PUBLIC DISCLOSURE

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021

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

C Name of organization
INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 1275 K STREET NW   Room/suite 600

City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005

D Employer identification number 22-3087809

E Telephone number 202-628-8188

G Gross receipts $ 71,209,449.

F Name and address of principal officer: KRISTIN LORD
SAME AS C ABOVE

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

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

H(c) Group exemption number ▶

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

J Website: ▶ WWW.IREX.ORG

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

L Year of formation: 1991   M State of legal domicile: NJ

Part I Summary

Activities & Governance

1	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	20
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	247
6	Total number of volunteers (estimate if necessary)	6	20
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	78,442,318.	70,158,080.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	171,784.	398,722.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	78,614,102.	70,556,802.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	16,814,365.	15,856,899.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	27,045,912.	32,407,338.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 6,806.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	35,173,437.	21,794,905.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	79,033,714.	70,059,142.
	19	Revenue less expenses. Subtract line 18 from line 12	-419,612.	497,660.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	22,874,741.	28,553,118.
	21	Total liabilities (Part X, line 26)	11,951,488.	14,747,380.
	22	Net assets or fund balances. Subtract line 21 from line 20	10,923,253.	13,805,738.

Part II Signature Block

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

Sign Here

▶ Signature of officer   Date

▶ MICHAEL GRAHAM, CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
J. CALVIN MARKS				P01226973

Firm's name ▶ JOHNSON LAMBERT LLP   Firm's EIN ▶ 52-1446779

Firm's address ▶ 4242 SIX FORKS ROAD, SUITE 1500
RALEIGH, NC 27609   Phone no. 919-719-6400

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Form **8453-EO**

Department of the Treasury
Internal Revenue Service

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2020, or tax year beginning JUL 1, 2020, and ending JUN 30, 20 21

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, and 8868

▶ **Go to www.irs.gov/Form8453EO for the latest information.**

OMB No. 1545-0047

2020

Name of exempt organization or person subject to tax	Taxpayer identification number
INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.	22-3087809

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a,** or **7a** below, and the amount on that line of the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b,** or **7b,** whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶	X	**b Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	70,556,802.
2a Form 990-EZ check here ▶		**b Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a Form 1120-POL check here ▶		**b Total tax** (Form 1120-POL, line 22)	**3b**	
4a Form 990-PF check here ▶		**b Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**	
5a Form 8868 check here ▶		**b Balance due** (Form 8868, line 3c)	**5b**	
6a Form 990-T check here ▶		**b Total tax** (Form 990-T, Part III, line 4)	**6b**	
7a Form 4720 check here ▶		**b Total tax** (Form 4720, Part III, line 1)	**7b**	

Part II Declaration of Officer or Person Subject to Tax

8 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that [X] I am an officer of the above named organization or [ ] I am the person subject to tax with respect to (name of organization) ______________________, (EIN) ______________,

and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here	Michael B. Graham	5/3/2022	CFO
	Signature of officer or person subject to tax	Date	Title, if applicable

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only					
ERO's signature	[signature]	Date 5/3/2022	Check if also paid preparer [X]	Check if self-employed [ ]	ERO's SSN or PTIN P01226973
Firm's name (or yours if self-employed), address, and ZIP code	JOHNSON LAMBERT LLP				EIN 52-1446779
	4242 SIX FORKS ROAD, SUITE 1500				Phone no.
	RALEIGH, NC 27609				919-719-6400

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only					
	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed [ ]	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no.	

Product: **Exempt**
Name: **INTERNATIONAL RESEARCH & EXCHANGES Board, Inc.**
FEIN: *****7809
Bank Info:
Fiscal Year Begin Date: **7/1/2020**
IRS Message:

Category:
Plan Number:
Fiscal Year End Date: **6/30/2021**

IRS Center: **Ogden**
e-Postmark: **5/3/2022 4:31 PM**
Notification:
eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
05/03/2022	20X:223087809:V1	Upload Started			Marks,Calvin	
05/03/2022	20X:223087809:V1	Released for Transmission - Validation in Progress			Marks,Calvin	
05/03/2022	20X:223087809:V1	Ready to transmit - Validation Complete				
05/03/2022	20X:223087809:V1	Transmitted to FD	5637082022123037be02			
05/03/2022	20X:223087809:V1	Accepted by FD on 5/3/2022				

ID	Status Date	Status	State/Other	State Category	FBAR	FBAR BSA ID

Form **8868** (Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print
File by the due date for filing your return. See instructions.

Name of exempt organization or other filer, see instructions.
INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Taxpayer identification number (TIN)
22-3087809

Number, street, and room or suite no. If a P.O. box, see instructions.
1275 K STREET NW, NO. 600

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
WASHINGTON, DC 20005

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ MICHAEL GRAHAM
1275 K STREET NW, NO. 600 - WASHINGTON, DC 20005
Telephone No. ▶ 202-628-8188 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______. If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 16, 2022, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year ______ or
▶ ☒ tax year beginning JUL 1, 2020, and ending JUN 30, 2021.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$ 0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$ 0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Part III 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:

A NOT-FOR-PROFIT ORGANIZATION CONDUCTING SOCIAL SCIENCE RESEARCH TO BUILD A MORE JUST, PROSPEROUS, AND INCLUSIVE WORLD, IREX AND ITS PARTNERS EMPOWER YOUTH, CULTIVATE LEADERS, STRENGTHEN INSTITUTIONS, AND EXTEND ACCESS TO QUALITY EDUCATION AND INFORMATION.

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.

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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 19,788,457. including grants of $ 6,119,924.) (Revenue $)

INFORMATION & MEDIA - IREX PROMOTES VIBRANT INFORMATION AND MEDIA SYSTEMS SO PEOPLE CAN MAKE INFORMED DECISIONS, HOLD THOSE IN POWER ACCOUNTABLE, AND TAKE ACTIONS TO IMPROVE THEIR LIVES. WE WORK WITH INFORMATION CONSUMERS AND PRODUCERS TO ENSURE THAT PEOPLE CAN ENGAGE WITH HIGH-QUALITY CONTENT THROUGH MULTIPLE CHANNELS AND FREELY ACT UPON INFORMATION THAT AFFECTS THEM. WE ALSO PRODUCE THE MEDIA SUSTAINABILITY INDEX, WHICH PROVIDES IN-DEPTH ANALYSES OF THE HEALTH OF THE MEDIA SECTOR IN 21 COUNTRIES IN EURASIA.

4b (Code:) (Expenses $ 14,031,425. including grants of $ 5,634,183.) (Revenue $)

COMMUNITIES & GOVERNANCE - WE STRENGTHEN CIVIL SOCIETY ORGANIZATIONS (CSO) TO ELEVATE CITIZEN VOICES WHILE INCREASING ACCOUNTABILITY AND EFFECTIVENESS OF PUBLIC INSTITUTIONS. OUR APPROACH FOCUSES ON SUPPORTING PARTNERS TO DELIVER TANGIBLE BENEFITS TO THE PEOPLE THEY SERVE. SINCE 1994, WE HAVE SUPPORTED CIVIL SOCIETY LEADERS AND STRENGTHENED CSOS THROUGHOUT EURASIA, THE MIDDLE EAST, AFRICA, ASIA, AND LATIN AMERICA. IREX CONTRIBUTES TO GOOD GOVERNMENTS IN WAY THAT ENABLE THEM TO BECOME MORE EFFECTIVE, ACCOUNTABLE, AND RESPONSIVE TO THE PEOPLE THEY SERVE. IREX PARTNERS WITH INSTITUTIONS AND CIVIL SOCIETY TO PROMOTE CONSTRUCTIVE CIVIC ENGAGEMENT.

4c (Code:) (Expenses $ 10,266,208. including grants of $ 1,230,234.) (Revenue $)

LEADERSHIP - TODAY'S CHALLENGES CALL FOR LEADERS WHO CAN CREATE TRANSFORMATIVE CHANGE ACROSS COMMUNITIES, GOVERNMENTS, ORGANIZATIONS, AND BUSINESSES. OUR APPROACH TO DEVELOPING LEADERS PREPARES LEADERS TO ENGAGE AND INSPIRE OTHERS, ADVOCATE THOUGHTFULLY, TAKE ACTION, AND CONTINUE TO LEARN IN ORDER TO MAKE POSITIVE SOCIAL CHANGE. WE IDENTIFY THESE LEADERS, DEVELOP THEIR CAPABILITIES, PROVIDE OPPORTUNITIES, AND BUILD THEIR NETWORKS TO INCREASE THEIR IMPACT.

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

(Expenses $ 11,700,869. including grants of $ 2,872,558.) (Revenue $)

4e Total program service expenses ▶ 55,786,959.

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	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
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		X
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	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
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? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
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		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
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	X	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	X	
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	X	
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*	17		X
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		X
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		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		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's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		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, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	X	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		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*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

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 [X]

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	146			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	

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

					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	247			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
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	X	
b	If "Yes," enter the name of the foreign country ▶ SEE SCHEDULE O					
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			16		X
	If "Yes," complete Form 4720, Schedule O.					

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.*

Check if Schedule O contains a response or note to any line in this Part VI X

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year ... 1a 20			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent ... 1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶NJ

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) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ 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 financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

MICHAEL GRAHAM - 202-628-8188

1275 K STREET NW, NO. 600, WASHINGTON, DC 20005

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

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

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

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

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) KRISTIN LORD PRESIDENT	40.00	X		X				443,430.	0.	30,500.
(2) MICHAEL GRAHAM CHIEF FINANCIAL OFFICER	40.00			X				287,727.	0.	32,368.
(3) ALEKSANDER DARDELI EXECUTIVE VICE PRESIDENT	40.00			X				287,029.	0.	35,690.
(4) ALICIA PHILLIPS MANDAVILLE SENIOR VICE PRESIDENT, GLOBAL PROGRA	40.00 1.00			X				277,516.	0.	29,788.
(5) SHIRLENE A ARCHER VICE PRESIDENT, OPERATIONS (TO MAR '	40.00			X				260,652.	0.	25,637.
(6) EVAN TRACZ DIRECTOR FOR LWA	40.00				X			250,177.	0.	28,543.
(7) REBECCA BELL MESZAROS VICE PRESIDENT, GLOBAL PROGRAMS	40.00				X			167,128.	0.	26,831.
(8) RACHEL SURKIN SENIOR TECHNICAL EXPERT	40.00				X			164,211.	0.	19,125.
(9) JEAN MACKENZIE CHIEF OF PARTY, SRI LANKA	40.00				X			164,099.	0.	15,124.
(10) BAHRUZ BABAYEV CHIEF TECHNOLOGY OFFICER	40.00				X			162,188.	0.	7,244.
(11) JILL M. MILLER DIRECTOR, CALI	40.00				X			157,367.	0.	13,074.
(12) DALEN TODD SENIOR DIRECTOR, BUSINESS DEVELOPMEN	40.00				X			156,925.	0.	28,038.
(13) JANELLA FERGUSON DIRECTOR, STRATEGIC PARTNERSHIPS	40.00				X			156,601.	0.	11,782.
(14) MICHAEL MIRNY SENIOR PRACTICE DIRECTOR, I&M	40.00				X			152,097.	0.	27,017.
(15) KATERYNA VOGT DIRECTOR, GLOBAL LEARN TO DISCERN	40.00					X		142,746.	0.	12,150.
(16) AARON CHASSY DIRECTOR, COMMUNITIES & GOVERNANCE	40.00 1.00					X		142,398.	0.	26,920.
(17) RICHARD SCHRADER DEPUTY CFO (BUDGET & COMPLIANCE)	40.00					X		139,451.	0.	14,128.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) LINDA TRAIL SENIOR TECHNICAL ADVISOR	40.00					X		138,503.	0.	14,585.
(19) CHERYL SCHOENBERG ACTING DEPUTY PRACTICE DIRECTOR	40.00 1.00					X		136,952.	0.	17,966.
(20) NILOO HOWE CHAIR	1.00	X		X				0.	0.	0.
(21) DAVID GROSS VICE CHAIR	1.00	X		X				0.	0.	0.
(22) VIPUL AMIN DIRECTOR	1.00	X						0.	0.	0.
(23) LILIANA AYALDE DIRECTOR (FROM APR '20)	1.00	X						0.	0.	0.
(24) AMANDA BENNETT DIRECTOR (FROM APR '20)	1.00	X						0.	0.	0.
(25) TIM BITSBERGER DIRECTOR	1.00	X						0.	0.	0.
(26) LORNE CRANER DIRECTOR (TO JUL '20)	1.00	X						0.	0.	0.
1b Subtotal ▶								3,787,197.	0.	416,510.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								3,787,197.	0.	416,510.

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 ▶ 48

		Yes	No
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		X
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	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
OMNI SHOREHAM HOTEL, 2500 CALVERT STREET, NW, WASHINGTON, DC 20008	HOTEL SERVICES	443,822.
TAXBACK, INC., 333 N. MICHIGAN AVE STE 915, CHICAGO, IL 60601	TAX SERVICES	230,060.
ORGANIZATIONATITSBESTINC, 10999 RED RUN BLVD STE 205 #149, OWINGS MILL, MD 21117	CONSULTING/DEI COACHING SERVICES	223,868.
NBC UNIVERSAL, 100 UNIVERSAL CITY PLAZA, UNIVERSAL CITY, CA 91608	TV LICENSES PROVIDER	203,010.
ROBERT HALF MANAGEMENT RESOURCES, 12400 COLLECTIONS CENTER DRIVE, CHICAGO, IL	STAFFING AGENCY	182,385.

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 ▶ 17

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(27) KAREN J. HANRAHAN DIRECTOR	1.00	X						0.	0.	0.
(28) LIONEL JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(29) BEVERLY LINDSEY DIRECTOR	1.00	X						0.	0.	0.
(30) RAFFIQ NATHOO DIRECTOR (FROM OCT '20)	1.00	X						0.	0.	0.
(31) CHARLES PROW DIRECTOR	1.00	X						0.	0.	0.
(32) ZEENAT RAHMAN DIRECTOR (FROM APR '20)	1.00	X						0.	0.	0.
(33) REBECCA SHARP DIRECTOR	1.00	X						0.	0.	0.
(34) EILEEN SHIELDS-WEST DIRECTOR	1.00	X						0.	0.	0.
(35) ANN STOCK DIRECTOR	1.00	X						0.	0.	0.
(36) KATE THOMPSON DIRECTOR	1.00	X						0.	0.	0.
(37) ALEEM WALJI DIRECTOR	1.00	X						0.	0.	0.
(38) WADE WARREN DIRECTOR	1.00	X						0.	0.	0.
(39) AARON WILLIAMS DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts						
1 a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e	64,284,947.				
f All other contributions, gifts, grants, and similar amounts not included above	1f	5,873,133.				
g Noncash contributions included in lines 1a-1f	1g	$ 15,175.				
h **Total.** Add lines 1a-1f			70,158,080.			
Program Service Revenue		Business Code				
2 a						
b						
c						
d						
e						
f All other program service revenue						
g **Total.** Add lines 2a-2f						
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts)			17,247.			17,247.
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
		(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)						
		(i) Securities / (ii) Other				
7 a Gross amount from sales of assets other than inventory	7a	1,034,122.				
b Less: cost or other basis and sales expenses	7b	652,647.				
c Gain or (loss)	7c	381,475.				
d Net gain or (loss)			381,475.			381,475.
8 a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	8a					
b Less: direct expenses	8b					
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e **Total.** Add lines 11a-11d						
12 **Total revenue.** See instructions			70,556,802.	0.	0.	398,722.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	16,930.	16,930.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	117,557.	117,557.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	15,722,412.	15,722,412.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,798,773.	2,657,322.	1,141,395.	56.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	21,858,576.	15,376,676.	6,481,581.	319.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	974,367.	599,529.	374,819.	19.
9 Other employee benefits	4,339,064.	3,109,039.	1,229,992.	33.
10 Payroll taxes	1,436,558.	883,915.	552,615.	28.
11 Fees for services (nonemployees):				
a Management				
b Legal	347,745.	159,027.	188,718.	
c Accounting	204,826.	33,000.	171,826.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	20,872.		20,872.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	9,090,526.	6,840,658.	2,243,746.	6,122.
12 Advertising and promotion	165,122.	133,809.	31,313.	
13 Office expenses	1,381,522.	1,060,996.	320,342.	184.
14 Information technology				
15 Royalties				
16 Occupancy	2,391,570.	1,657,112.	734,423.	35.
17 Travel	311,167.	290,757.	20,410.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	818,299.	773,574.	44,725.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	434,430.	137,968.	296,457.	5.
23 Insurance	198,445.	40,547.	157,897.	1.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SUBCONTRACTS & TRANSFER	4,649,733.	4,649,733.		
b PROPERTY & EQUIPMENT	784,750.	704,070.	80,676.	4.
c APPLICATION & ALUMNI PR	550,444.	550,444.		
d PARTICIPANT TRAVEL, TAX	357,330.	357,330.		
e All other expenses	88,124.	-85,446.	173,570.	
25 **Total functional expenses.** Add lines 1 through 24e	70,059,142.	55,786,959.	14,265,377.	6,806.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X [ ]

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	2,264,928.	1	4,502,916.
	2	Savings and temporary cash investments	340,611.	2	280,690.
	3	Pledges and grants receivable, net	6,866,904.	3	8,594,598.
	4	Accounts receivable, net	29,927.	4	-39,880.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	851,182.	9	1,139,515.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a 5,877,681.			
	b	Less: accumulated depreciation — 10b 4,649,010.	1,457,610.	10c	1,228,671.
	11	Investments - publicly traded securities	11,063,579.	11	12,846,608.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	22,874,741.	16	28,553,118.
Liabilities	17	Accounts payable and accrued expenses	5,370,902.	17	7,128,428.
	18	Grants payable		18	
	19	Deferred revenue	4,431,019.	19	5,652,028.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,149,567.	25	1,966,924.
	26	**Total liabilities.** Add lines 17 through 25	11,951,488.	26	14,747,380.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ [X] and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	8,638,072.	27	11,426,582.
	28	Net assets with donor restrictions	2,285,181.	28	2,379,156.
		Organizations that do not follow FASB ASC 958, check here ▶ [ ] and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	10,923,253.	32	13,805,738.
	33	Total liabilities and net assets/fund balances	22,874,741.	33	28,553,118.

Part 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	70,556,802.
2	Total expenses (must equal Part IX, column (A), line 25)	2	70,059,142.
3	Revenue less expenses. Subtract line 2 from line 1	3	497,660.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,923,253.
5	Net unrealized gains (losses) on investments	5	2,360,548.
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	24,277.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	13,805,738.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the organization	Employer identification number
INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.	22-3087809

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

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

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 [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.)
8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 [ ] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

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

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

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

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

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

f Enter the number of supported organizations ....

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	78657085.	83820453.	85094721.	78442318.	70158080.	396172657
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	78657085.	83820453.	85094721.	78442318.	70158080.	396172657
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						396172657

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	78657085.	83820453.	85094721.	78442318.	70158080.	396172657
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	51,015.	13,944.	103,602.	85,730.	17,247.	271,538.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	56,118.					56,118.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		22,514.				22,514.
11 **Total support.** Add lines 7 through 10						396522827

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) 14 99.91 %

15 Public support percentage from 2019 Schedule A, Part II, line 14 15 99.87 %

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

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

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

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

Section 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 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* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

		Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

		Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

		Yes	No
2 Activities Test. **Answer lines 2a and 2b below.**			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b Did the activities described in line 2a, 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.*	2b		
3 Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No" provide details in* **Part VI.**	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*	3b		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (*explain in detail in* **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 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-functionally integrated Type III supporting organization (see instructions).

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

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

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

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

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

Schedule of Contributors

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

OMB No. 1545-0047

2020

Name of the organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number: 22-3087809

Organization type (check one):

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

Check if your organization is covered by the **General Rule** or a **Special Rule.**

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

General Rule

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

Special Rules

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

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (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 **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ▶ $ ____________

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

Name of organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number: 22-3087809

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	[redacted]	$ 18,258,229.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	[redacted]	$ 16,287,810.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	[redacted]	$ 6,627,475.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	[redacted]	$ 6,435,954.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	[redacted]	$ 3,221,324.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	[redacted]	$ 2,768,173.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number: 22-3087809

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	[redacted]	$ 1,799,609.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8	[redacted]	$ 1,725,363.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
9	[redacted]	$ 1,677,883.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
10	[redacted]	$ 1,421,070.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number: 22-3087809

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

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

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

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

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

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

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

Name of organization	Employer identification number
INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.	22-3087809

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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.	22-3087809

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 ▶ $

3 Volunteer hours for political campaign activities

Part I-B **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? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C **Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

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 ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 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 filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess 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.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2017	**(b)** 2018	**(c)** 2019	**(d)** 2020	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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 of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?	X		15,000.
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		2,991.
j Total. Add lines 1c through 1i			17,991.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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 501(c)(5), or section 501(c)(6).

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure 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 list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LOBBYING EXPENSES WERE PAID TO PROMOTE FUNDING FOR LEADERSHIP PROGRAMS AND FOREIGN ASSISTANCE. THE ORGANIZATION PAYS MEMBER DUES TO THE US GLOBAL LEADERSHIP COALITION, WHICH ENGAGES IN MANY SUPPORT ACTIVITIES INCLUDING LOBBYING TO PROMOTE FUNDING FOR FOREIGN ASSISTANCE. EXPENSES WERE INCURRED FOR CONFERENCE "ADVOCACY DAY" TO PROMOTE FUNDING FOR

Part IV Supplemental Information *(continued)*

INTERNATIONAL EDUCATION.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number: 22-3087809

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (for example, recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of a historically important land area
- ☐ Preservation of a certified historic structure

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

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

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

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

b Assets included in Form 990, Part X ▶ $

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,384,000.	1,384,000.	1,384,000.	1,384,000.	1,384,000.
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,384,000.	1,384,000.	1,384,000.	1,384,000.	1,384,000.

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

a Board designated or quasi-endowment ▶ ______ %

b Permanent endowment ▶ 100 %

c Term endowment ▶ ______ %

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

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

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

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

Part VI **Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,948,870.	2,056,374.	892,496.
d Equipment		371,098.	368,640.	2,458.
e Other		2,557,713.	2,223,996.	333,717.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				1,228,671.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	1,552,125.
(3) 457(B) LIABILITY	414,799.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	1,966,924.

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 ... [X]

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

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

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

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

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

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

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

IREX HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number 22-3087809

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

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

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

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

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
RUSSIA AND NEIGHBORING COUNTRIES			PROGRAM SERVICES; GRANTMAKING	GOV, MEDIA, EDUCATION	14,829,000.
MIDDLE EAST AND NORTH AFRICA	6	80	PROGRAM SERVICES; GRANTMAKING	GOV, MEDIA, EDUCATION	10,112,000.
EUROPE (INCLUDING ICELAND AND GREENLAND)	3	23	PROGRAM SERVICES; GRANTMAKING	MEDIA, EDUCATION	7,833,000.
SUB-SAHARAN AFRICA	3	20	PROGRAM SERVICES; GRANTMAKING	GOV, MEDIA, EDUCATION	5,875,000.
CENTRAL AMERICA AND THE CARIBBEAN	2	23	PROGRAM SERVICES; GRANTMAKING	MEDIA, EDUCATION	2,972,000.
SOUTH AMERICA			PROGRAM SERVICES; GRANTMAKING	EDUCATION	2,401,000.
SOUTH ASIA	1	16	PROGRAM SERVICES; GRANTMAKING	GOV, MEDIA, EDUCATION	1,811,000.
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES; GRANTMAKING	GOV, EDUCATION	482,000.
3 a Subtotal	15	162			46,315,000.
b Total from continuation sheets to Part I	0	0			191,000.
c **Totals** (add lines 3a and 3b)	15	162			46,506,000.

Part I **Continuation of Activities per Region.** (Schedule F (Form 990), Part I, line 3)

(a) Region	(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
NORTH AMERICA			PROGRAM SERVICES; GRANTMAKING	EDUCATION	191,000.
Totals					191,000.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	991,209.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	752,885.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	600,825.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	587,325.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	479,240.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	417,890.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA LAW	372,394.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	MEDIA DEVELOPMENT	352,500.	CHECK/WIRE	0.		

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 ▶ 0

3 Enter total number of other organizations or entities ▶ 200

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	348,996.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	346,598.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	MEDIA DEVELOPMENT	316,869.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	254,139.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	246,333.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	206,995.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	191,275.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	187,446.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	184,536.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	175,925.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	175,600.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	166,323.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	164,977.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	158,933.	CHECK/WIRE	0.		
		SOUTH ASIA	MEDIA DEVELOPMENT	151,154.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	147,860.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	139,265.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	136,513.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	126,686.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	126,145.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	124,612.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	118,506.	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	EDUCATION	118,465.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	EDUCATION	112,876.	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	YOUTH	111,073.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	107,567.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	104,990.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	104,620.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	MEDIA DEVELOPMENT	101,220.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	95,796.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	93,760.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	92,026.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	90,627.	CHECK/WIRE	0.		
		SOUTH ASIA	EDUCATION	88,144.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	HIGHER EDUCATION DEVELOPMENT	87,362.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	84,073.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	71,284.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	69,704.	CHECK/WIRE	0.		
		SOUTH AMERICA	YOUTH	69,531.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	65,508.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	65,428.	CHECK/WIRE	0.		
		SOUTH ASIA	CIVIL SOCIETY STRENGTHENING	62,481.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	58,687.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	57,990.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	57,899.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	56,214.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	55,415.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	YOUTH	54,397.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	54,162.	CHECK/WIRE	0.		
		NORTH AMERICA	EDUCATION	54,106.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	YOUTH	53,007.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	52,476.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	52,077.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	51,657.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	51,027.	CHECK/WIRE	0.		
		NORTH AMERICA	CIVIL SOCIETY STRENGTHENING	49,502.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	48,041.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	46,496.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	45,533.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	45,000.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	43,561.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	42,364.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	41,670.	CHECK/WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	41,667.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	40,956.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	YOUTH	40,694.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	40,539.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	40,188.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	40,116.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	39,731.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	39,160.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	37,770.	CHECK/WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	37,390.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	37,385.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	36,447.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	35,987.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	35,904.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	35,845.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	EDUCATION	35,824.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	35,358.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	35,065.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	34,927.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	34,412.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA LAW	34,403.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	34,384.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	34,181.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	32,486.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	32,486.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	32,254.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	31,312.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	YOUTH	30,708.	CHECK/WIRE	0.		
		SOUTH ASIA	CIVIL SOCIETY STRENGTHENING	30,278.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	YOUTH	29,416.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	29,143.	CHECK/WIRE	0.		
		SOUTH ASIA	CIVIL SOCIETY STRENGTHENING	28,688.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	27,668.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CIVIL SOCIETY STRENGTHENING	27,000.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	26,350.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	25,981.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	25,923.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	25,880.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	25,579.	CHECK/WIRE	0.		
		EAST ASIA AND THE PACIFIC	CIVIL SOCIETY STRENGTHENING	25,259.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	24,899.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	24,020.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	24,000.	CHECK/WIRE	0.		
		NORTH AMERICA	CIVIL SOCIETY STRENGTHENING	23,352.	CHECK/WIRE	0.		
		SOUTH ASIA	MEDIA DEVELOPMENT	23,065.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA LAW	22,970.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	22,395.	CHECK/WIRE	0.		
		SOUTH ASIA	MEDIA DEVELOPMENT	22,156.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	21,214.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	20,876.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	20,410.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	19,910.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	18,769.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	18,600.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	18,345.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	18,050.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	16,204.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	16,120.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	16,031.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	16,000.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	CIVIL SOCIETY STRENGTHENING	16,000.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	15,882.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	14,775.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	14,750.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	14,445.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	ASSOCIATIONS	14,199.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	13,845.	CHECK/WIRE	0.		
		SOUTH ASIA	CIVIL SOCIETY STRENGTHENING	13,291.	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	EDUCATION	12,843.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	12,767.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA LAW	12,108.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	11,984.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	11,900.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	11,888.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	11,689.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	10,793.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	10,771.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	10,724.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	10,504.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	10,201.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	10,190.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	10,051.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	10,000.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	EDUCATION	10,000.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	9,900.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	9,869.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	9,717.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	9,670.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA LAW	9,492.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	9,220.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	MEDIA DEVELOPMENT	8,628.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	8,075.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	7,968.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	7,900.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	7,815.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	7,800.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	7,690.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	7,561.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	7,520.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	7,405.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	7,382.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	CIVIL SOCIETY STRENGTHENING	7,062.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	6,996.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	6,860.	CHECK/WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATION	6,796.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	6,672.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	6,650.	CHECK/WIRE	0.		
		SOUTH ASIA	MEDIA DEVELOPMENT	6,640.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA LAW	6,505.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	CIVIL SOCIETY STRENGTHENING	6,437.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	6,005.	CHECK/WIRE	0.		
		SOUTH ASIA	MEDIA DEVELOPMENT	5,917.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	5,695.	CHECK/WIRE	0.		
		SOUTH ASIA	MEDIA DEVELOPMENT	5,651.	CHECK/WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MEDIA DEVELOPMENT	5,586.	CHECK/WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	MEDIA DEVELOPMENT	5,500.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	5,492.	CHECK/WIRE	0.		

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	5,445.	CHECK/WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	MEDIA DEVELOPMENT	5,185.	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	CIVIL SOCIETY STRENGTHENING	5,001.	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	CIVIL SOCIETY STRENGTHENING	5,000.	CHECK/WIRE	0.		
		SUB-SAHARAN AFRICA	CIVIL SOCIETY STRENGTHENING	5,000.	CHECK/WIRE	0.		

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
EXCHANGE GRANT	SUB-SAHARAN AFRICA	750	782,311.	CHECK/WIRE	0.		
FELLOWSHIP GRANT	SOUTH AMERICA	137	164,506.	CHECK/WIRE	0.		
FELLOWSHIP GRANT	CENTRAL AMERICA AND THE CARIBBEAN	103	118,113.	CHECK/WIRE	0.		
TRAINING GRANT	MIDDLE EAST AND NORTH AFRICA	230	116,350.	CHECK/WIRE	0.		
EXCHANGE GRANT	EAST ASIA AND THE PACIFIC	28	39,085.	CHECK/WIRE	0.		
EXCHANGE GRANT	MIDDLE EAST AND NORTH AFRICA	49	37,932.	CHECK/WIRE	0.		
FELLOWSHIP GRANT	NORTH AMERICA	25	30,000.	CHECK/WIRE	0.		
EXCHANGE GRANT	SOUTH ASIA	18	28,464.	CHECK/WIRE	0.		
FELLOWSHIP GRANT	SUB-SAHARAN AFRICA	35	27,272.	CHECK/WIRE	0.		

Part III **Continuation of Grants and Other Assistance to Individuals Outside the United States.** (Schedule F (Form 990), Part III)

(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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TRAINING GRANT	SOUTH AMERICA	23	27,090.	CHECK/WIRE	0.		
FELLOWSHIP GRANT	RUSSIA AND NEIGHBORING STATES	24	25,943.	CHECK/WIRE	0.		
FELLOWSHIP GRANT	EUROPE (INCLUDING ICELAND AND GREENLAND)	30	22,203.	CHECK/WIRE	0.		
FELLOWSHIP GRANT	SOUTH ASIA	116	19,831.	CHECK/WIRE	0.		
EXCHANGE GRANT	CENTRAL AMERICA AND THE CARIBBEAN	11	17,762.	CHECK/WIRE	0.		
EXCHANGE GRANT	SOUTH AMERICA	8	16,022.	CHECK/WIRE	0.		
EXCHANGE GRANT	RUSSIA AND NEIGHBORING STATES	16	11,703.	CHECK/WIRE	0.		
EXCHANGE GRANT	EUROPE (INCLUDING ICELAND AND GREENLAND)	13	7,962.	CHECK/WIRE	0.		
TRAINING GRANT	SUB-SAHARAN AFRICA	101	7,856.	CHECK/WIRE	0.		

Part III **Continuation of Grants and Other Assistance to Individuals Outside the United States.** (Schedule F (Form 990), Part III)

(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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP GRANT	EAST ASIA AND THE PACIFIC	6	4,521.	CHECK/WIRE	0.		
TRAINING GRANT	CENTRAL AMERICA AND THE CARIBBEAN	15	4,140.	CHECK/WIRE	0.		
TRAINING GRANT	EUROPE (INCLUDING ICELAND AND GREENLAND)	43	2,152.	CHECK/WIRE	0.		
TRAINING GRANT	SOUTH ASIA	74	1,296.	CHECK/WIRE	0.		
TRAINING GRANT	RUSSIA AND NEIGHBORING STATES	1	448.	CHECK/WIRE	0.		

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ☒ Yes ☐ No

Part V Supplemental Information

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

PART I, LINE 2:

IREX REQUIRES PROGRAMMATIC REPORTING FROM ALL GRANTEES. PERIODIC FINANCIAL REPORTING IS REQUIRED FROM ALL GRANTEES WHO RECEIVE COST REIMBURSABLE AWARDS. PROGRAMMATIC REPORTS ARE REVIEWED BY IREX TO ENSURE PLANNED ACTIVITIES ARE UNDERTAKEN AND THAT ALL WORK IS WITHIN THE SCOPE OF THE AWARD. FINANCIAL REPORTS ARE REVIEWED TO ENSURE THAT GRANT FUNDS ARE USED FOR THE PURPOSES INTENDED. SITE VISITS BY IREX STAFF ARE ENCOURAGED AND TAKEN WHENEVER PRACTICAL. ADDITIONAL OVERSIGHT MEASURES INCLUDING MORE FREQUENT REPORTING, AUDITS, PHYSICAL EVIDENCE OF PERFORMANCE, ETC., ARE EMPLOYED WHEN NORMAL OVERSIGHT INDICATES AREAS OF CONCERN.

AS PART OF ITS HEADQUARTERS OVERSIGHT FUNCTION, IREX HAS A FINANCIAL REVIEW PROGRAM FOR ITS FIELD OFFICES. THIS PROGRAM IS INTENDED TO ASSESS THE SOUNDNESS OF THE FINANCIAL MANAGEMENT PRACTICES IN OUR FIELD OFFICES, AS WELL AS TO IDENTIFY AND RESOLVE ANY RELATED ISSUES. FOR THIS PURPOSE, A TEAM OF FINANCIAL EXPERTS WITHIN IREX AS WELL AS EXTERNAL CONSULTANTS CONDUCT PERIODIC REVIEWS OF OUR FIELD OFFICES. FIELD OFFICES ARE SELECTED FOR REVIEW BASED ON A RISK ASSESSMENT THAT IS PERFORMED BY THE FIELD FINANCE MANAGER AND THE CFO ON A YEARLY BASIS; OVER THE PAST THREE YEARS A NUMBER OF IREX COUNTRY OFFICES BENEFITED FROM THIS PROGRAM.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number 22-3087809

Part I General Information on Grants and Assistance

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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
READ GLOBAL 1016 TORNEY AVE SAN FRANCISCO, CA 94129	23-2656376	501(C)(3)	10,000.	0.			GENERAL SUPPORT
WIDER CIRCLE 9159 BROOKVILLE ROAD SILVER SPRINGS, MD 20920	52-2345144	501(C)(3)	6,930.	0.			GENERAL SUPPORT

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

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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
EXCHANGE GRANT	31	59,389.	0.		
FELLOWSHIP GRANT	1	58,101.	0.		
TRAINING GRANT	1	67.	0.		

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

PART I, LINE 2:

IREX REQUIRES PROGRAMMATIC REPORTING FROM ALL GRANTEES. PERIODIC FINANCIAL REPORTING IS REQUIRED FROM ALL GRANTEES WHO RECEIVE COST REIMBURSABLE AWARDS PROGRAMMATIC REPORTS ARE REVIEWED BY IREX TO ENSURE PLANNED ACTIVITIES ARE UNDERTAKEN AND THAT ALL WORK IS WITHIN THE SCOPE OF THE AWARD. FINANCIAL REPORTS ARE REVIEWED TO ENSURE THAT GRANT FUNDS ARE USED FOR THE PURPOSES INTENDED. SITE VISITS BY IREX STAFF ARE ENCOURAGED AND TAKEN WHENEVER PRACTICAL. ADDITIONAL OVERSIGHT MEASURES INCLUDING MORE FREQUENT REPORTING, AUDITS, PHYSICAL EVIDENCE OF PERFORMANCE, ETC , ARE

Part IV Supplemental Information

EMPLOYED WHEN NORMAL OVERSIGHT INDICATES AREAS OF CONCERN. AS PART OF ITS HEADQUARTERS OVERSIGHT FUNCTION, IREX HAS A FINANCIAL REVIEW PROGRAM FOR ITS FIELD OFFICES. THIS PROGRAM IS INTENDED TO ASSESS THE SOUNDNESS OF THE FINANCIAL MANAGEMENT PRACTICES IN OUR FIELD OFFICES, AS WELL AS TO IDENTIFY AND RESOLVE ANY RELATED ISSUES. FOR THIS PURPOSE, A TEAM OF FINANCIAL EXPERTS WITHIN IREX AS WELL AS EXTERNAL CONSULTANTS CONDUCT PERIODIC REVIEWS OF OUR FIELD OFFICES FIELD OFFICES ARE SELECTED FOR REVIEW BASED ON A RISK ASSESSMENT THAT IS PERFORMED BY THE FIELD FINANCE MANAGER AND THE CFO ON A YEARLY BASIS, OVER THE PAST THREE YEARS A NUMBER OF IREX COUNTRY OFFICES BENEFITED FROM THIS PROGRAM.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number 22-3087809

Part 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 ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (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	X	
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	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	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:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
(1) KRISTIN LORD	(i)	423,878.	0.	19,552.	19,545.	10,955.	473,930.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MICHAEL GRAHAM	(i)	281,945.	0.	5,782.	19,958.	12,410.	320,095.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ALEKSANDER DARDELI	(i)	277,444.	0.	9,585.	19,960.	15,730.	322,719.	0.
EXECUTIVE VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ALICIA PHILLIPS MANDAVILLE	(i)	267,328.	0.	10,188.	17,378.	12,410.	307,304.	0.
SENIOR VICE PRESIDENT, GLOBAL PROGRA	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SHIRLENE A ARCHER	(i)	254,200.	0.	6,452.	17,345.	8,292.	286,289.	0.
VICE PRESIDENT, OPERATIONS (TO MAR '	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) EVAN TRACZ	(i)	137,993.	0.	112,184.	10,317.	18,226.	278,720.	0.
DIRECTOR FOR LWA	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) REBECCA BELL MESZAROS	(i)	166,768.	0.	360.	14,448.	12,383.	193,959.	0.
VICE PRESIDENT, GLOBAL PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) RACHEL SURKIN	(i)	152,504.	10,000.	1,707.	12,504.	6,621.	183,336.	0.
SENIOR TECHNICAL EXPERT	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JEAN MACKENZIE	(i)	132,845.	0.	31,254.	9,483.	5,641.	179,223.	0.
CHIEF OF PARTY, SRI LANKA	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) BAHRUZ BABAYEV	(i)	157,925.	1,000.	3,263.	6,378.	866.	169,432.	0.
CHIEF TECHNOLOGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) JILL M. MILLER	(i)	154,007.	3,000.	360.	11,074.	2,000.	170,441.	0.
DIRECTOR, CALI	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) DALEN TODD	(i)	156,565.	0.	360.	12,308.	15,730.	184,963.	0.
SENIOR DIRECTOR, BUSINESS DEVELOPMEN	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) JANELLA FERGUSON	(i)	155,241.	1,000.	360.	10,942.	840.	168,383.	0.
DIRECTOR, STRATEGIC PARTNERSHIPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) MICHAEL MIRNY	(i)	148,849.	0.	3,248.	11,266.	15,751.	179,114.	0.
SENIOR PRACTICE DIRECTOR, I&M	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) KATERYNA VOGT	(i)	142,506.	0.	240.	10,152.	1,998.	154,896.	0.
DIRECTOR, GLOBAL LEARN TO DISCERN	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) AARON CHASSY	(i)	141,846.	0.	552.	11,195.	15,725.	169,318.	0.
DIRECTOR, COMMUNITIES & GOVERNANCE	(ii)	0.	0.	0.	0.	0.	0.	0.

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation: (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
(17) RICHARD SCHRADER	(i)	136,843.	0.	2,608.	9,281.	4,847.	153,579.	0.
DEPUTY CFO (BUDGET & COMPLIANCE)	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) LINDA TRAIL	(i)	136,199.	0.	2,304.	9,870.	4,715.	153,088.	0.
SENIOR TECHNICAL ADVISOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) CHERYL SCHOENBERG	(i)	136,727.	0.	225.	10,223.	7,743.	154,918.	0.
ACTING DEPUTY PRACTICE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(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 1A:

HOUSING ALLOWANCES ARE PROVIDED TO EXPATRIATE EMPLOYEES LOCATED IN IREX OVERSEAS FIELD OFFICE PROGRAMS. THE PROVISION OF THE HOUSING ALLOWANCE IS CONSISTENT WITH OR LOWER THAN WHAT IS COMMONLY PROVIDED BY THE US GOVERNMENT AND OTHER INTERNATIONAL DEVELOPMENT AGENCIES WHEN PLACING EMPLOYEES IN OVERSEAS LOCATIONS. HOUSING ALLOWANCES ARE DETERMINED ON A CASE BY CASE BASIS. FACTORS CONSIDERED INCLUDE THE COST OF HOUSING IN THE SPECIFIC COUNTRY, US GOVERNMENT HOUSING ALLOWANCE, AND NEGOTIATIONS WITH THE EXPATRIATE EMPLOYEE TO BE ASSIGNED TO THE LOCATION. EMPLOYEES SERVING AT OVERSEAS LOCATIONS INCLUDED AMONG THE HIGHEST COMPENSATED EMPLOYEES LISTED ON THE COMPENSATION SCHEDULE RECEIVED HOUSING ALLOWANCE BENEFITS WHICH WERE INCLUDED IN THEIR REPORTED COMPENSATION. NO HOUSING ALLOWANCE BENEFITS ARE PROVIDED TO DIRECTORS, OFFICERS, OR KEY EMPLOYEES.

PART I, LINE 3:

COMPENSATION FOR IREX'S PRESIDENT & CEO IS SET AND APPROVED BY THE BOARD WHILE COMPENSATION FOR THE EXECUTIVE TEAM IS SET AND APPROVED BY THE PRESIDENT & CEO. EXECUTIVE SALARY STUDIES ARE UNDERTAKEN BY THE ORGANIZATION PERIODICALLY TO ASSIST IN DETERMINING COMPENSATION.

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the organization: INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number: 22-3087809

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

IREX IS A NOT-FOR-PROFIT ORGANIZATION CONDUCTING SOCIAL SCIENCE RESEARCH THAT STRIVES FOR A MORE JUST, PROSPEROUS, AND INCLUSIVE WORLD WHERE INDIVIDUALS REACH THEIR FULL POTENTIAL, GOVERNMENTS SERVE THEIR PEOPLE, AND COMMUNITIES THRIVE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EDUCATION - SUPPORTS ECONOMIC DEVELOPMENT, SOCIAL REFORM, AND CIVIC PARTICIPATION. IT PROVIDES THE FOUNDATION FOR TOMORROWS LEADERS. IREX WORKS WITH INDIVIDUALS, INSTITUTIONS, AND GOVERNMENTS AROUND THE WORLD TO IMPROVE THE QUALITY OF TEACHING AND LEARNING, INSIDE AND OUTSIDE THE CLASSROOM. WE WORK WITH TEACHERS AND ADMINISTRATORS, FORM SCHOOL THROUGH UNIVERSITY AND PROFESSIONAL TRAINING.

YOUTH - OUR YOUTH PROGRAMS EQUIP YOUNG PEOPLE WITH THE KNOWLEDGE AND SKILLS TO DRIVE PROSITIVE CHANGE. WE INVEST IN YOUTH BY PROMOTING QUALITY EDUCATION, PROFESSIONAL DEVELOPMENT, CIVIC ENGAGEMENT, AND JOB SKILLS. WE FOCUS ESPECIALLY ON SUPPORTING UNDERREPRESENTED YOUNG WOMEN AND MEN WHO AIM TO BECOME COMMUNITY LEADERS AND ACTIVE, INFORMED CITIZENS.

EXPENSES $ 11,700,869.   INCLUDING GRANTS OF $ 2,872,558.   REVENUE $ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

AZERBAIJAN, BENIN, EL SALVADOR, GEORGIA,

GHANA, GUATEMALA, IRAQ, JORDAN,

KENYA, KYRGYZSTAN, LATVIA, MOLDOVA,

Name of the organization INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number 22-3087809

MOZAMBIQUE, SERBIA, SRI LANKA, SOUTH AFRICA, TANZANIA, TUNISIA, TURKEY, UKRAINE

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 WAS REVIEWED THOROUGHLY BY THE ORGANIZATION'S TREASURER IN INITIAL DRAFT AND FINAL FORM PRIOR TO FILING. THE BOARD OF DIRECTORS HAVE AUTHORIZED THE MEMBERS OF THE FINANCE COMMITTEE TO REVIEW THE FINAL COPY OF THE RETURN. THE REVIEW BY THE FINANCE COMMITTEE WAS CONDUCTED PRIOR TO FILING THE FORM 990. THE FORM 990 WAS MADE AVAILABLE ELECTRONICALLY TO ALL THE MEMBERS OF THE BOARD OF DIRECTORS BEFORE IT WAS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF GOVERNORS AT THEIR NOVEMBER 2010 MEETING ADOPTED AN ANNUAL CONFLICT OF INTEREST SUBMISSION DISCLOSURE REQUIREMENT FOR EACH GOVERNOR. A SIMILAR DISCLOSURE IS REQUIRED FOR ALL MEMBERS OF STAFF SENIOR MANAGEMENT GROUP. IN ADDITION, IREX HAS A WRITTEN CONFLICT OF INTEREST POLICY COVERING EMPLOYEES. AFTER THE ANNUAL DISCLOSURERS ARE SUBMITTED, THEY ARE REVIEWED BY THE OFFICE TO THE PRESIDENT (FOR BOARD MEMBERS) OR THE CHIEF OF STAFF (FOR SENIOR STAFF). IF THERE IS A POTENTIAL OR PERCEIVED CONFLICT, THE MATTER IS ELEVATED TO THE PRESIDENT AND CHAIRPERSON OF THE BOARD (FOR BOARD MEMBERS) OR THE PRESIDENT AND CHIEF OF STAFF (FOR SENIOR STAFF). IF THERE IS A CONFLICT, THE PERSON WOULD RECUSE THEMSELVES FROM ANY DELIBERATIONS OR DECISION-MAKING RELATED TO THE TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

THE PRESIDENT'S ANNUAL SALARY INCREASE AND AWARD ARE DETERMINED BY THE CHAIRPERSON OF THE BOARD OF GOVERNORS IN CONSULTATION WITH THE MEMBERS OF THE EXECUTIVE COMMITTEE. ANNUAL SALARY INCREASES AND AWARDS FOR OTHER

Name of the organization INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number 22-3087809

OFFICERS AND KEY EMPLOYEES ARE DETERMINED BY THE PRESIDENT BASED ON ANNUALLY ESTABLISHED INSTITUTIONAL SALARY INCREASE RANGES FOR ALL DC PAID EMPLOYEES. ANY OFFFICER OR KEY EMPLOYEE AWARDS ARE DETERMINED BY THE PRESIDENT WITHIN THE PARAMETERS OF AN EMPLOYEE AWARD PLAN ADOPTED BY THE BOARD OF GOVERNORS. FINALLY ALL OTHER OFFICER AND KEY EMPLOYEE SALARY INCREASES AND AWARDS (IF ANY) ARE REVIEWED BY THE PRESIDENT WITH THE CHAIRPERSON OF THE BOARD. ANNUALLY, IREX ACQUIRES SALARY SURVEY INFORMATION FROM A VARIETY OF SOURCES AND MAKES ADJUSTMENTS OF SALARY RANGES, IF NECESSARY. DELIBERATIONS AND DECISIONS REGARDING THE DETERMINATION OF COMPENSATION, SUCH AS SALARY INCREASES AND AWARDS, ARE CONTEMPORANEOUSLY DOCUMENTED.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. COPIES OF THE FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE IREX WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

RETURN GRANTS	24,277.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC.

Employer identification number 22-3087809

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
TOGETHER WE THRIVE LLC - 22-3087809 1275 K STREET NW, STE 600 WASHINGTON, DC 20005	SOCIAL WELFARE	DISTRICT OF COLUMBIA	0.	5,000.	IREX

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
ACADEMY FOR INTERNATIONAL EDUCATION & RESEARCH INC. - 05-0579805, 1275 K STREET NW, NO. 600, WASHINGTON, DC 20005	SOCIAL WELFARE	VIRGINIA	501(C)(3)	LINE 7	IREX		X

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

Schedule R (Form 990) 2020

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

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

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

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

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

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

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

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

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

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Form **5713** (Rev. December 2010) Department of the Treasury Internal Revenue Service

International Boycott Report

For tax year beginning JULY 1, 2020 , and ending JUNE 30, 2021 .

▶ Controlled groups, see instructions.

OMB No. 1545-0216

Attachment Sequence No. 123

Paper filers must file in duplicate (see When and Where to File in the instructions)

Name	Identifying number
INTERNATIONAL RESEARCH & EXCHANGES BOARD, INC	22-3087809

Number, street, and room or suite no. If a P.O. box, see instructions.
1275 K STREET NW

City or town, state, and ZIP code
WASHINGTON, DC 20005

Address of service center where your tax return is filed
KANSAS CITY, MO

Type of filer (check one):
☐ Individual ☐ Partnership ☒ Corporation ☐ Trust ☐ Estate ☐ Other

1 Individuals - Enter adjusted gross income from your tax return (see instructions)

2 Partnerships and corporations:

a Partnerships - Enter each partner's name and identifying number.

b Corporations - Enter the name and employer identification number of each member of the controlled group (as defined in section 993(a)(3)). Do not list members included in the consolidated return; instead, attach a copy of Form 851. List all other members of the controlled group not included in the consolidated return.

If you list any corporations below or if you attach Form 851, you must designate a common tax year. Enter on line 4b the name and employer identification number of the corporation whose tax year is designated.

Name	Identifying number

If more space is needed, attach additional sheets and check this box ▶ ☐

	Code	Description
c Enter principal business activity code and description (see instructions)	813000	SOCIAL ADVOCACY
d IC-DISCs - Enter principal product or service code and description (see instructions)		

3 Partnerships - Each partnership filing Form 5713 must give the following information:

a Partnership's total assets (see instructions)

b Partnership's ordinary income (see instructions)

4 Corporations - Each corporation filing Form 5713 must give the following information:

a Type of form filed (Form 1120, 1120-FSC, 1120-IC-DISC, 1120-L, 1120-PC, etc.) 990

b Common tax year election (see instructions)

(1) Name of corporation ▶ INTERNATIONAL RESEARCH & EXCHANGES BOAR

(2) Employer identification number 22-3087809

(3) Common tax year beginning 07/01/20 , and ending 06/30/21 .

c Corporations filing this form enter:

(1) Total assets (see instructions) 28,553,118.

(2) Taxable income before net operating loss and special deductions (see instructions)

5 Estates or trusts - Enter total income (Form 1041, page 1)

6 Enter the total amount (before reduction for boycott participation or cooperation) of the following tax benefits (see instructions):

a Foreign tax credit

b Deferral of earnings of controlled foreign corporations

c Deferral of IC-DISC income

d FSC exempt foreign trade income

e Foreign trade income qualifying for the extraterritorial income exclusion

Please Sign Here

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

▶ Signature Date ▶ Title

		Yes	No
7a	Are you a U.S. shareholder (as defined in section 951(b)) of any foreign corporation (including a FSC that does not use the administrative pricing rules) that had operations reportable under section 999(a)?		X
b	If the answer to question 7a is "Yes," is any foreign corporation a controlled foreign corporation (as defined in section 957(a))?		X
c	Do you own any stock of an IC-DISC?		X
d	Do you claim any foreign tax credit?		X
e	Do you control (within the meaning of section 304(c)) any corporation (other than a corporation included in this report) that has operations reportable under section 999(a)?		X
	If "Yes," did that corporation participate in or cooperate with an international boycott at any time during its tax year that ends with or within your tax year?		X
f	Are you controlled (within the meaning of section 304(c)) by any person (other than a person included in this report) who has operations reportable under section 999(a)?		X
	If "Yes," did that person participate in or cooperate with an international boycott at any time during its tax year that ends with or within your tax year?		X
g	Are you treated under section 671 as the owner of a trust that has reportable operations under section 999(a)?		X
h	Are you a partner in a partnership that has reportable operations under section 999(a)?		X
i	Are you a foreign sales corporation (FSC) (as defined in section 922(a), as in effect before its repeal)?		X
j	Are you excluding extraterritorial income (defined in section 114(e)) as in effect before its repeal) from gross income?		X

Part I **Operations in or Related to a Boycotting Country** (See instructions)

		Yes	No
8	**Boycott of Israel -** Did you have any operations in or related to any country (or with the government, a company, or a national of that country) associated in carrying out the boycott of Israel which is on the list maintained by the Secretary of the Treasury under section 999(a)(3)? (See **Boycotting Countries** in the instructions.)	X	

If "Yes," complete the following table. If more space is needed, attach additional sheets using the exact format and check this box ▶ ☐

	Name of country (1)	Identifying number of person having operations (2)	Principal business activity Code (3)	Principal business activity Description (4)	IC-DISCs only - Enter product code (5)
a	IRAQ	22-3087809	813000	RELIGIOUS, GRANTMAKING, CIVIC, PROF ORG	
b	SYRIA	22-3087809	813000	RELIGIOUS, GRANTMAKING, CIVIC, PROF ORG	
c	UNITED ARAB EMIRATES	22-3087809	813000	RELIGIOUS, GRANTMAKING, CIVIC, PROF ORG	
d					
e					
f					
g					
h					
i					
j					
k					
l					
m					
n					
o					

9 **Nonlisted countries boycotting Israel -** Did you have operations in any nonlisted country which you know or have reason to know requires participation in or cooperation with an international boycott directed against Israel? Yes: X No:

If "Yes," complete the following table. If more space is needed, attach additional sheets using the exact format and check this box ▶ ☐

	Name of country (1)	Identifying number of person having operations (2)	Principal business activity Code (3)	Principal business activity Description (4)	IC-DISCs only - Enter product code (5)
a	JORDAN	22-3087809	813000	RELIGIOUS, GRANTMAKING, CIVIC, PROF ORG	
b	TUNISIA	22-3087809	813000	RELIGIOUS, GRANTMAKING, CIVIC, PROF ORG	
c					
d					
e					
f					
g					
h					

10 **Boycotts other than the boycott of Israel -** Did you have operations in any other country which you know or have reason to know requires participation in or cooperation with an international boycott other than the boycott of Israel? Yes: No: X

If "Yes," complete the following table. If more space is needed, attach additional sheets using the exact format and check this box ▶ ☐

	Name of country (1)	Identifying number of person having operations (2)	Principal business activity Code (3)	Principal business activity Description (4)	IC-DISCs only - Enter product code (5)
a					
b					
c					
d					
e					
f					
g					
h					

		Yes	No
11	Were you requested to participate in or cooperate with an international boycott? If "Yes," attach a copy (in English) of any and all such requests received during your tax year. If the request was in a form other than a written request, attach a separate sheet explaining the nature and form of any and all such requests. (See instructions.)		X
12	Did you participate in or cooperate with an international boycott? If "Yes," attach a copy (in English) of any and all boycott clauses agreed to, and attach a general statement of the agreement. If the agreement was in a form other than a written agreement, attach a separate sheet explaining the nature and form of any and all such agreements. (See instructions.)		X

Note: If the answer to either question 11 or 12 is "Yes," you must complete the rest of Form 5713. If you answered "Yes" to question 12, you must complete Schedules A and C or B and C (Form 5713).

Part II Requests for and Acts of Participation in or Cooperation With an International Boycott

	Requests Yes	Requests No	Agreements Yes	Agreements No
13 a Did you receive requests to enter into, or did you enter into, any agreement (see instructions):				
(1) As a condition of doing business directly or indirectly within a country or with the government, a company, or a national of a country to -				
(a) Refrain from doing business with or in a country which is the object of an international boycott or with the government, companies, or nationals of that country?		X		X
(b) Refrain from doing business with any U.S. person engaged in trade in a country which is the object of an international boycott or with the government, companies, or nationals of that country?		X		X
(c) Refrain from doing business with any company whose ownership or management is made up, in whole or in part, of individuals of a particular nationality, race, or religion, or to remove (or refrain from selecting) corporate directors who are individuals of a particular nationality, race, or religion?		X		X
(d) Refrain from employing individuals of a particular nationality, race, or religion?		X		X
(2) As a condition of the sale of a product to the government, a company, or a national of a country, to refrain from shipping or insuring products on a carrier owned, leased, or operated by a person who does not participate in or cooperate with an international boycott?		X		X

b Requests and agreements - If the answer to any part of 13a is "Yes," complete the following table. If more space is needed, attach additional sheets using the exact format and check this box ▶ ☐

	Name of country (1)	Identifying number of person receiving the request or having the agreement (2)	Principal business activity Code (3)	Principal business activity Description (4)	IC-DISCs only - Enter product code (5)	Number of requests Total (6)	Number of requests Code (7)	Number of agreements Total (8)	Number of agreements Code (9)
a									
b									
c									
d									
e									
f									
g									
h									
i									
j									
k									
l									
m									
n									
o									
p									

Type of cooperation or participation: columns (6)–(9).