amount on line 1e.			
	over \$500,000 but not over \$1,000	0.000.		00 plus 15% of the exc	ess over \$500.000.		
	over \$1,000,000 but not over \$1,500,000, \$175,000 plus 10% of the excess over \$1,000,000.						
	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.						
	Grassroots nontaxable amount (en	ter 25% of li	15		•		
_	Subtract line 1g from line 1a. If zer		,				
	Subtract line 1f from line 1c. If zero		•				
	If there is an amount other than ze	-			•		
-	reporting section 4911 tax for this	•		,			Yes No
				eraging Period Under			
	(Some organizations the	hat made a	section 50	01(h) election do not	have to complete all o	f the five columns b	elow.
				ate instructions for li			
			mig Exper	Tartares Barring + Tea	Averaging remod		
	Calendar year (or fiscal year beginning in)	(a) 20	020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) Total
<b>2</b> a l	Lobbying nontaxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	Total lobbying expenditures						
d (	Grassroots nontaxable amount						
	Grassroots ceiling amount (150% of line 2d, column (e))						
f(	Grassroots lobbying expenditures						

Schedule C (Form 990) 2023

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(6	(a)		o)
of the lobbying activity.	Yes	No	Amo	ount
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:				
a Volunteers?		Х		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х			
c Media advertisements?	X			5,000.
d Mailings to members, legislators, or the public?	Х			30,000.
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		Х		F06 276
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Х	х		506,376.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X	X		60 543
i Other activities?	_ A			62,543.
j Total. Add lines 1c through 1i		x		603,919.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		Δ		
b If "Yes," enter the amount of any tax incurred under section 4912				
c 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	n 501(c)(	5), or sec	tion	
501(c)(6).	)	3,, 0, 000	, cion	
			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 t Part III-B Complete if the organization is exempt under section 501(c)(4), section				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  1 Dues, assessments and similar amounts from members			II-A, line	3, IS
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)</li> </ul>				
expenses for which the section 527(f) tax was paid).	.ou.			
a Current year		2a		
b Carryover from last year				
c Total				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part II-	A, lines 1 a	nd 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.  PART II-B, LINE 1, LOBBYING ACTIVITIES:				
UUSA ELECTED TO REVOKE ITS 501(H) ELECTION IN MAY 2023 THEREFORE, THE				
REVOCATION IS EFFECTIVE FOR FY24. SCHEDULE C, PART II-B HAS BEEN				
ADJUSTED TO SUPPORT THIS CHANGE.				

Schedule C (Form 990) 2023

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

UNITED STATES FUND FOR UNICEF

**Employer identification number** 

13-1760110

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		Sim	ilar Funds or A	ccour	nts. Complete if the
	Giganization anomorou Teo Giri enii eee, i arriv, iir	(a) Donor advi	ised f	unds	<b>(b)</b> Fun	ids and other accounts
1	Total number at end of year	. ,				
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v		held i	n donor advised fun	ds	
	are the organization's property, subject to the organization's	~				Yes No
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor or					
	impermissible private benefit?					
Par	t II Conservation Easements. Complete if the org	ganization answered "\	Yes" d	on Form 990, Part IV	, line 7.	_
1	Purpose(s) of conservation easements held by the organization	on (check all that apply	/)			
	Preservation of land for public use (for example, recreated	tion or education)	P	reservation of a hist	orically	important land area
	Protection of natural habitat	L	P	reservation of a cert	ified his	storic structure
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contr	ributio	n in the form of a co	nserva	
	day of the tax year.					Held at the End of the Tax Year
а	Total number of conservation easements				2a	
b	Total acreage restricted by conservation easements				2b	
С	Number of conservation easements on a certified historic stru	ucture included on line	2a		2c	
d	Number of conservation easements included on line 2c acqui					
	on a historic structure listed in the National Register				2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	r tern	ninated by the organ	ization	during the tax
	year					
4	Number of states where property subject to conservation eas					
5	Does the organization have a written policy regarding the per					
	violations, and enforcement of the conservation easements it					Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations,	and e	enforcing conservation	on ease	ements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and	enfor	cing conservation ea	semen	ts during the year
_	<del></del>					
8	Does each conservation easement reported on line 2d above					
_	and section 170(h)(4)(B)(ii)?					Yes No
9	In Part XIII, describe how the organization reports conservation					
	balance sheet, and include, if applicable, the text of the footn	lote to the organization	n's tin	anciai statements th	at desc	cribes the
Par	organization's accounting for conservation easements.  t III   Organizations Maintaining Collections of	Art. Historical Ti	reas	ures, or Other S	imila	r Assets.
	Complete if the organization answered "Yes" on Form			,		
	If the organization elected, as permitted under FASB ASC 95		evenu	e statement and bal	ance sh	neet works
	of art, historical treasures, or other similar assets held for pub	•				
	service, provide in Part XIII the text of the footnote to its finan	•	•			
b	If the organization elected, as permitted under FASB ASC 95				e sheet	works of
	art, historical treasures, or other similar assets held for public					
	provide the following amounts relating to these items.	,				,
	(i) Revenue included on Form 990, Part VIII, line 1					\$
						\$
2	If the organization received or held works of art, historical trea					
_	the following amounts required to be reported under FASB A					
а	Revenue included on Form 990, Part VIII, line 1					\$
	Assets included in Form 990, Part X					\$

Schedule D (Form 990) 2023

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

Par	rt III   Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, or C	ther S	imilar Ass	ets (cont	inued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that ma	ake signi	ficant use of	its		
	collection items (check all that apply).								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's	exempt	purpose in F	art XIII.		
5	During the year, did the organization solicit or	r receive donations o	of art, historical treas	sures, or other s	imilar as	sets			
	to be sold to raise funds rather than to be ma						Yes		No
Par	Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or								
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an, or other intermed	liary for contribution	s or other asset	s not inc	luded			
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a								
	Amount								
С	Beginning balance					1c			
d Additions during the year 1d									
е	Distributions during the year					1e			
f	f Ending balance 1f								
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or cu	stodial account	: liability?		Yes	I	No
	If "Yes," explain the arrangement in Part XIII.							. Ш	
Par	rt V Endowment Funds Complete if			T .					
			• •	(c) Two years b		Three years b			
1a	Beginning of year balance	4,325,374.	4,285,604.	4,224,5	34.	4,162,32	29. 4	,152,32	
b	Contributions							10,00	
С	Net investment earnings, gains, and losses	53,927.	39,770.	61,0	70.	207,88	37.	27,24	17.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs					145,68	32.	27,24	7.
f	Administrative expenses	4 270 204	4 205 254	1 005 6		4 004 5		160.00	
g	End of year balance		4,325,374.		04.	4,224,53	34. 4	,162,32	19.
2	Provide the estimated percentage of the curr	ent year end balance		) held as:					
a	Board designated or quasi-endowment		_%						
b	Permanent endowment 100	%							
С		%							
_	The percentages on lines 2a, 2b, and 2c shou	•							
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held ar	id administered	for the			Yes N	
	organization by:						0-(1)		X
	(i) Unrelated organizations?						3a(i)	+ + -	<u>^</u> Х
		None Pakada a manda						<del>'                                     </del>	
D 4	If "Yes" on line 3a(ii), are the related organiza						<u>3b</u>		
Par	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		wment tunas.						
	Complete if the organization answered		Part IV line 11a S	ee Form 990 P	art X line	<u>-</u> 10			
	Description of property	(a) Cost or o	i	or other		umulated	(d) Po	ok voluo	
	Description of property	basis (investr		(other)		ciation	(u) 60	ok value	
12	Land	<u> </u>	,		25p.0				
b	Land Buildings		41	,779,450.	17	,880,657.	23	,898,79	<del></del>
	Leasehold improvements			104,325.		, , , , •		104,32	
d	Equipment			20,933.		18,432.		2,50	
	Other		8	,518,070.	7	,538,237.		979,83	
	I. Add lines 1a through 1e. (Column (d) must ea						24	,985,45	
	a a a a a . (Oolulliil (a) illust et	godin villi vvV, i alli	william too, coluitill	ب <i>رب</i>					

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 UNITED STATES FU	ND FOR UNICEF	1	L3-1760110	Page 3
Part VII Investments - Other Securities				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market	value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))				
Part IX Other Assets				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
(a)	Description		(b) Book	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 15, co.	(R))			
Part X Other Liabilities	· · · · · · · · · · · · · · · · · · ·		•	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 2	5.	
1. (a) Description of liability	,	, ,	(b) Book	value
(1) Federal income taxes				
(2) DUE TO AFFILIATE				728,058.
(3) LIABILITIES UNDER SPLIT INTEREST AGRE	EMENTS			140,603
(4)			†	, , , , , , ,
• •				
(5)				
(6)				
(7)				
(8)				

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

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

Schedule D (Form 990) 2023

3,868,661.

(9)

13-1760110

	t XI Reconciliation of Revenue per Audited Financial St	iatements with Revent	e per neturn	
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line			
Par	t XII Reconciliation of Expenses per Audited Financial S	Statements With Expen	ses per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments			
С	Other losses	_		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line			
Par	rt XIII Supplemental Information	•		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4; Part IV, lines 1b and 2b; F	Part V, line 4; Part X, line 2; Part XI	,
lines		and the state of t		
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	any additional information.		
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	any additional information.		
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	any additional information.		
PART	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	any additional information.		
	V, LINE 4:	·		
		·		
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THE	V, LINE 4:	T THE		
THE	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTMENT INCOME CAN BE USED FOR OPERATIONS TO SUPPORT THE	T THE		
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THE INVE	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTMENT INCOME CAN BE USED FOR OPERATIONS TO SUPPORT THE SION.	T THE CORGANIZATION'S CONSOLIDATED		
THE INVE	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTONS TO SUPPORT THE STON.  **X, LINE 2:  UNITED STATES FUND FOR UNICEF (UUSA) IS INCLUDED IN THE	T THE CORGANIZATION'S CONSOLIDATED		
THE INVE	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTONS TO SUPPORT THE STON.  **X, LINE 2:  UNITED STATES FUND FOR UNICEF (UUSA) IS INCLUDED IN THE	T THE CORGANIZATION'S CONSOLIDATED AFFILIATES		
THE INVE MISS PART THE FINA (USF	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTMENT INCOME CAN BE USED FOR OPERATIONS TO SUPPORT THE SION.  EXAMPLE AND STATES FUND FOR UNICEF (UUSA) IS INCLUDED IN THE UNCIAL STATEMENTS FOR UNITED STATES FUND FOR UNICEF AND ST	T THE CORGANIZATION'S CONSOLIDATED AFFILIATES		
THE INVE MISS PART THE FINA (USF	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTMENT INCOME CAN BE USED FOR OPERATIONS TO SUPPORT THE SION.  **X, LINE 2:  UNITED STATES FUND FOR UNICEF (UUSA) IS INCLUDED IN THE INCIAL STATEMENTS FOR UNITED STATES FUND FOR UNICEF AND	T THE CORGANIZATION'S CONSOLIDATED AFFILIATES		
THE INVE MISS PART THE FINA (USF	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTMENT INCOME CAN BE USED FOR OPERATIONS TO SUPPORT THE SION.  EXAMPLE AND STATES FUND FOR UNICEF (UUSA) IS INCLUDED IN THE UNCIAL STATEMENTS FOR UNITED STATES FUND FOR UNICEF AND ST	T THE CORGANIZATION'S CONSOLIDATED AFFILIATES		
THE INVE MISS PART THE FINA (USF	PRINCIPAL OF THE ENDOWMENT IS PERMANENTLY RESTRICTED BUSTMENT INCOME CAN BE USED FOR OPERATIONS TO SUPPORT THE SION.  EXAMPLE AND STATES FUND FOR UNICEF (UUSA) IS INCLUDED IN THE UNCIAL STATEMENTS FOR UNITED STATES FUND FOR UNICEF AND ST	T THE CORGANIZATION'S CONSOLIDATED AFFILIATES CIAL STATEMENTS		

## 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. Attach to Form 990.

**Open to Public** 

Department of the Treasury Internal Revenue Service

 $\begin{tabular}{lll} \textbf{Go to} & \textit{www.irs.gov/Form990} & \textbf{for instructions and the latest information.} \end{tabular}$ 

Inspection

Name of the organization **Employer identification number** UNITED STATES FUND FOR UNICEF 13-1760110

Part I General Infor	rmation on A	ctivities Out	side the United States. Complet	te if the organization answered	"Yes" on		
Form 990, Part I\	/, line 14b.				_		
1 For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gran				
the grantees' eligibility for	or the grants or a	assistance, and t	the selection criteria used to award the g	grants or assistance? X	Yes No		
O Fau avantmakara Dooo	wiba in Dort V the	ovacnization's	proceedures for monitoring the use of its	avente and ather assistance out	roide the		
2 For grantmakers. Desc United States.	ribe in Part V trie	e organization s	procedures for monitoring the use of its	grants and other assistance out	iside trie		
3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)							
(a) Region	(b) Number of			(e) If activity listed in (d)	(f) Total		
(a) negion	offices	employees,	(by type) (such as, fundraising, pro-	is a program service,	expenditures		
	in the region	agents, and independent	gram services, investments, grants to	describe specific type	for and investments		
		contractors in the region	recipients located in the region)	of service(s) in the region	in the region		
		in the region					
CENTRAL AMERICA AND							
THE CARIBBEAN	0	0	GRANT MAKING		13,063,988.		
EAST ASIA AND THE							
PACIFIC	0	0	GRANT MAKING		31,076,551.		
EUROPE (INCLUDING							
ICELAND AND							
GREENLAND)	0	0	GRANT MAKING		19,875,625.		
MIDDLE EAST AND							
NORTH AFRICA	0	0	GRANT MAKING		91,817,176.		
NORTH AMERICA	0	0	GRANT MAKING		1,982,290.		
	•				1,302,230.		
RUSSIA AND							
NEIGHBORING STATES	0	0	GRANT MAKING		48,858,533.		
SOUTH AMERICA	0	0	GRANT MAKING		14 415 253		
SOUTH AMERICA	-	0	GRANI MARING		14,415,253.		
SOUTH ASIA	0	0	GRANT MAKING		104,296,435.		
3 a Subtotal	0	0			325,385,851.		
<b>b</b> Total from continuation							
sheets to Part I	0	0			250,545,414.		
c Totals (add lines 3a	0	0			575,931,265.		
and 3b)	1				Ψ / J , J J I , Z U J .		

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

Schedule F (Form 990) 2023

		- (Schedule F (Form 990), Part I, line 3		
(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
0	0	GRANT MAKING		250,545,414.
				250,545,414.
	offices in the region	offices employees or agents in region	offices employees or agents in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	offices employees or in the region agents in region recipients located in the region is a program service, describe specific type of service(s) in region

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

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
							PHARMACEUTICALS,	
							CLOTHING,	
		CENTRAL AMERICA					FREIGHT, AND	
		AND THE CARIBBEAN	SEE PART V	12,387,929.	WIRES	676,059.	OTHER SERVICES	FMV
							PHARMACEUTICALS,	
							CLOTHING,	
		EAST ASIA AND THE					FREIGHT, AND	
		PACIFIC	SEE PART V	31,047,931.	WIRES	0.	OTHER SERVICES	FMV
							PHARMACEUTICALS,	
		EUROPE (INCLUDING					CLOTHING,	
		ICELAND AND					FREIGHT, AND	
		GREENLAND)	SEE PART V	13,404,638.	WIRES	314,699.	OTHER SERVICES	FMV
						-	PHARMACEUTICALS,	
							CLOTHING,	
		MIDDLE EAST AND					FREIGHT, AND	
		NORTH AFRICA	SEE PART V	90,895,813.	WIRES	921,363.	OTHER SERVICES	FMV
							PHARMACEUTICALS,	
							CLOTHING,	
							FREIGHT, AND	
		NORTH AMERICA	SEE PART V	1,982,290.	WIRES	0.	OTHER SERVICES	FMV
							PHARMACEUTICALS,	
		RUSSIA AND					CLOTHING,	
		NEIGHBORING					FREIGHT, AND	
		STATES	SEE PART V	48,858,533.	WIRES	0.	OTHER SERVICES	FMV
							PHARMACEUTICALS,	
							CLOTHING,	
							FREIGHT, AND	
		SOUTH AMERICA	SEE PART V	13,965,253.	WIRES	0.	OTHER SERVICES	FMV
							PHARMACEUTICALS,	
							CLOTHING,	
							FREIGHT, AND	
		SOUTH ASIA	SEE PART V	102,331,012.	WIRES	1,933,224.	OTHER SERVICES	FMV

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

28

3 Enter total number of other organizations or entities

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
							PHARMACEUTICALS,	
							CLOTHING,	
		SUB-SAHARAN					FREIGHT, AND	
		AFRICA	SEE PART V	85,311,187.	WIRES	165,077,627.	OTHER SERVICES	FMV
		SOUTH AMERICA	SEE PART V	450,000.	WIRES	0.		FMV
		SOUTH ASIA	SEE PART V	9,430.	MIDEC	0.		FMV
		BOOTH ASIA	SEE FART V	9,430.	WIKES	0.		FHV
		SUB-SAHARAN						
		AFRICA	SEE PART V	40,000.	WIRES	0.		FMV
				45.000				
		SOUTH ASIA	SEE PART V	15,000.	WIRES	0.		FMV
		SUB-SAHARAN						
			SEE PART V	55,000.	WIRES	0.		FMV
				,				
		SUB-SAHARAN						
		AFRICA	SEE PART V	30,500.	WIRES	0.		FMV
		TUDODE / TNGL HETYS						
		EUROPE (INCLUDING						
		ICELAND AND GREENLAND)	SEE PART V	309,711.	WIRES	0.		FMV
		PREDICTION /		305,711.		· ·		
		EUROPE (INCLUDING						
		ICELAND AND						
		GREENLAND)	SEE PART V	47,500.	WIRES	0.		FMV

Part II Contin	uation of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)	
1 (a) Name of orgar	nization (b) IRS code section and EIN (if applicable)	I (c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING						
		GREENLAND)	SEE PART V	517,960.	WIRES	0.		FMV
		SUB-SAHARAN AFRICA	SEE PART V	15,000.	WIRES	0.		FMV
		SOUTH ASIA	SEE PART V	7,769.	WIRES	0.		FMV
		EAST ASIA AND THE	SEE PART V	28,620.	WIRES	0.		FMV
		EUROPE (INCLUDING						
		GREENLAND)	SEE PART V	25,000.	WIRES	0.		FMV
		EUROPE (INCLUDING ICELAND AND GREENLAND)	SEE PART V	5,025,867.	WIRES	0.		FMV
		EUROPE (INCLUDING ICELAND AND GREENLAND)	SEE PART V	66,500.		0.		FMV
		EUROPE (INCLUDING ICELAND AND GREENLAND)	SEE PART V	68,750.	WIRES	0.		FMV
		EUROPE (INCLUDING	SEE PART V	50,000.		0.		FMV

UNITED STATES FUND FOR UNICEF

Schedule F (Form 990) 2023	UNITED STATES FUND	FOR UNICEF		:	13-1760110		Page 3
Part III Grants and Other Assistan	ce to Individuals Outsid	le the United Sta	ates. Complete	if the organization answered "Yes"	on Form 990, Part	IV, line 16.	
Part III can be duplicated if	additional space is neede	ed.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			<u> </u>	l .			<u> </u>

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 the Instructions for Form 926)	Yes	X 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X 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 the Instructions for Form 5471)	Yes	X 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 the Instructions for Form 8621)	Yes	X 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 the Instructions for Form 8865)	Yes	X 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 the Instructions for Form 5713; don't file with Form 990)	Yes	X No

# UNITED STATES FUND FOR UNICEF 13-1760110 Schedule F (Form 990) 2023 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. PART I, LINE 2: THE UNITED STATES FUND FOR UNICEF MONITORS GRANTS BY REQUIRING THE GRANTEE, PRIMARILY UNICEF, TO SUBMIT TO IT QUALITATIVE AND QUANTITATIVE REPORTS AND MILESTONES AS DEFINED IN THE GRANT AGREEMENT AND BY REVIEWING SUCH REPORTS. GRANTEES (PRIMARILY UNICEF COUNTRY OFFICES) ARE RESPONSIBLE FOR ENSURING THAT PROJECTS ARE EXECUTED IN ACCORDANCE WITH DEFINED TIMELINES AND MILESTONES AS SET FORTH IN THE GRANT. IN CERTAIN SITUATIONS, PROGRAM VISITS ARE MADE TO ASCERTAIN PROGRESS AND DEEPEN IMPACT. ADDITIONALLY, GRANTEES ARE HELD TO ACCOUNT FOR THE FUNDING AND THE CORRESPONDING BUDGET. IN THE CASE OF CERTAIN PROGRAMS LIKE THE COUNTDOWN TO 2030 AND OTHER SIMILAR PROGRAMS, AN ANNUAL MEETING OF THE GRANTEES IS HELD TO ASCERTAIN THAT THE PROGRAM AND PROJECTS ARE EXECUTED IN ACCORDANCE WITH DEFINED TIMELINES AND MILESTONES. PART II, COLUMN (D): PURPOSE OF GRANTS: UNICEF WORKS IN OVER 190 COUNTRIES AND TERRITORIES TO SAVE CHILDREN'S LIVES, DEFEND THEIR RIGHTS AND HELP THEM REACH THEIR FULL POTENTIAL FROM EARLY CHILDHOOD THROUGH ADOLESCENCE.

### SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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

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

2023

Open to Public Inspection

Name of the organization **Employer identification number** UNITED STATES FUND FOR UNICEF 13-1760110 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations X Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser organization contributions' listed in col. (i) MARKETEAM - 600 NORTHPARK Yes No TOWN CENTER, 1200 ABERNATHY DIRECT MAIL FUNDRAISING Х 50,355,453 21,243,434 29,112,019. BLUE STATE DIGITAL - 62187 INTERNET AND E-MAIL COLLECTIONS CENTER DRIVE MARKETING Х 7,931,147 2,137,350 5,793,797. COPPER REEF ENTERPRISES DBA PLUS DELTA - 6965 EL CAMINO MAJOR GIFT FUNDRAISING Х 0 244,918 -244,918. COMMUNITY COUNSELLING SERVICE CO., LLC (CCS) - 527 MADISON SEE PART IV Х 0 431 391 -431,391. 58,286,600. 24,057,093, 34 229 507. Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO MS, MT, NC, ND, NE, NH, NJ, NM, NV, NY, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI WV WY

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

Schedule G (Form 990) 2023

SEE PART IV FOR CONTINUATIONS

Pa	rt I	<b>Fundraising Events.</b> Complete if the of fundraising event contributions and ground fundraising event contributions and ground fundraising event contributions.				
		3	(a) Event #1	(b) Event #2	(c) Other events	T
				HEART STRINGS		(d) Total events (add col. (a) through
			UNICEF GALA	PUBLIC RUN (ATLAN	4	
a)			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts	3,625,778.	906,378.	5,401,643.	9,933,799.
_	2	Less: Contributions	3,323,378.	360,378.	2,779,243.	6,462,999.
_	3	Gross income (line 1 minus line 2)	302,400.	546,000.	2,622,400.	3,470,800.
	4	Cash prizes				
Se	5	Noncash prizes				
shense	6	Rent/facility costs	568,532.	463,344.	2,958,805.	3,990,681.
Direct Expenses	7	Food and beverages	438,433.	159,493.	626,601.	1,224,527.
	8	Entertainment	20,310.	2,075.	9,797.	32,182.
	9	Other direct expenses	1		2,146,151.	
	10	Direct expense summary. Add lines 4 through	0 :   (- )			7,591,100.
	11		ne 3, column (d)			-4,120,300.
Pa	rt I		answered "Yes" on Form	n 990, Part IV, line 19, or r	eported more than	
_		\$15,000 on Form 990-EZ, line 6a.	T	T		T
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes%		Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
_						
а	ls t	ter the state(s) in which the organization conducted the organization licensed to conduct gaming actions.	ctivities in each of these	states?		Yes No
b	If "	No," explain:				
		ere any of the organization's gaming licenses re Yes," explain:			ear?	Yes No
		)-13-23			Sche	dule G (Form 990) 2023

Schedule G (Form 990) 2023 UNITED STATES FUND FOR UNICEF	T3-T/601	LIU	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?		Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:			
a The organization's facility	13	а	%
<b>b</b> An outside facility	131	b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	rds:		
Name			
Address			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization \$ and the a of gaming revenue retained by the third party \$	mount		
c If "Yes," enter name and address of the third party:			
Name			
Address			
16 Gaming manager information:			
Name			
Gaming manager compensation \$			
Description of services provided			
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state gaming license?		Yes	☐ No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spen	t in the		
organization's own exempt activities during the tax year \$			
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (	v); and Part III, I	lines 9, 9	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
(I) NAME OF FUNDRAISER: MARKETEAM			
(I) ADDRESS OF FUNDRAISER:			
600 NORTHPARK TOWN CENTER, 1200 ABERNATHY RD NE, STE 400, ATLANTA, GA 3032			
(I) NAME OF FUNDRAISER: BLUE STATE DIGITAL			
(I) ADDRESS OF FUNDRAISER:			
62187 COLLECTIONS CENTER DRIVE CHICAGO IL 60693-0621			

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization  UNITED STATES	FUND FOR UNIO	EF					13-1760110
Part I General Information on Grants an							_
Does the organization maintain records to criteria used to award the grants or assist     Describe in Part IV the organization's product.	tance?						
Part II Grants and Other Assistance to Description recipient that received more than \$	_				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CHILDREN OF PERSIA PO BOX 2602	F2 222670F	E01/G)/2)	41 124	0			FUNDS WILL BE USED TO EMPOWER ESTABLISHED HOME CARE PROGRAMS TO
MONTGOMERY VILLAGE, MD 20886  COLORADO NONPROFIT DEVELOPMENT  CENTER (CNDC) - 515 POST OAK  BLVD., STE 1000 - HOUSTON, TX	52-2236795	501(C)(3)	41,124.	0.			TRANSFORM THE LIVES OF  FUNDS WILL BE USED FOR  THE CHILD FRIENDLY CITY
77027  ISRAAID (US) GLOBAL HUMANITARIAN	84-1493585	501(C)(3)	7,500.	0.			INITIATIVE (CFCI).  FUNDS WILL BE USED TO  PROVIDE MENTAL HEALTH AND
ASSISTANCE, INC 3910 KESWICK RD S BLDG - BALTIMORE, MD 21211	46-2118225	501(C)(3)	250,000.	0.			RESILIENCE SUPPORT SERVICES TO CHILDREN IN FUNDS WILL BE USED TO
JOHN HOPKINS UNIVERSITY 615 N. WOLFE STREET W1100 BALTIMORE, MD 21205-2178	52-0595110	501(C)(3)	179,400.	0.			DEVELOP A VIABLE APPROACH TO GENERATING TIMELY MORTALITY DATA USING
JOHN HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH - 615 N. WOLFE STREET W1100 - BALTIMORE, MD			405 050				FUNDS WILL BE USED BY THE SPECIAL OLYMPICS COMMITTEE FOR PROGRAM
JOHNS HOPKINS BLOOMBERG SCHOOL 615 N. WOLFE STREET W1100	52-0595110		425,358.	0.			FUNDS WILL BE USED TO PUBLISH A COMPREHENSIVE ANALYSIS OF MORTALITY
2 Enter total number of section 501(c)(3) an	•	ganizations listed in the					
3 Enter total number of other organizations	listed in the line	l table					0.

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

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
NEW YORK UNIVERSITY 665 BROADWAY, SUITE 801 NEW YORK, NY 10012	13-5562308	501(C)(3)	111,400.	0.			FUNDS WILL BE USED TO DEVELOP A VIABLE APPROACH TO GENERATING TIMELY MORTALITY DATA USING	
GREATER HOUSTON COMMUNITY FOUNDATION - 515 POST OAK BLVD., STE 1000 - HOUSTON, TX 77027	23-7160400	501(C)(3)	23,750.	0.			FUNDS WILL BE USED FOR THE CHILD FRIENDLY CITIES INITIATIVE UNITED STATES.	
UNICEF USA IMPACT FUND FOR CHILDREN - 125 MAIDEN LANE 10 FL - NEW YORK, NY 10038	20-3287404	501(C)(3)	15,128,212.	0.			THE UNICEF USA IMPACT FUND FOR CHILDREN EXISTS TO DEVELOP AND IMPLEMENT FINANCIAL SOLUTIONS TO	
							Oak add L (Farm 000)	

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance					
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.						
PART I, LINE 2:										
THE US FUND FOR UNICEF MONITORS THE GRANTS BY REQU	IRING THE GRA	NTEES TO								
SUBMIT TO IT ANNUAL AND MORE FREQUENT PROGRESS REPO	ORTS AND BY R	REVIEWING								
SUCH REPORTS. GRANTEES ARE HELD TO ACCOUNT AND ARE	RESPONSIBLE	FOR ENSURING								
THAT PROJECTS ARE EXECUTED IN ACCORDANCE WITH APPLICABLE GUIDELINES AND										
MILESTONES. ADDITIONALLY, GRANTEES ARE HELD TO ACCO	MILESTONES. ADDITIONALLY, GRANTEES ARE HELD TO ACCOUNT FOR THE FUNDING AND									
THE CORRESPONDING BUDGET.										

PART II, LINE 1, COLUMN (H):

Schedule I (Form 990)

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDS WILL BE USED TO DEVELOP A

# SCHEDULE J (Form 990)

**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.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED STATES FUND FOR UNICEF

Employer identification number 13-1760110

Pa	art I 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.			
	X Compensation committee Written employment contract			
	Independent compensation consultant  I Compensation survey or study			
	X Form 990 of other organizations X 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		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X	
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	_5a		X
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:	0-		v
	The organization?	6a		X
b	Any related organization?	6b		Λ
_	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	-	Х	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Λ	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Λ
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	a		
	Bennannos secuno 53 4958-NCD		i .	

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

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MICHAEL J. NYENHUIS	(i)	647,240.	109,792.	124,550.	44,108.	3,368.	929,058.	100,000.
DIRECTOR/PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CRISTINA SHAPIRO-ALSTER	(i)	413,657.	49,700.	0.	34,183.	10,163.	507,703.	0.
CHIEF STRATEGY OFF. & PRES. OF IF4C	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RENEE CUTTING	(i)	459,995.	0.	731.	29,961.	11,621.	502,308.	0.
CHIEF PHILATHROPY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JESSICA LEINWAND	(i)	410,401.	5,000.	0.	23,242.	7,908.	446,551.	0.
CHIEF LEGAL OFFICER & GENERAL COUNSE	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MICHELE WALSH	(i)	384,989.	5,000.	8,837.	28,740.	9,466.	437,032.	0.
EVP & CHIEF PHILANTHROPY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SHELLEY EFFMAN	(i)	337,106.	0.	0.	27,184.	14,660.	378,950.	0.
CHIEF MARKETING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MICHAEL KLOMPUS	(i)	327,184.	5,000.	0.	25,061.	13,974.	371,219.	0.
CHIEF PEOPLE & OPERATIONS OFFICERS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DARLA SILVA	(i)	299,044.	0.	22,500.	29,683.	8,314.	359,541.	0.
CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MICHAEL S CHEN	(i)	332,892.	0.	0.	0.	8,953.	341,845.	0.
CFO/TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) KATHLEEN MCDONNELL	(i)	303,222.	0.	0.	0.	1,516.	304,738.	0.
SENIOR VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) HELENE L VALLONE-RAFFAELE	(i)	242,800.	5,000.	15,826.	23,634.	8,908.	296,168.	0.
VP - DONOR STRATEGY & EXPERIENCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) SHANNON CONGEMI	(i)	261,187.	0.	4,337.	20,212.	5,858.	291,594.	0.
VP - TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) KRISTAN BURNHAM	(i)	226,411.	0.	22,500.	21,686.	10,102.	280,699.	0.
VP - EMPLOYEE ENGAGEMENT & DEVELOPME	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) LESLIE GOLDMAN	(i)	216,751.	0.	22,500.	21,919.	7,164.	268,334.	0.
VP - GLOBAL CAUSE PARTNERSHIP	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

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

PART I, LINE 3:

THE COMPENSATION AND HUMAN RESOURCES COMMITTEE OF THE BOARD OF DIRECTORS

HAS THE RESPONSIBILITY TO RECOMMEND AND SERVE AS A RESOURCE WITH RESPECT TO

THE NATURE AND AMOUNT OF COMPENSATION TO BE INCLUDED IN THE CEO'S CONTRACT.

SUBJECT TO APPROVAL BY THE BOARD. DURING THE CONTRACT PROCESS. A

COMPARABILITY STUDY (THE "STUDY") IS CONDUCTED BY AN OUTSIDE EMPLOYEE

COMPENSATION AND BENEFITS FIRM WHICH TAKES INTO CONSIDERATION OTHER DIRECT

PEER FUNDRAISING, ADVOCACY, AND RELIEF ORGANIZATIONS IN DETERMINING THE

TOTAL COMPENSATION OF THE CEO TO INCLUDE SALARY, BENEFITS, AND INCENTIVES

AS APPROPRIATE. ALSO, ON AN ANNUAL BASIS, A REVIEW OF THE CEO'S PERFORMANCE

IS CONDUCTED UNDER A SIMILAR COMPARABLE PROCESS.

PART I LINE 4B:

PER MICHAEL J. NYENHUIS BOARD APPROVED EMPLOYMENT CONTRACT THERE WAS A

DEFERRED COMPENSATION AGREEMENT FOR A 457(F) IN THE AMOUNT OF \$116,599.69

PAID ON AUGUST 25, 2023.

PART I, LINE 7:

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
MICHAEL J. NYENHUIS RECEIVED A BONUS PAYMENT WHICH WAS APPROVED BY THE
BOARD AND PURSUANT TO A SIGNED CONTRACT. OTHER INDIVIDUALS LISTED ON
SCHEDULE J RECEIVED BONUS PAYMENTS BASED ON MERIT OR COST OF LIVING
ADJUSTMENTS.

#### SCHEDULE K (Form 990)

Part I

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.

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

(d) Date issued

(e) Issue price

2023 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

**Bond Issues** 

(a) Issuer name

UNITED STATES FUND FOR UNICEF

(b) Issuer EIN

(c) CUSIP#

Employer identification number 13-1760110

(g) Defeased (h) On behalf (i) Pooled

(f) Description of purpose

.,					•	''		,		of is	suer	finan	cing
								Yes	No	Yes	No	Yes	N
BUILD NYC RESOURCE CORPORATION						REFINANCE NY	CIDA 2007A &						_
A SERIES 2016	45-4040561	00000000	09/22/16	39,1	00,000.	2007B BONDS			Х		X		Х
													ı
В													
													ı
<u>C</u>													
													i
D													
Part II Proceeds													
			A			В	С				D		
1 Amount of bonds retired			12	,560,802.									
2 Amount of bonds legally defeased													
3 Total proceeds of issue			39	,100,000.									
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds													
6 Proceeds in refunding escrows													
7 Issuance costs from proceeds				591,000.									
9 Working capital expenditures from proceed	s												
10 Capital expenditures from proceeds			38	,509,000.									
11 Other spent proceeds													
12 Other unspent proceeds													
13 Year of substantial completion				2016			1						
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a refundir		• •											
if issued prior to 2018, a current refunding in			Х										
15 Were the bonds issued as part of a refundir													
issued prior to 2018, an advance refunding				X							_		
16 Has the final allocation of proceeds been m			Х						$\perp$		+		
17 Does the organization maintain adequate be		* *											
final allocation of proceeds?			Х										

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

Schedule K (Form 990) 2023 UNITED STATES FUND FOR UNICEF 13-1760110 Page 2

Pan	Till Private Business Ose								
			A	I	3		Ç		)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		Х						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		Х						
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?	Х							
b	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?	Х							
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		Х						
d	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?								
4	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		%		%		%		%
5	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		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		Х						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		Х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
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?	Х							
Part	t IV Arbitrage								
			A	ı	3		Ç		)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Х						
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?		Х						
b	Exception to rebate?	Х							
С	No rebate due?		Х						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed								T
3	Is the bond issue a variable rate issue?		Х						

Schedule K (Form 990) 2023 UNITED STATES FUND FOR UNICEF 13-1760110 Page 3

Part IV Arbitrage (continued)								
		A	E	3		С	Г	D
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						
<b>b</b> Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	Х							
Part V Procedures To Undertake Corrective Action			_					
		A	E	3		Ç	Г	<u> </u>
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	X							
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instr	uctions.					
PART IV, LINE 2B:								
THE SERIES 2016 BOND MET THE 6-MONTH SPENDING EXCEPTION, AS ALL BOND								
PROCEEDS WERE EXPENDED FOR THE PURPOSE OF THE BOND WITHIN THE FIRST SIX								
MONTHS AFTER THE ISSUE DATE, THEREFORE NO REBATE IS DUE.								

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

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public

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

Inspection Employer identification number

13-1760110

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles	Х	175	187,524.	FAIR VALUE			
7	Boats and planes			·				
8	Intellectual property							
9	Securities - Publicly traded	Х	400	15,323,820.	FAIR VALUE			
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	Х	3	164,088,788.	FAIR VALUE			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (ADVERTISING )	Х	2	6,022,556.	FAIR VALUE			
26	Other (FREIGHT FOR EME )	X	2	4,638,435.	FAIR VALUE			
27	Other ( NUTRITIONAL SUP )	Х	1	195,750.	FAIR VALUE			
28	Other ( )							
29	Number of Forms 8283 received by the organization	ation during	the tax year for co	ontributions				
	for which the organization completed Form 828	3, Part V, D	onee Acknowledg	ement <b>29</b>			0	
							Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of the	he initial co	ntribution, and whi	ch isn't required to be used	for			
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance po	olicy that re	quires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties o	r related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,			
	describe in Part II.							

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

# SCHEDULE O (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047

2023
Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

UNITED STATES FUND FOR UNICEF

Inspection
Employer identification number
13-1760110

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE ORGANIZATION'S MISSION IS TO RELENTLESSLY PURSUE A BETTER WORLD FOR
EVERY CHILD. UNICEF USA ADVANCES THE GLOBAL MISSION OF UNICEF BY
RALLYING THE AMERICAN PUBLIC TO SUPPORT THE WORLD'S MOST VULNERABLE
CHILDREN. THROUGH FUNDRAISING, ADVOCACY AND EDUCATION IN THE UNITED
STATES, THAT DELIVER THE ESSENTIALS THAT GIVE EVERY CHILD A BETTER
CHANCE IN LIFE, INCLUDING: HEALTH-CARE AND IMMUNIZATIONS, SAFE WATER
AND SANITATION, NUTRITION, AND EDUCATION. TOGETHER, WE ARE WORKING
TOWARD A WORLD THAT UPHOLDS THE RIGHTS OF ALL CHILDREN AND HELPS EVERY
CHILD THRIVE.
CHILD THRIVE.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
PUBLIC INFORMATION: UUSA HAS RALLIED THE AMERICAN PUBLIC TO SUPPORT THE
WORLD'S MOST VULNERABLE CHILDREN, REACHING HUNDREDS OF THOUSANDS OF
SUPPORTERS THROUGH ISSUE-ORIENTED VIDEOS, TELEVISION AND PUBLIC RADIO
SERVICE ANNOUNCEMENTS, A VARIETY OF PRESS AND PUBLICATIONS, THE
INTERNET VIA OUR WEBSITE (WWW.UNICEFUSA.ORG) AND OTHER MOBILE AND
SOCIAL PLATFORMS. UUSA WORKS RELENTLESSLY TO EDUCATE THE PUBLIC ABOUT
THE CHALLENGES FACING THE WORLD'S CHILDREN. THIS YEAR, CHILDREN AND
ADULTS ADDED MEANING TO THEIR HALLOWEEN-ING BY SUPPORTING OUR TRADEMARK
FUNDRAISER, TRICK-OR-TREAT FOR UNICEF. COMPANIES AND INDIVIDUALS WERE
INFORMED ABOUT THE WORK OF UNICEF AND UUSA THROUGH IN-PERSON GALAS, OUR
"NO TIME TO WAIT" SERIES, PROGRAM VISITS AND HEART STRINGS EXPERIENCE.
TOGETHER, UUSA AND ITS SUPPORTERS WERE ABLE TO HARNESS A COLLECTIVE,
CLORAL VOICE TO IMPROVE THE LIVES OF CHILDREN

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

Schedule O (Form 990) 2023 Page **2** 

Name of the organization  UNITED STATES FUND FOR UNICEF	Employer identification number
FORM 990, PART VI, SECTION A, LINE 1A:	
THE BOARD HAS DELEGATED THE AUTHORITY TO AN EXECUTIVE COMMITTEE TO ACT ON	
BEHALF OF THE BOARD BETWEEN MEETINGS OF THE BOARD OF DIRECTORS. THE	
EXECUTIVE COMMITTEE CONSISTS OF THE CHAIR, THE VICE CHAIR, THE SECRETARY,	
THE PRESIDENT, THE CHAIRS OF THE STANDING COMMITTEES (INCLUDING THE CHAIR	
OF THE EXECUTIVE COMMITTEE, PRESIDENT AND CEO), AND THE CHAIRS OF THE	
PHILANTHROPY AND MARKETING COMMITTEE AND PROGRAM AND ADVOCACY COMMITTEE. IN	
THE EVENT THAT ANY OF THE NAMED COMMITTEES HAVE CO-CHAIRS, THE CO-CHAIRS OF	
SUCH COMMITTEES 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 CHIEF	
FINANCIAL OFFICER, CHIEF PEOPLE OFFICER, CHIEF LEGAL OFFICER, AND EXTERNAL	
COUNSEL, AS WELL AS UUSA'S PRESIDENT AND CEO. UUSA'S PRESIDENT AND CEO AND	
CFO AND CONTROLLER REVIEWS THE RETURN WITH THE CHAIR OF THE AUDIT	
COMMITTEE. THE CHAIR THEN PRESENTS THE RETURN TO THE AUDIT COMMITTEE FOR	
REVIEW. AFTER THIS REVIEW IS COMPLETE, THE RETURN IS SHARED WITH THE	
MEMBERS OF THE BOARD PRIOR TO FILING FOR REFERENCE ONLY. THE RETURN IS	
FILED ELECTRONICALLY WITH THE CHIEF FINANCIAL OFFICER SIGNING THE RETURN.	

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization **Employer identification number** UNITED STATES FUND FOR UNICEF 13-1760110 FORM 990, PART VI, SECTION B, LINE 12C: EVERY STAFF MEMBER OF THE UUSA IS REQUIRED ANNUALLY TO SIGN A FORM THAT ENSURES EVERYONE IS AWARE OF AND IN COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. THE PEOPLE & CULTURE DEPARTMENT COLLECTS THESE FORMS. 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 THAT 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. UUSA HAS AN EXTENSIVE CONFLICT OF INTEREST POLICY THAT ESSENTIALLY REQUIRES ANY BOARD MEMBER OR PRINCIPAL OFFICERS WITH A CONFLICT OR POTENTIAL CONFLICT OF 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 MEEING IN WHICH THE TRANSACTION OR MATTER IS DISCUSSED AND VOTED UPON. FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION AND HUMAN RESOURCES COMMITTEE OF THE BOARD OF DIRECTORS HAS THE RESPONSIBILITY TO RECOMMEND AND SERVE AS A RESOURCE WITH RESPECT TO THE NATURE AND AMOUNT OF COMPENSATION TO BE INCLUDED IN THE PRESIDENT AND CEO'S CONTRACT. SUBJECT TO THE APPROVAL OF THE BOARD. DURING THE CONTRACT PROCESS. A COMPARABILITY STUDY (THE "STUDY") IS CONDUCTED BY AN OUTSIDE EMPLOYEE COMPENSATION AND BENEFITS FIRM WHICH TAKES INTO CONSIDERATION OTHER DIRECT PEER FUNDRAISING, ADVOCACY, AND RELIEF ORGANIZATIONS IN DETERMINING THE TOTAL COMPENSATION OF THE PRESIDENT AND CEO TO INCLUDE SALARY, BENEFITS AND INCENTIVES AS APPROPRIATE. ALSO, THE COMPENSATION AND HUMAN RESOURCES COMMITTEE OF THE BOARD OF DIRECTORS SERVES AS A RESOURCE

Schedule O (Form 990) 2023 Page 2

Schedule O (Form 990) 2023	Page 2
Name of the organization UNITED STATES FUND FOR UNICEF	Employer identification number 13-1760110
WITH RESPECT TO THE PRESIDENT AND CEO COMPENSATION DECISIONS AND ACT	TIONS
FOR OTHER OFFICERS AND KEY EMPLOYEES AT UUSA FOLLOWING A COMPARABLE	REVIEW
PROCESS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 99	0:
AL,AR,CA,FL,GA,HI,IL,KS,KY,MA,MD,MI,MN,MS,NC,NH,NJ,NM,NY,ND,OR,PA,RI	,SC,TN
UT,VA,WV,WI	
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 ON THE ORGANIZATION'S WEBSITE AT	1
WWW.UNICEFUSA.ORG AND ARE ALSO AVAILABLE ON GUIDESTAR AND CHARITY	
NAVIGATOR.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE ON ITS WEBS	ITE AT
HTTPS://WWW.UNICEFUSA.ORG/LEGAL-DISCLOSURE. THE AUDITED FINANCIAL	
STATEMENTS ARE ALSO POSTED ON THE ORGANIZATION'S WEBSITE AT	
HTTPS://WWW.UNICEFUSA.ORG/ABOUT-UNICEF-USA/FINANCES.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 3	46,678.
PLEDGE WRITE-OFFS -8,3	87,310.
TOTAL TO FORM 990, PART XI, LINE 9 -8,0	40,632.

#### **SCHEDULE R** (Form 990)

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.

Department of the Treasury Internal Revenue Service

Name of the organization

UNITED STATES FUND FOR UNICEF

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

Schedule R (Form 990) 2023

13-1760110

(a)	(b)	(c)	(d)		(e)		(f)		
Name, address, and EIN (if applicable) Of disregarded entity Primary activity Legal domicile (state or foreign country)  Find-of-year as foreign country)		assets		-	3				
Part II Identification of Related Tax-Exempt Organiz	ations. Complete if the organization a	answered "Yes" on Form 990	), Part IV, line 34,	pecause it h	ad one	or more relat	ted tax-exe	mpt	
organizations during the tax year.  (a)	(b)	(c)	(d)	(e)		11	(f)		a)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public ch status (if s	narity ection	Direct co		contr	rolled
				501(c)	(3))			empt  (g Section 5	No
NICEF USA IMPACT FUND FOR CHILDREN INC - 0-3287404, 125 MAIDEN LANE 10TH FLOOR, NEW						UNITED ST			
YORK, NY 10038	UNICEF USA	NEW YORK	501(C)(3)	LINE 12A	, 1	FUND FOR	UNICEF	Х	—
BRIDGE FUND GRANT ASSISTANCE CORPORATION -									
16-0898424, 125 MAIDEN LANE 10TH FLOOR, NEW YORK, NY 10038	RECEIVE CONTRIBUTIONS AND MAKE DISTRIBUTIONS	NEW YORK	501(C)(3)	LINE 12A		UNITED ST FUND FOR		y	
ONE, NI 10050	- HAND DIGINIDATIONS	NUM TORK	301(0)(3)	DIND 1211	, -	I GND I GN	ONICH		
					l l				

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

		0	IIX / II F 000	D - + N/ P 04	to a contract of the action of the contract of	and the state of
David 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 mo	re related
	organizations treated as a partnership during the tax year.		•	, ,		

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

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

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

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

Not	c: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No			
1	During the tax year, did the organization engage in any of the following transactions w	with one or more re	lated organizations listed i	n Parts II-IV?						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х			
b	<b>b</b> Gift, grant, or capital contribution to related organization(s)									
	Gift, grant, or capital contribution from related organization(s)				1c		Х			
	Loans or loan guarantees to or for related organization(s)				1d		Х			
е	Loans or loan guarantees by related organization(s)				1e		Х			
f	Dividends from related organization(s)				1f		Х			
	g Sale of assets to related organization(s)									
	Purchase of assets from related organization(s)				1h		Х			
i	Exchange of assets with related organization(s)				1i		Х			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х			
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х			
- 1	Performance of services or membership or fundraising solicitations for related organiz				11		Х			
m	m Performance of services or membership or fundraising solicitations by related organization(s)									
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
	o Sharing of paid employees with related organization(s)									
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		х			
	Reimbursement paid by related organization(s) for expenses				1q		Х			
r	Other transfer of cash or property to related organization(s)				1r	х				
	Other transfer of cash or property from related organization(s)				1s		Х			
2	If the answer to any of the above is "Yes," see the instructions for information on who									
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved					
<u>(1)</u> <sup>ፒ</sup>	NICEF USA IMPACT FUND FOR CHILDREN, INC.	В	15,128,212.	CASH						
(2) <sup>[</sup>	NICEF USA IMPACT FUND FOR CHILDREN, INC.	R	728,058.	FMV						
<u>(3)</u>										
(4)										
(5)										

Schedule R (Form 990) 2023 UNITED STATES FUND FOR UNICEF 13-1760110 Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) r Percentage ownership
	-									

332165 09-28-23 Schedule R (Form 990) 2023