

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 black lung benefit trust or private foundation)

OMB No. 1545-0047

**2008**

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the **2008** calendar year, or tax year beginning **APR 1, 2008** and ending **DEC 31, 2008**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C</b> Name of organization <b>GlobalGiving Foundation, Inc.</b> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1023 15th Street, N.W.</b> City or town, state or country, and ZIP + 4 <b>Washington, DC 20005</b>	<b>D</b> Employer identification number <b>30-0108263</b>  <b>E</b> Telephone number <b>202-232-5784</b>  <b>G</b> Gross receipts \$ <b>10,423,922.</b> <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>F</b> Name and address of principal officer: <b>Mari Kuraishi</b> <b>1816 12th Street, NW, Washington, DC 20009</b>		<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( <b>3</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 <b>J</b> Website: ▶ <b>www.globalgiving.com</b> <b>K</b> Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>L</b> Year of formation: <b>2002</b> <b>M</b> State of legal domicile: <b>DE</b>	

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>See Part III, line 1</u>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>3</b>
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>2</b>
<b>5</b>	Total number of employees (Part V, line 2a)	<b>5</b>	<b>0</b>
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>30</b>
<b>7a</b>	Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>7a</b>	<b>0.</b>
<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>
<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>7,418,503.</b>	<b>9,636,268.</b>
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>128,000.</b>	<b>345,525.</b>
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>560,813.</b>	<b>442,129.</b>
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>3,271.</b>	<b>8,110,587.</b>
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>8,110,587.</b>	<b>10,423,922.</b>
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>3,134,357.</b>	<b>5,758,779.</b>
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>416,337.</b>	<b>477,026.</b>
<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>592,642.</b>	<b>400,283.</b>	<b>520,754.</b>
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>327,357.</b>	<b>702,070.</b>
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>4,278,334.</b>	<b>7,458,629.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>3,832,253.</b>	<b>2,965,293.</b>
<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Year</b>	<b>End of Year</b>
<b>21</b>	Total liabilities (Part X, line 26)	<b>9,584,034.</b>	<b>5,423,086.</b>
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>164,093.</b>	<b>404,105.</b>
		<b>9,419,941.</b>	<b>5,018,981.</b>

**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.				
<b>Sign Here</b>	Signature of officer  <b>Mari Kuraishi, President</b> Type or print name and title	Date <b>11/16/09</b>		
<b>Paid Preparer's Use Only</b>	Preparer's signature ▶ Firm's name (or yours if self-employed), address, and ZIP + 4 <b>GELMAN, ROSENBERG &amp; FREEDMAN</b> <b>4550 MONTGOMERY AVE., SUITE 650 NORTH</b> <b>BETHESDA, MARYLAND 20814-2930</b>	Date <b>11-10-09</b>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)  EIN ▶  Phone no. ▶ <b>(301) 951-9090</b>

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

**Part III Statement of Program Service Accomplishments** (see instructions)1 Briefly describe the organization's mission: See Schedule O2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

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

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 6,490,504. including grants of \$ 5,758,779. ) (Revenue \$ 345,525. )  
Direct grants disbursed to over 505 projects in 80 countries to support, among other things, poverty alleviation, health, education, community development, environmental protection, and promotion of sustainable energy.

Direct support to project leaders including the development of tools for their use in the GlobalGiving marketplace, market information and analysis, best practice dissemination. Activities also included third-party evaluation of projects funded by the GlobalGiving Foundation.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

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

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ► \$ 6,490,504. (Must equal Part IX, Line 25, column (B).)

**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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	X	
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b> Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28a</b> X	
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28b</b>	X
<b>c</b> Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28c</b> X	
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<b>29</b> X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	<b>34</b> X	
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<b>35</b> X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	<b>37</b>	X

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**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	13	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	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	0	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	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)?		X
<b>b</b>	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	X	
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	X	
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	N/A	
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?	N/A	
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter: N/A		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter: N/A		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	
		12b	

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**Part VI Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body	1a	3
<b>b</b> Enter the number of voting members that are independent	1b	2
<b>2</b> 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
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
<b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
<b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
<b>6</b> Does the organization have members or stockholders?	6	X
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	8a	X
<b>b</b> Each committee with authority to act on behalf of the governing body?	8b	X
<b>9a</b> Does the organization have local chapters, branches, or affiliates?	9a	X
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
<b>10</b> Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
<b>11</b> Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X

**Section B. Policies**

	Yes	No
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
<b>13</b> Does the organization have a written whistleblower policy?	13	X
<b>14</b> Does the organization have a written document retention and destruction policy?	14	X
<b>15</b> 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:		
<b>a</b> The organization's CEO, Executive Director, or top management official?	15a	X
<b>b</b> Other officers or key employees of the organization?	15b	X
Describe the process in Schedule O. (see instructions)		
<b>16a</b> 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>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	X

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☒ Own website    ☐ Another's website    ☒ Upon request

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

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **Eula Dyson, Controller - 202-232-5794**  
**1816 12th St., NW, Washington, DC 20009**



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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Total</b>								230,786.	281,120.	3,800.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 0

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	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.

(A) Name and business address	(B) Description of services	(C) Compensation
Many Futures, Inc., 1816 12th Street, NW, 3rd floor, Washington, DC 20009	Professional fundraising fees	520,754.
Many Futures, Inc., 1816 12th Street, NW, 3rd floor, Washington, DC 20009	Web services	237,500.
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization <span style="float: right;">2</span>		



**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	9,636,268.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		78,919.				
	<b>h Total.</b> Add lines 1a-1f .....			9636268.			
Program Service Revenue	<b>2 a</b> Consulting services .....	Business Code	541900	345,525.	345,525.		
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....			345,525.			
	Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			442,129.		
<b>4</b> Income from investment of tax-exempt bond proceeds .....							
<b>5</b> Royalties .....							
<b>6 a</b> Gross Rents .....		(i) Real	(ii) Personal				
<b>b</b> Less: rental expenses .....							
<b>c</b> Rental income or (loss) .....							
<b>d</b> Net rental income or (loss) .....							
<b>7 a</b> Gross amount from sales of assets other than inventory .....		(i) Securities	(ii) Other				
<b>b</b> Less: cost or other basis and sales expenses .....							
<b>c</b> Gain or (loss) .....							
<b>d</b> Net gain or (loss) .....							
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....		<b>a</b>					
<b>b</b> Less: direct expenses .....		<b>b</b>					
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....		<b>a</b>					
<b>b</b> Less: direct expenses .....		<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....		<b>a</b>					
<b>b</b> Less: cost of goods sold .....		<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory .....							
Miscellaneous Revenue			Business Code				
<b>11 a</b> .....							
<b>b</b> .....							
<b>c</b> .....							
<b>d</b> All other revenue .....							
<b>e Total.</b> Add lines 11a-11d .....							
<b>12 Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e .....				10,423,922.	345,525.	0.	442,129.

**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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21 .....	4,596,101.	4,596,101.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....	1,162,678.	1,162,678.		
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	175,941.	138,986.	14,149.	22,806.
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 .....	236,830.	152,552.	66,059.	18,219.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	3,112.	838.	1,080.	1,194.
9 Other employee benefits .....	25,656.	20,586.	4,658.	412.
10 Payroll taxes .....	35,487.	26,924.	6,601.	1,962.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	33,149.		33,149.	
c Accounting .....	62,428.	27,210.	35,218.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17 .....	520,754.			520,754.
f Investment management fees .....				
g Other .....	139,612.	70,638.	66,337.	2,637.
12 Advertising and promotion .....	9,856.	2,168.	6,998.	690.
13 Office expenses .....	6,756.	1,013.	5,405.	338.
14 Information technology .....	237,500.	237,500.		
15 Royalties .....				
16 Occupancy .....	24,907.	11,346.	5,051.	8,510.
17 Travel .....	30,661.	8,718.	20,281.	1,662.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....				
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	6,061.	2,761.	1,229.	2,071.
23 Insurance .....	2,081.	948.	422.	711.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>GlobalGiving UK startup</u> .....	76,649.	16,863.	54,421.	5,365.
b <u>Abandoned software cost</u> .....	32,637.	7,180.	23,172.	2,285.
c <u>Miscellaneous</u> .....	29,325.	5,494.	20,805.	3,026.
d <u>State reg. &amp; other</u> .....	10,448.		10,448.	
e .....				
f All other expenses .....				
25 <b>Total functional expenses.</b> Add lines 1 through 24f	7,458,629.	6,490,504.	375,483.	592,642.
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing .....	47,300.	1	19,140.
	2 Savings and temporary cash investments .....	3,626,006.	2	2,542,560.
	3 Pledges and grants receivable, net .....		3	
	4 Accounts receivable, net .....	33,629.	4	2,358,794.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....	10,755.	9	3,600.
	10a Land, buildings, and equipment: cost basis ... 10a 122,316.			
	b Less: accumulated depreciation. Complete Part VI of Schedule D ... 10b 19,022.	49,592.	10c	103,294.
	11 Investments - publicly traded securities .....		11	
	12 Investments - other securities. See Part IV, line 11 .....	5,791,752.	12	
	13 Investments - program-related. See Part IV, line 11 .....		13	370,650.
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....	25,000.	15	25,048.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	9,584,034.	16	5,423,086.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	53,282.	17	333,150.
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow account liability. Complete Part IV of Schedule D .....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable .....		24	
	25 Other liabilities. Complete Part X of Schedule D .....	110,811.	25	70,955.
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	164,093.	26	404,105.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets .....	8,431,548.	27	3,208,696.
	28 Temporarily restricted net assets .....	988,393.	28	1,810,285.
	29 Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds .....		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32 Retained earnings, endowment, accumulated income, or other funds .....		32	
	33 <b>Total net assets or fund balances</b> .....	9,419,941.	33	5,018,981.
	34 <b>Total liabilities and net assets/fund balances</b> .....	9,584,034.	34	5,423,086.

**Part XI Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	2a	X
b Were the organization's financial statements audited by an independent accountant? .....	2b	X
c If "Yes" to lines 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
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? .....	3b	

## Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

# 2008

**Open to Public  
Inspection**

Name of the organization

GlobalGiving Foundation, Inc.

Employer identification number

30-0108263

<b>Part I</b>	<b>Reason for Public Charity Status</b> (All organizations must complete this part.) (see instructions)
---------------	---------------------------------------------------------------------------------------------------------

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 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.)

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

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

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

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

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

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

9 ☐ An 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 the Part III.)

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

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I                      b ☐ Type II                      c ☐ Type III - Functionally integrated                      d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? \_\_\_\_\_

(ii) A family member of a person described in (i) above? \_\_\_\_\_

(iii) A 35% controlled entity of a person described in (i) or (ii) above? \_\_\_\_\_

h Provide the following information about the organizations the organization supports.

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2008

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,354,358.	4,457,328.	3,336,767.	7,418,503.	9,636,268.	27,203,224.
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 <b>Total.</b> Add lines 1 - 3	2,354,358.	4,457,328.	3,336,767.	7,418,503.	9,636,268.	27,203,224.
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)						10,076,269.
6 <b>Public Support.</b> Subtract line 5 from line 4.						17,126,955.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	2,354,358.	4,457,328.	3,336,767.	7,418,503.	9,636,268.	27,203,224.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	57,021.	203,817.	393,480.	560,813.	442,129.	1,657,260.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				3,271.		3,271.
11 <b>Total support.</b> Add lines 7 through 10						28,863,755.
12 Gross receipts from related activities, etc. (see instructions)					12	890,716.

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

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	59.34 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	57.30 %
16a <b>33 1/3% support test - 2008.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b <b>33 1/3% support test - 2007.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a <b>10% -facts-and-circumstances test - 2008.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b <b>10% -facts-and-circumstances test - 2007.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2008

**Part III Support Schedule for Organizations Described in Section 509(a)(2)** (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 <b>Total.</b> Add lines 1 - 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 .....						
c Add lines 7a and 7b .....						
8 <b>Public support</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 IV.) .....						
13 <b>Total support</b> (Add lines 9, 10c, 11, and 12.) .....						
14 <b>First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) .....	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g .....	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) .....	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h .....	18	%

19a **33 1/3% support tests - 2008.** 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 - 2007.** 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 .....

## 2008

\*\*\* Not Open to Public Inspection \*\*\*

Total Excess Contributions to Schedule A, Part II, Line 5	10,076,269.
-----------------------------------------------------------	-------------

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

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

**2008**

Name of the organization

Employer identification number

GlobalGiving Foundation, Inc.

30-0108263

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 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 organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

☒ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

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

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$ \_\_\_\_\_

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)



Name of organization

Employer identification number

GlobalGiving Foundation, Inc.

30-0108263

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 502,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 2,138,817.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

GlobalGiving Foundation, Inc.

Employer identification number

30-0108263

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate 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? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06 .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds? ..... ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 SFAS 116 relating to these items:

a Revenues included in 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 accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition  
b ☐ Scholarly research

- d ☐ Loan or exchange programs  
e ☐ Other \_\_\_\_\_

c ☐ Preservation for future generations

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

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 Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to 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 XIV 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? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

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

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

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ \_\_\_\_\_ %  
b Permanent endowment ▶ \_\_\_\_\_ %  
c Term endowment ▶ \_\_\_\_\_ %

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		15,802.	6,820.	8,982.
d Equipment				
e Other		106,514.	12,202.	94,312.
<b>Total.</b> Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				103,294.

Schedule D (Form 990) 2008

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products .....		
Closely-held equity interests .....		
Other .....		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶		

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
INVESTMENT IN MANY FUTURES, INC.	370,650.	End-of-Year Market Value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ▶	370,650.	

[illegible]

(a) Description of liability	(b) Amount
Federal income taxes	
<b>DEPOSIT</b>	<b>70,955.</b>
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25.)	<b>70,955.</b>

832053  
12-23-08

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	10,423,922.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,458,629.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	2,965,293.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,719,490.
9	Total adjustments (net). Add lines 4-8	9	-1,719,490.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	1,245,803.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	10,042,543.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	24,727.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-406,106.
e	Add lines 2a through 2d	2e	-381,379.
3	Subtract line 2e from line 1	3	10,423,922.
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 XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	10,423,922.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	8,796,740.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	24,727.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	1,313,384.
e	Add lines 2a through 2d	2e	1,338,111.
3	Subtract line 2e from line 1	3	7,458,629.
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 XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	7,458,629.

**Part XIV Supplemental Information**

Complete this part to 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; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

**Part XI, Line 8 - Other Adjustments:**

Many Futures, Inc. net income included in the audit and not the  
990: -1719490.

**Part XII, Line 2d - Other Adjustments:**

Rev. & eliminations re: Many Futures, Inc. included on audit &  
not on 990: -406106.

**Part XIV** Supplemental Information *(continued)*

Part XIII, Line 2d - Other Adjustments:

Exp. & eliminations re: Many Futures, Inc. included on audit &  
not 990: 1313384.

**Schedule F**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

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

Name of the organization

Employer identification number

GlobalGiving Foundation, Inc.

30-0108263

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

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

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

**3 Activities per Region.** (Use Schedule F-1 (Form 990) if additional space is needed.)

(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 in region
Central America and the Caribbean	0	0	Grants		39,591.
East Asia and the Pacific	0	0	Grants		260,794.
Europe	0	0	Grants		227,825.
Middle East and North Africa	0	0	Grants		385.
North America	0	0	Grants		43,912.
South America	0	0	Grants		37,189.
South Asia	0	0	Grants		303,278.
Sub-Saharan Africa	0	0	Grants		249,704.
<b>Totals</b> ▶					<b>1,162,678.</b>

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

Schedule F (Form 990) 2008

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Use Schedule F-1 (Form 990) 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			East Asia and the Pacific	to support grassroots projects worldwide	200000	wire transfer	0.		
			East Asia and the Pacific	to support grassroots projects worldwide	28,127	wire transfer	0.		
			South Asia	to support grassroots projects worldwide	143907	wire transfer	0.		
			Europe	to support grassroots projects worldwide	132547	wire transfer	0.		
			Sub-Saharan Africa	to support grassroots projects worldwide	70,794	wire transfer	0.		
			Europe	to support grassroots projects worldwide	64,738	wire transfer	0.		
			South Asia	to support grassroots projects worldwide	61,200	wire transfer	0.		
			Sub-Saharan Africa	to support grassroots projects worldwide	55,495	wire transfer	0.		

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ☐ 22

3 Enter total number of other organizations or entities ☐ 4





**Part IV** Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

Schedule F, Part I, Line 2: GlobalGiving is a sub-grantor to hundreds of foreign-based non-profits around the world. We perform 501(c)(3) equivalency determination prior to disbursement (through due diligence review). We monitor the use of funds through public quarterly self-reports from recipient organizations, occasional third-party visits and reports, and limited contractor auditing by professionals. The scope of funds is restricted to the purposes outlined by each recipient organization on a corresponding project page found on the foundation's website, [www.globalgiving.com](http://www.globalgiving.com).

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

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	to support grassroots projects worldwide	37,450.	wire transfer	0.		
		South America	to support grassroots projects worldwide	18,000.	wire transfer	0.		
		South Asia	to support grassroots projects worldwide	15,183.	wire transfer	0.		
		North America	to support grassroots projects worldwide	15,000.	wire transfer	0.		
		East Asia and the Pacific	to support grassroots projects worldwide	14,577.	wire transfer	0.		
		Europe	to support grassroots projects worldwide	12,832.	wire transfer	0.		
		Sub-Saharan Africa	to support grassroots projects worldwide	11,387.	wire transfer	0.		
		South Asia	to support grassroots projects worldwide	11,056.	wire transfer	0.		
		South Asia	to support grassroots projects worldwide	10,443.	wire transfer	0.		

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

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	to support grassroots projects worldwide	9,624	wire transfer	0.		
		Sub-Saharan Africa	to support grassroots projects worldwide	7,227	wire transfer	0.		
		Sub-Saharan Africa	to support grassroots projects worldwide	6,686	wire transfer	0.		
		Sub-Saharan Africa	to support grassroots projects worldwide	6,323	wire transfer	0.		
		Sub-Saharan Africa	to support grassroots projects worldwide	6,113	wire transfer	0.		
		Sub-Saharan Africa	to support grassroots projects worldwide	5,843	wire transfer	0.		
		Sub-Saharan Africa	to support grassroots projects worldwide	5,622	wire transfer	0.		
		Europe	to support grassroots projects worldwide	5,269	wire transfer	0.		
		East Asia and the Pacific	to support grassroots projects worldwide	5,237	wire transfer	0.		

## Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

# 2008

**Open To Public Inspection**

▶ **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization

Employer identification number

30-0108263

GlobalGiving Foundation, Inc.

Part I	Fundraising Activities.
--------	-------------------------

Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

- a ☐ Mail solicitations
- b ☒ Email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

**2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes☐ No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Many Futures, Inc.	internet platform for donors		X	5207540.	520,754.	4686786.
Total				5207540.	520,754.	4686786.

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

AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NM, NY, OH  
OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts .....				
	2 Less: Charitable contributions .....				
	3 Gross revenue (line 1 minus line 2) .....				
Direct Expenses	4 Cash prizes .....				
	5 Non-cash prizes .....				
	6 Rent/facility costs .....				
	7 Other direct expenses .....				
	8 Direct expense summary. Add lines 4 through 7 in column (d) .....				( )
9 Net income summary. Combine lines 3 and 8 in column (d) .....					

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1 Gross revenue .....				
	2 Cash prizes .....				
	3 Non-cash prizes .....				
	4 Rent/facility costs .....				
	5 Other direct expenses .....				
Direct Expenses	6 Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) .....				( )
	8 Net gaming income summary. Combine lines 1 and 7 in column (d) .....				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states? .....	9a	
b If "No," Explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? .....	10a	
b If "Yes," Explain: _____		
11 Does the organization operate gaming activities with nonmembers? .....	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? .....	12	

		Yes	No
<b>13</b> Indicate the percentage of gaming activity operated in:			
a The organization's facility	<b>13a</b> %		
b An outside facility	<b>13b</b> %		
<b>14</b> Provide the name and address of the person who prepares the organization's gaming/special events books and records:			
Name ▶ _____			
Address ▶ _____			
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue? .....		<b>15a</b>	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____			
c If "Yes," enter name and address:			
Name ▶ _____			
Address ▶ _____			
<b>16</b> Gaming manager information:			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
<b>17</b> Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? .....		<b>17a</b>	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the U.S.**

OMB No. 1545-0047

2008

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.  
► Attach to Form 990.

Open to Public  
Inspection

Name of the organization

**GlobalGiving Foundation, Inc.**

Employer identification number  
**30-0108263**

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

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

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) 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 non-cash assistance	(h) Purpose of grant or assistance
ActionAid International USA 1420 K Street, NW, #900 Washington, DC 20005	52-2277575	501(c)(3)	63,435.	0.			to support grassroots projects worldwide
Adopt-a-Village in Guatemala 1264 NE 156th St. N. Miami Beach, FL 33162	65-0250478	501(c)(3)	28,764.	0.			to support grassroots projects worldwide
Africa Against Aids 20511 68th Ave., #F-102 Lynwood, WA 98087	77-0609246	N/A	67,500.	0.			to support grassroots projects worldwide
American Red Cross 2025 E Street, NW Washington, DC 20006	53-0196605	501(c)(3)	39,388.	0.			to support grassroots projects worldwide
Ann Foundation Inc 20 Old Shelter Rock Rd. Roslyn, NY 11576	11-3517567	501(c)(3)	9,690.	0.			to support grassroots projects worldwide
ASSET India Foundation 6201 N. Camino Esquina Tucson, AZ 85718	20-5139364	501(c)(3)	37,472.	0.			to support grassroots projects worldwide

**2** Enter total number of section 501(c)(3) and government organizations **67.**

**3** Enter total number of other organizations **4.**

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

Schedule I (Form 990) 2008



**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) 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 non-cash assistance

**Part IV**

**Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule I, Part I, Line 2: A written report signed by an appropriate officer and/or agent must be furnished to the Foundation to the attention of Mari Kuraishi, President, within six (6) months of the expenditure date above or the grant is otherwise terminated. This report must include all information related to expenditures under the grant (including salaries, travel, and supplies).

The recipient organization's written report, including the final written report, must contain two parts: a narrative account and a financial account

**SCHEDULE I-1**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**  
**Attach to Form 990 to list additional information for**  
**Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

2008

**Open to Public**  
**Inspection**

Name of the organization

**GlobalGiving Foundation, Inc.**

**Employer identification number**  
**30-0108263**

**Part I** **Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Atlas Service Corps 1133 19th St. NW, 9th Floor Washington, DC 20036	76-0834735	501(c)(3)	51,581.	0.			to support grassroots projects worldwide
B-Labs Attn: B.Houlahan, 655 Leopard Rd. Berwyn, PA 19312	20-5958773	501(c)(3)	25,000.	0.			to support grassroots projects worldwide
BRAC USA 11 East 44th St., #1600 New York, NY 10017	20-8456741	501(c)(3)	17,067.	0.			to support grassroots projects worldwide
campusCATALYST Goodcity, C/O D. Bates, 5049 W. Har Chicago, IL 60644	26-0201289	501(c)(3)	6,117.	0.			to support grassroots projects worldwide
Carolina for Kibera, Inc FedEx Global Education Center, Univ. of NC, Box 5145 - Chapel Hill, NC 27599	56-2248495	501(c)(3)	9,962.	0.			to support grassroots projects worldwide
CHF International 8601 Georgia Ave, Suite 800 Silver Spring, MD 20910	52-0846183	501(c)(3)	24,898.	0.			to support grassroots projects worldwide
Creating Hope International (CHI) PO Box 1058 Dearborn, MI 48121	38-3288402	501(c)(3)	35,188.	0.			to support grassroots projects worldwide
Cross Cultural Solutions 2 Clinton Pl. New Rochelle, NY 10801	93-1189960	501(c)(3)	34,697.	0.			to support grassroots projects worldwide
<b>2</b> Enter total number of Section 501(c)(3) and government organizations							
<b>3</b> Enter total number of other organizations							

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047  
2008

**Open to Public  
Inspection**

Name of the organization

**GlobalGiving Foundation, Inc.**

Employer identification number

**30-0108263**

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II).**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Dreams Can Be Foundation 945 Menoher Blvd. Johnstown, PA 15905	31-1745079	501(c)(3)	12,375.	0.			to support grassroots projects worldwide
Engineers Without Borders 4665 Nautilus Court, Suite 300 Boulder, CO 80301	84-1589324	501(c)(3)	25,113.	0.			to support grassroots projects worldwide
Erickson Creative Group 103 North 5th Street Livingston, MT 59047	35-2295318	N/A	12,342.	0.			to support grassroots projects worldwide
Footsteps in Hope MS Conference of the UMC, PO Box 11 Jackson, MS 39215	64-0362395	N/A	17,211.	0.			to support grassroots projects worldwide
Friends of Burkina Faso (FBF) c/o Suzanne Plopper, PO Box 395 Chester, CA 96020	52-2070442	501(c)(3)	60,271.	0.			to support grassroots projects worldwide
Global Links 4809 Penn Ave., #2 Pittsburgh, PA 15224	52-1629060	501(c)(3)	5,080.	0.			to support grassroots projects worldwide
Global Reach International 341 Route 206 Branchville, NJ 07826	41-2045422	501(c)(3)	16,000.	0.			to support grassroots projects worldwide
Global Volunteers Attn: M. Gran, 375 E. Little Canada St. Paul, MN 55117	36-3352680	501(c)(3)	20,251.	0.			to support grassroots projects worldwide

**2** Enter total number of Section 501(c)(3) and government organizations

**3** Enter total number of other organizations

**SCHEDULE I-1**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**  
**Attach to Form 990 to list additional information for**  
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OMB No. 1545-0047

2008

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**Inspection**

Name of the organization

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**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Grassroot Soccer (GRS) 198 Church Street, P.O. Box 712 Norwich, VT 05055	43-1957920	501(c)(3)	25,189.	0.			to support grassroots projects worldwide
GRID Alternatives 3833 Manila Ave. Oakland, CA 94609	26-0043353	501(c)(3)	5,049.	0.			to support grassroots projects worldwide
Half the Sky Foundation 740 Gilman Street Berkeley, CA 94710	95-4714047	501(c)(3)	503,939.	0.			to support grassroots projects worldwide
Hidden Potential Foundation 4814 63rd St. W. Bradenton, FL 34210	65-0970090	N/A	5,120.	0.			to support grassroots projects worldwide
High Atlas Foundation Park West Station, PO Box 21081 New York, NY 10025	85-0478294	N/A	10,041.	0.			to support grassroots projects worldwide
International Development Enterprises - 10403 West Colfax, Suite 500 - Lakewood, CO 80215	23-2220051	N/A	103,837.	0.			to support grassroots projects worldwide
International Development Exchange 827 Valencia St., Suite 101 San Francisco, CA 94110	77-0071852	N/A	17,916.	0.			to support grassroots projects worldwide
International Medical Corps (IMC) 1919 Santa Monica Blvd #300 Santa Monica, CA 90404	95-3949646	N/A	32,161.	0.			to support grassroots projects worldwide
2 Enter total number of Section 501(c)(3) and government organizations							
3 Enter total number of other organizations							

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047  
**2008**

**Open to Public  
Inspection**

Name of the organization

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Employer identification number

**30-0108263**

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II).**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
International Relief Friendship Foundation - 30 Seminary Drive Suite 228 - Barrytown, NY 12507	51-0200715	501(c)(3)	27,612.	0.			to support grassroots projects worldwide
Konbit Sante Cap-Haitien Health Part - PO Box 11281 - Portland, ME 04104	01-0540292	501(c)(3)	5,451.	0.			to support grassroots projects worldwide
Lambi Fund of Haiti PO Box 18955 Washington, DC 20036	52-1843357	501(c)(3)	24,846.	0.			to support grassroots projects worldwide
Lance Armstrong Foundation PO Box 161150 Austin, TX 78716	74-2806618	501(c)(3)	602,918.	0.			to support grassroots projects worldwide
Little Kids Rock, Inc 116 Greenwood Ave. Montclair, NJ 07042	94-3396568	501(c)(3)	9,890.	0.			to support grassroots projects worldwide
MADRE, An International Women's Human Rights - 121 West 27th Street #301 - New York, NY 10001	13-3280194	501(c)(3)	30,448.	0.			to support grassroots projects worldwide
Malaria No More 432 Park Avenue south 13th Floor New York, NY 10016	20-5664575	501(c)(3)	8,218.	0.			to support grassroots projects worldwide
Mama Hope 1360 Mission St., #200 San Francisco, CA 94103	26-0835534	501(c)(3)	6,033.	0.			to support grassroots projects worldwide
<b>2</b> Enter total number of Section 501(c)(3) and government organizations							
<b>3</b> Enter total number of other organizations							

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047  
**2008**

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Name of the organization

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Employer identification number  
**30-0108263**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
March of Dimes 1275 Mamaroneck Avenue White Plains, NY 10605	13-1846366	501(c)(3)	6,043.	0.			to support grassroots projects worldwide
Mary Mother of Peace-Medjugorje Charity - 8617 Irvington Ave. - Bethesda, MD 20817	52-2248969	501(c)(3)	6,773.	0.			to support grassroots projects worldwide
Mercy Corps Dept. W - 3015 SW First Ave. Portland, OR 97201	91-1148123	501(c)(3)	68,531.	0.			to support grassroots projects worldwide
Moving Pictures Inc 1206 Corte Encanto San Marcos, CA 92069	20-5549454	N/A	9,483.	0.			to support grassroots projects worldwide
Near East Foundation (NEF) 90 Broad St, 15th Floor New York, NY 10004	13-1624114	501(c)(3)	13,025.	0.			to support grassroots projects worldwide
Nepalese Youth Opportunity Found (NYOF) - 3030 Bridgeway, #123 - Sausalito, CA 94965	68-0224596	501(c)(3)	19,876.	0.			to support grassroots projects worldwide
New Sudan Education Initiative (NESEI) - 123 Ethan Allen Ave. Box #9 - Colchester, VT 05446	56-2538874	501(c)(3)	9,369.	0.			to support grassroots projects worldwide
Northwestern University - CGE 1902 Sheridan Road Evanston, IL 60208	36-2167817	501(c)(3)	33,820.	0.			to support grassroots projects worldwide

**2** Enter total number of Section 501(c)(3) and government organizations

**3** Enter total number of other organizations

**SCHEDULE I-1**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**  
**Attach to Form 990 to list additional information for**  
**Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047  
2008

**Open to Public**  
**Inspection**

Name of the organization

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Employer identification number  
**30-0108263**

Part I	Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance	
Partners In Health 641 Huntington Ave, 1st Fl. Boston, MA 02115	04-3567502	501(c)(3)	113,231.	0.			to support grassroots projects worldwide	
Partners of the Americas 1424 K St., NW, #700 Washington, DC 20005	52-0848769	501(c)(3)	7,170.	0.			to support grassroots projects worldwide	
Partners Worldwide, Inc 2850 Kalamazoo Ave SE Grand Rapids, MI 49560	38-1708140	501(c)(3)	53,414.	0.			to support grassroots projects worldwide	
Relief International 5455 Wilshire Blvd, #1280 Los Angeles, CA 90036	95-4300662	501(c)(3)	19,833.	0.			to support grassroots projects worldwide	
Root Capital Attn: P. Devaney, 675 Massachusetts Ave. 8th Fl. - Cambridge, MA 02139	04-3478123	501(c)(3)	50,000.	0.			to support grassroots projects worldwide	
Save the Foundation 54 Wilton Rd. Westport, CT 06680	06-0726487	501(c)(3)	37,804.	0.			to support grassroots projects worldwide	
Search for Common Ground 1601 Connecticut Ave., NW, #200 Washington, DC 20009	52-1257425	501(c)(3)	9,000.	0.			to support grassroots projects worldwide	
Students Helping Honduras C/O B. Azzarito 1213 Dandridge St. Fredericksburg, VA 22401	41-2191361	501(c)(3)	52,767.	0.			to support grassroots projects worldwide	
2 Enter total number of Section 501(c)(3) and government organizations								
3 Enter total number of other organizations								

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE I-1**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)  
**▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

2008

Open to Public  
Inspection

Name of the organization

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Employer identification number

**30-0108263**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Surmang Foundation 13536 Gold Hill Rd. Boulder, CO 80302	26-1429491	501(c)(3)	10,864.	0.			to support grassroots projects worldwide
The Baby Buggy, Inc 306 W 37th St, 8th Fl. New York, NY 10018	31-1777082	501(c)(3)	8,457.	0.			to support grassroots projects worldwide
The HealthStore Foundation, Inc 527 Marquette Ave, #1800 Minneapolis, MN 55402	41-1882574	501(c)(3)	67,740.	0.			to support grassroots projects worldwide
The River Fund 11155 Roseland Rd., Unit 16 Sebastian, FL 32958	59-3212877	501(c)(3)	5,417.	0.			to support grassroots projects worldwide
The Sharing Foundation P.O. Box 600 Concord, MA 01742	01-0518534	501(c)(3)	52,104.	0.			to support grassroots projects worldwide
The Smile Train 41 Madison Ave, 28th Fl New York, NY 10010	13-3661416	501(c)(3)	7,474.	0.			to support grassroots projects worldwide
US Assoc for International Migration - 1752 N St, NW, #700 - Washington, DC 20036	52-1525929	501(c)(3)	10,113.	0.			to support grassroots projects worldwide
US Association for UNHCR 1775 K St, NW, #290 Washington, DC 20006	52-1662800	501(c)(3)	941,430.	0.			to support grassroots projects worldwide
<b>2</b> Enter total number of Section 501(c)(3) and government organizations							
<b>3</b> Enter total number of other organizations							



**SCHEDULE I-1**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**  
**▲ Attach to Form 990 to list additional information for**  
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OMB No. 1545-0047

**2008**

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**Inspection**

Name of the organization

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**30-0108263**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Volunteer for Peace Attn: A. Bannon, 1034 Tiffany Rd. Belmont, VT 05730	03-0282748	501(c)(3)	7,372.	0.			to support grassroots projects worldwide
WaterPartners International 2405 Grand Blvd. Kansas City, MO 64113	58-2060131	501(c)(3)	6,116.	0.			to support grassroots projects worldwide
WINGS 793 Ashbury Street San Francisco, CA 94117	31-1759515	501(c)(3)	13,438.	0.			to support grassroots projects worldwide
Women for Women International 4455 Conn. Ave., NW, #200 Washington, DC 20008	52-1838756	501(c)(3)	6,983.	0.			to support grassroots projects worldwide
Women's Micro Finance Initiative 8609 Fenway Drive Bethesda, MD 20817	26-1384627	501(c)(3)	5,413.	0.			to support grassroots projects worldwide
World Food Programme 1819 L St, NW, #400 Washington, DC 20036	13-3843435	501(c)(3)	14,520.	0.			to support grassroots projects worldwide
Zero to Three 2000 M St., NW, #200 Washington, DC 20036	52-1105189	501(c)(3)	5,846.	0.			to support grassroots projects worldwide
WWF David Glass, 1250 24th St. NW Washington, DC 20037	52-1693387	501(c)(3)	557,327.	0.			to support grassroots projects worldwide

**2** Enter total number of Section 501(c)(3) and government organizations

**3** Enter total number of other organizations

GlobalGiving Foundation, Inc.

**3** Enter total number of other organizations

**Part IV** Supplemental Information

of what was accomplished by the expenditure of the grant funds during the period covered by the report.

A. Narrative account. The narrative account should provide a detailed description of what was accomplished by the grant, including a description of the progress made toward achieving the goals of the grant and an assurance that the activities under the grant have been conducted in conformity with the terms of the grant.

B. Financial account. The financial account should provide a financial statement reporting in US dollars, all expenditures of the Foundation grant funds and any income earned on those funds. The financial statement should include only Foundation funds received and expended under this grant during the period covered by the report. It is assumed that the financial statement will be prepared from books and records maintained on a fund-accounting (cash) basis. Only expenditures made in support of the grant purposes should be charged against the grant, and records should be maintained of such expenditures adequate to enable the use of such funds to be checked readily. The financial statement should be accompanied by receipts for purchase of goods or labor necessary for carrying out the activities described above.

If written reports are not submitted to the Foundation on a timely basis, the Foundation will withhold further payments, if any to that organization, and to any affiliate organization under this grant or under any other Foundation grant and prohibits the Foundation from awarding any new grants to that organization or any affiliate organization.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

▶ **Attach to Form 990. To be completed by organizations that  
answered "Yes" to Form 990, Part IV, line 23.**

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

GlobalGiving Foundation, Inc.

Employer identification number

30-0108263

**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</b> If line 1a is 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	<b>1b</b>	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	<b>2</b>	
<b>3</b> Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <input type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Written employment contract <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Compensation survey or study <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a:		
<b>a</b> Receive a severance payment or change of control payment?	<b>4a</b>	<b>X</b>
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?	<b>4b</b>	<b>X</b>
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?	<b>4c</b>	<b>X</b>
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.</b>		
<b>5</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
<b>a</b> The organization?	<b>5a</b>	<b>X</b>
<b>b</b> Any related organization?	<b>5b</b>	<b>X</b>
If "Yes," to line 5a or 5b, describe in Part III.		
<b>6</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
<b>a</b> The organization?	<b>6a</b>	<b>X</b>
<b>b</b> Any related organization?	<b>6b</b>	<b>X</b>
If "Yes" to line 6a or 6b, describe in Part III.		
<b>7</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	<b>7</b>	<b>X</b>
<b>8</b> Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	<b>8</b>	<b>X</b>

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

Schedule J (Form 990) 2008



**SCHEDULE L**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Transactions with Interested Persons**

▶ Attach to Form 990 or Form 990-EZ.  
▶ To be completed by organizations that answered  
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, lines 38a or 40b.

OMB No. 1545-0047

**2008**

Open To Public  
Inspection

Name of the organization

GlobalGiving Foundation, Inc.

Employer identification number

30-0108263

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

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

▶ \$

**Part II Loans to and/or From Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

**Part III Grants or Assistance Benefiting Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

**Part IV Business Transactions Involving Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Many Futures, Inc. (MFI)	Dennis Whittle and	7,718,203.	Effective D		X
Emergence Group	Jim Krejci has a >	38,743.	GGF employs		X
Dennis Whittle	Dennis Whittle is a	758,254.	GGF paid MF		X

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

Schedule L (Form 990 or 990-EZ) 2008

See Schedule O for Schedule L Continuations

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**NonCash Contributions**

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

► To be completed by organizations that answered  
"Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Name of the organization

**GlobalGiving Foundation, Inc.**

Employer identification number

**30-0108263**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....				
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution (historic structures) .....				
14 Qualified conservation contribution (other) ...				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ► ( <u>software</u> )	X	1	60,800	retail value per donor
26 Other ► ( <u>computers</u> )	X	2	18,119	retail value per donor
27 Other ► ( )				
28 Other ► ( )				

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

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for  
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for  
the entire holding period? .....

	Yes	No
30a		X
31		X
32a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

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

Schedule M (Form 990) 2008

**Part II**

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.  
Also complete this part for any additional information.

Schedule M, Part I, Column (b): The organization is reporting the  
total number of donors. One donor gave the software, and two different  
donors gave computer equipment during the year.



Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

**2008**

Open to Public  
Inspection

Name of the organization

GlobalGiving Foundation, Inc.

Employer identification number  
30-0108263

Form 990, Part III, Line 1, Description of Organization Mission:

The GlobalGiving Foundation's charter is to support economic and social development in developing countries in a sustainable manner. The way in which the foundation has chosen to deliver on its mission is by creating an open marketplace of vetted initiatives and projects in different sectors and locations throughout the developing world, and to make these projects available to donors via the internet.

Form 990, Part VI, Section A, line 2: Mari Kuraishi, President of GlobalGiving Foundation, is the spouse of Dennis Whittle, CEO of ManyFutures Inc. and Director/Secretary of GlobalGiving Foundation.

Form 990, Part VI, Section A, line 10: Before filing the completed 990 a copy is sent to the entire board of directors. It is then reviewed and approved by the organization's Chairman.

Form 990, Part VI, Section B, Line 12c: All employees, officers, directors and trustees are required to execute a copy of the organization's conflict of interest policy. Such execution constitutes signing a statement of compliance with the conflict of interest policy annually. Dennis Whittle, Director, recuses himself from discussions and voting on matters pertaining to his wife, Mari Kuraishi, President.

Form 990, Part VI, Section B, Line 15: We carried out a review of all staff under the leadership of the Board director charged with compensation review, with a competitively selected outside consultant. The consultant

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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**2008**  
Open to Public  
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Name of the organization

GlobalGiving Foundation, Inc.

Employer identification number  
30-0108263

carried out a review of all salaries and other compensation against comparability data. The review and various approaches to compensation strategy was then discussed with the board director, and subsequently discussed with and approved by the whole board. The deliberation and decision was duly recorded in the minutes.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AK,AL,AR,AZ,CA,CO,CT,FL,GA,IL,KS,KY,MA,MD,ME,MI,MN,MS,NC,ND,NH,NJ,NM,NY,OH  
OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV

Form 990, Part VI, Section C, Line 19: The financial statements of the organization, the filed 990s and the IRS tax exempt determination letter are posted on the organization's web site. Governing documents and conflict of interest policy are available upon request.

Part XI, line 2b

The Foundation's financial statements were not audited as a stand alone entity. However, the Foundation's financial statements were audited as part of consolidated audited financial statements.

Schedule G, Part I, Line 2b, Column (v): During the year, GlobalGiving Foundation paid \$405,000, and accrued an additional \$115,754, of commissions expenses to Many Futures, Inc. as a 10% commission on certain donations received. These payments were in exchange for Many Futures, Inc. creating, developing, and maintaining an internet platform whereby

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Schedule O (Form 990) 2008

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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donors can choose from vetted projects and initiatives in different locations throughout the developing world to which they make contributions.

**Sch L, Part IV, Business Transactions Involving Interested Persons:**

(a) Name of Person: Many Futures, Inc. (MFI)

(b) Relationship Between Interested Person and Organization:

Dennis Whittle and Mari Kuraishi have a > 35% ownership interest in MFI

(c) Amount of Transaction \$ 7718203.

(d) Description of Transaction: Effective December 29, 2008, GGF and MFI agreed to convert the amount of the total outstanding principal and interest of the convertible notes to 43,098,822 share of common stock.

The transaction resulted in an increase to common stock by \$430,988 and to additional paid-in capital by \$7,287,215 for MFI and as an investment in MFI for GGF.

(e) Sharing of Organization Revenues? = No

(a) Name of Person: Emergence Group

(b) Relationship Between Interested Person and Organization:

Jim Krejci has a > 35% ownership interest in Emergence Group

(c) Amount of Transaction \$ 38743.

(d) Description of Transaction: GGF employs the services of Emergence Group through which Mr. Krejci is paid as the CFO of GGF. Mr. Krejci is also the president of Emergence Group. GGF paid Emergence Group \$38,743 in exchange for Mr. Krejci's services as CFO of GGF.

(e) Sharing of Organization Revenues? = No

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Schedule O (Form 990) 2008

**SCHEDULE O**

(Form 990)

Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990**▶ Attach to Form 990. To be completed by organizations to provide  
additional information for responses to specific questions for the  
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OMB No. 1545-0047

**2008**Open to Public  
Inspection

Name of the organization

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Employer identification number

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(a) Name of Person: Dennis Whittle

(b) Relationship Between Interested Person and Organization:

Dennis Whittle is a Director of GGF and the CEO of MFI

(c) Amount of Transaction \$ 758254.

(d) Description of Transaction: GGF paid MFI for Web Services and  
Professional fundraising fees

(e) Sharing of Organization Revenues? = No

Form 990, Part VI, Section B. Policies, Line 16b, Joint Ventures

While GlobalGiving Foundaton (GGF) does not have a written policy or procedure regarding joint ventures in taxable entities it has the practice of consulting with and deferring to its board of directors in transactions of this nature. From its inception GGF has had a business relationship with ManyFutures, Inc.(MFI) which provides the software/web platform that enables the Foundation to solicit funds from donors for the Foundation approved projects and over the years loaned money to MFI via a convertible note structure. In 2008 GGF's Board of Directors decided to enter into an agreement with MFI converting notes receivable of \$7,718,203 into 43,098,822 shares of common stock in MFI. GGF now owns 98% of the shares of stock in MFI. MFI is a Delaware taxable for-profit corporation formed to provide website and consulting services relating to international philanthropy.





**Part V Transactions With Related Organizations****Note.** Complete line 1 if any entity is listed in Parts II, III, or IV.**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?

		Yes	No
<b>a</b>	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	X
<b>b</b>	Gift, grant, or capital contribution to other organization(s)	1b	X
<b>c</b>	Gift, grant, or capital contribution from other organization(s)	1c	X
<b>d</b>	Loans or loan guarantees to or for other organization(s)	1d	X
<b>e</b>	Loans or loan guarantees by other organization(s)	1e	X
<b>f</b>	Sale of assets to other organization(s)	1f	X
<b>g</b>	Purchase of assets from other organization(s)	1g	X
<b>h</b>	Exchange of assets	1h	X
<b>i</b>	Lease of facilities, equipment, or other assets to other organization(s)	1i	X
<b>j</b>	Lease of facilities, equipment, or other assets from other organization(s)	1j	X
<b>k</b>	Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
<b>l</b>	Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
<b>m</b>	Sharing of facilities, equipment, mailing lists, or other assets	1m	X
<b>n</b>	Sharing of paid employees	1n	X
<b>o</b>	Reimbursement paid to other organization for expenses	1o	X
<b>p</b>	Reimbursement paid by other organization for expenses	1p	X
<b>q</b>	Other transfer of cash or property to other organization(s)	1q	X
<b>r</b>	Other transfer of cash or property from other organization(s)	1r	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 other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) MFI - int. on N/R (earned prior to GGF having controlling interest in MF)	A	426,451.
(2) MFI - capital contribution	B	1,926,451.
(3) MFI - consulting services for GGF	L	237,500.
(4) MFI - commissions pd. to MFI	L	520,754.
(5) MFI - shares office space	M	44,844.
(6) MFI - increase in Due to MFI	E	94,070.





Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	Property and Equipment	Varies	SL	10.00	16	122,316.			122,316.	12,961.		6,061.
	* Total 990 Page 10 Depr					122,316.		0.	122,316.	12,961.	0.	6,061.