# Kalantry LLP 7026 Groton Street Forest Hills, NY 11375 (718) 544-2772 office@kalantryllp-.com

November 10, 2023

EDUCATE GIRLS 815 BRAZOS ST, #500 AUSTIN, TX 78701

Dear Client,

Enclosed is the 2022 U.S. Form 990, Return of Organization Exempt from Income Tax, for EDUCATE GIRLS for the tax year ending March 31, 2023.

Your 2022 U.S. Form 990, Return of Organization Exempt from Income Tax, return will be electronically filed.

We very much appreciate the opportunity to serve you. If you have any questions regarding this return, please do not hesitate to call.

Sincerely,

Suneil Kalantry, CPA

Return of	Organization	Exempt	From	Income	Тах

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) est enter essiel essentity numbers on this form as it may be made nubli

Form **990** 

Do not enter	social se	ecurity	numbers	s on t	nis iorn	i as i	t may	be made	public.
• •									

OMB No. 1545-0047

(c)

		of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the latest inf	ormation.		Inspection
Α	For the	e 2022 calend	dar year, or tax year beginning ${ m Apr} \ 1$ , 2022, and ending	Ма	r 31	, <b>20</b> 23
в	Check it	f applicable:	C Name of organization EDUCATE GIRLS		D Emplo	oyer identification number
	Address	s change	Doing business as		46-44	193359
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Room	om/suite	E Teleph	none number
	Initial re	turn	815 BRAZOS ST 50	0	(718)	)544-2772
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	ed return	AUSTIN, TX 78701		<b>G</b> Gross	receipts \$11,520,065.
	Applicat	tion pending	F Name and address of principal officer:	H(a) Is this a gro	oup return fo	or subordinates? 🗌 Yes 🛛 No
			SAFEENA HUSAIN, A18101 GARDEN ESTATES, GOREGAON WEST, MUMBAI 400097, IN,	H(b) Are all s	ubordinat	es included? 🗌 Yes 🗌 No
<u> </u>	Tax-exe	empt status:	X         501(c)(3)         501(c) (         ) (insert no.)         4947(a)(1) or         527	lf "No," a	attach a lis	st. See instructions.
J	Website	e: www.e	ducategirls.us	H(c) Group e	kemption	number
κ	Form of	organization: 🗙	Corporation Trust Association Other L Year of formation	on: 2013	M State	of legal domicile: $\mathrm{TX}$
Ρ	art I	Summa	ry			
	1	Briefly des	cribe the organization's mission or most significant activities: Educate Gin	ls works in rem	note and i	impoverished areas of India,
e		partnering	y with the government, communities and village-based volunteers,	to ensure t	hat eve	ery girl is enrolled
าลท		in school a	nd learns well. In just 15 years more than 1.4 million girls have been enro	lled in schoo	l and ha	we learned successfully.
/err	2	Check this	box if the organization discontinued its operations or disposed of	more than 25	5% of it	s net assets.
Activities & Governance	3	Number of	voting members of the governing body (Part VI, line 1a)		3	5
~	4	Number of	independent voting members of the governing body (Part VI, line 1b)		4	5
ties	5	Total numb	per of individuals employed in calendar year 2022 (Part V, line 2a) .		5	2
tivi	6	Total numb	per of volunteers (estimate if necessary)		6	0
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelat	ted business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Yea	r	Current Year
e	8	Contributio	ons and grants (Part VIII, line 1h)	14,105,	107.	10,912,066.
nué	9	Program se	ervice revenue (Part VIII, line 2g)			
Revenue	10	Investment	t income (Part VIII, column (A), lines 3, 4, and 7d)	21,	418.	607,999.
œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,126,	525.	11,520,065.
	13	Grants and	I similar amounts paid (Part IX, column (A), lines 1–3)	7,618,	000.	28,009,038.
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)			
S	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5–10)	246,	699.	325,547.
nse	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)		499.	1,499.
Expenses	b	Total fundr	raising expenses (Part IX, column (D), line 25) 146, 705.			
ш	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	928,	670.	766,878.

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 8,794,868. 29,102,962. Revenue less expenses. Subtract line 18 from line 12 . . . . 19 5,331,657. -17,582,897. Net Assets or Fund Balances **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 42,960,470. 46,229,284. . 21 Total liabilities (Part X, line 26) . 20,837. 21,115,100. . . . Fund 22 Net assets or fund balances. Subtract line 21 from line 20 42,939,633. 25,114,184. Signature Block Part II

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.

_			10	/31/2023	
Sign	Signature of officer		Date	•	
Here	SAFEENA HUSAIN, FOUNDE	R & PRESIDENT			
	Type or print name and title				
Paid	Print/Type preparer's name	Preparer's signature	Date	Check 🗌 if	PTIN
Preparer	Suneil Kalantry, CPA		11/10/2023	self-employed	P01993358
Use Only			Firm's	s EIN 27-2	877276
	Firm's address 7026 Groton Sta	reet, Forest Hills, NY 113	75 Phon	eno. (718)5	544-2772
May the IR	S discuss this return with the preparer	shown above? See instructions			🗙 Yes 🗌 No
	ark Deduction Act Nation and the concre	to instructions DAA			Farma 000 (0000)

For Paperwork Reduction Act Notice, see the separate instructions. BAA

Form 99	00 (2022) Page <b>2</b>
Part	Statement of Program Service Accomplishments           Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Educate Girls works in remote and impoverished areas of India,
	partnering with the government, communities and village-based volunteers, to ensure that every girl is enrolled in school and learns well. In just 15 years more than 1.4 million girls have been enrolled in school and have learned successfully.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 28,009,038. including grants of \$ 28,009,038. ) (Revenue \$ 0.)
та	Bringing Girls to School Educate Girls' largest grant is to the India-based nonprofit Foundation to Educate Girls' Globally (FEGG) for their core organic program (which focuses on girls ages 7 to 14), continuing vital work to enroll out-of-school girls (OOSG) into schools, retain girls in school (the retention rate year-to-year is currently 93%), and ensure girls are reaching targets for learning outcomes. This program was implemented in remote and impoverished areas in the Indian states of Rajasthan, Madhya Pradesh, Bihar, Haryana and Uttar Pradesh. Work to further scale the program and reach additional rural targets was successfully undertaken and implemented. Pilot efforts for a new program to help adolescent girls and young women, ages 15 to mid 20s, return to school to achieve the 10th grade certification needed to continue education and/or offer job or future opportunities, moved forward successfully in this period. The number of girls enrolled in Core Organic were 245,271 for fiscal year 2022-2023.
	(Code:) (Expenses \$434,177. including grants of \$0.) (Revenue \$0.) Research and Technical Accomplishments Research, technical support, and development work began on a new five-year strategy (Strategy 3.0) to expand geographies
	and partnerships with local nonprofits in India, and to meet the lifecycle needs of girls beyond primary school into secondary school and/or vocational training. Machine learning and comprehensive research are used to identify hot spots where there is the highest concentration of 00SGs, and innovative program piloting, digital tools, and testing are providing metrical and objective, advanced analyses for program changes and meaningful learning. Strategic development and landscape analysis are helping identify stronger schemes for enrollment and success in both the core program and the pilots for achieving 10th grade certification while improving program targeting.
4c	(Code:       ) (Expenses \$ 371,823. including grants of \$ 0. ) (Revenue \$ 0.)         Scaling Projects Funding supported the training of non-profit, NGO partners in the areas of core organic program implementation by identifying 00SGs, working with parents and community leaders, enrolling girls, and helping girls (and boys) succeed in school.         This is an essential element of scaling Educate Girls work, and in addition to rigorous training includes clear, contractual deliverables, regular reporting,
	and detailed assessment of each partner. 17 partnerships were implemented, addressing the needs of (61,000 00SG) girls in (4705) villages.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses28,815,038.

Part	V Checklist of Required Schedules			Faye <b>O</b>
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•		1 2	×	<u> </u>
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions 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>	2	×	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	×	
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14a 14b	× ×	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	140	 X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	~	×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		×

Form 99	0 (2022)		I	Page <b>4</b>
Part	V Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	No X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	22	×	
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		×
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) 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>	24d 25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		×
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		×
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		×
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> 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>	31 32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	×	
Part	V         Statements Regarding Other IRS Filings and Tax Compliance           Check if Schedule O contains a response or note to any line in this Part V			
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       0         Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1       0	4.5	Yes	No
		1c	1	1

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

Form 99	0 (2022)		F	Page 6
Part	<b>VI Governance, Management, and Disclosure.</b> For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struc	tions.
Secti	on A. Governing Body and Management			×
0000	on A. doverning body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b>			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
ь 2	Enter the number of voting members included on line 1a, above, who are independent . <b>Ib</b> <u>5</u> 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		×
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		×
6	Did the organization have members or stockholders?	6		×
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7a 7b		× ×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			~
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	nue C	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		×
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done.	12c		×
13	Did the organization have a written whistleblower policy?	13 14		×
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14		^
а	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b	×	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	40		
Secti	on C. Disclosure	16b		
<u>3ecu</u> 17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	T (sec	tion 5	501(c)

- Other (explain on Schedule O) Own website Another's website X Upon request
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records. KALANTRY LLP, 7026 GROTON STREET, FOREST HILLS, NY 11375 (718)544-2772

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

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than c is both		Reportable	Reportable	Estimated amount
	hours	office				or/trust		compensation	compensation	of other
	per week (list any	Individual trustee or director	Ing	ç	<u>ک</u> و	en Hi	F	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	divic	stitu	Officer	Key employee	ghes	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	lual	tion	)	nplo	st cc yee	Ĩ	1099-NEC)	1099-NEC)	related organizations
	below	trus	al tru		yee	mpe				
	dotted line)	tee	Institutional trustee			Highest compensated employee				
			œ			ted				
(1) SAFEENA HUSAIN	40.00									
FOUNDER & PRESIDENT		×		×				275,833.	0.	0.
(2) PHYLLIS K COSTANZA	0.00									
BOARD CHAIR		×						0.	0.	0.
(3) GAURAV GUPTA	0.00									
BOARD MEMBER		×						0.	0.	0.
(4) DR NEIL B SHAH	0.00									
BOARD MEMBER		×						0.	0.	0.
(5) INDRANI GORADIA	0.00									
BOARD MEMBER		×						0.	0.	0.
(6)		-								
(7)		-								
(8)		-								
(0)										
(9)										
(10)										
(10)		-								
(11)										
<u>(17)</u>		-								
(12)										
<u></u>										
(13)										
<u></u>		1								
(14)				1						
<u></u>		1								
	!							Į	<u>.</u>	

Porm 99	VII Section A. Officers, Directors,	Frustees,	Key I	Em	ploy	yee	s, an	d F	lighest Compe	ensated	Emplo	yees (		Page <b>8</b> nued)
	<b>(A)</b> Name and title	(B) Average hours	box,	unles	Pos neck ss pe	erson	e than o is both or/trust	n an	(D) Reportable compensation from the	(E Repor compen from re	table isation	c	(F) ated am of other	
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizatic 1099-N 1099-I	ons (W-2/ /IISC/	fr	pensati om the nization organiz	and
(15)			-				<u>α</u>							
(16)			-											
(17)														
(18)														
(19)								-						
(20)			-											
			-											
(21)			-											
(22)			-											
(23)			-											
(24)			-											
(25)			-											
1b	Subtotal		•••						275,833.		0.			0.
с  2	Total from continuation sheets to Part Total (add lines 1b and 1c) Total number of individuals (including bur reportable compensation from the organi	t not limited				ted			275,833. /ho received mor	e than \$1	0.00,000	of		0.
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete</i> of the second se	officer, dire Schedule J	for si	uch	ind	e, k ividi	key e ual	•				3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations <i>individual</i>												×	
5	Did any person listed on line 1a receive of for services rendered to the organization									tion or ind	dividual 	5		×
	on B. Independent Contractors												100.0	
1	Complete this table for your five high compensation from the organization. Rep													
_	(A) Name and business add	Iress							<b>(B)</b> Description of serv	vices		<b>(C)</b> Compens		

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

Part	: VIII	Statement of Rev Check if Schedule				na or noto to a	av lina in thia Da	ort V/III		
		Check il Schedule	0.00		5901		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
irants, ounts	1a b	Federated campaig Membership dues			1a 1b		-			sections 512–514
An G	C	Fundraising events			1c		-			
Gift Iar	d e	Related organizatio Government grants			1d 1e		-			
)s, ( Simi	f	All other contribution					-			
er S		and similar amounts no			1f	10,912,066.				
Contributions, Gifts, Grants, and Other Similar Amounts	g	Noncash contribution			1g					
an Co	h	Total. Add lines 1a-	-1f.				10,912,066.			
						Business Code				
Program Service Revenue	2a									
ue Ne	b									
Jram Ser Revenue	С С									
gra Re	d e									
õ	f	All other program se								
	g	Total. Add lines 2a-	-2f.							
	3	Investment income	•	•						
		other similar amoun	-				607,999.	0.	0.	607,999.
	4 5	Income from investr Royalties			•	•				
	5	noyallies	· ·	 (i) Rea		(ii) Personal				
	6a	Gross rents	6a				-			
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c							
	d	Net rental income o	r (los	1 <b>′</b>						
	7a	Gross amount from sales of assets		(i) Securi	ties	(ii) Other	-			
		other than inventory	7a							
e	b	Less: cost or other basis					-			
enne		and sales expenses .	7b							
Jev	С	Gain or (loss)	7c							
Other Rev	d	Net gain or (loss)								
Gth	8a	Gross income fro events (not including	¢	-						
-		of contributions re		d on line						
		1c). See Part IV, line			8a					
	b	Less: direct expens	es.		8b		-			
	c	Net income or (loss			g eve	ents				
	9a	Gross income factivities. See Part			0-					
	h	Less: direct expens			9a 9b		-			
	c	Net income or (loss)				⊨ es				
	10a									
		returns and allowan			10a		_			
		Less: cost of goods			10b					
	С	Net income or (loss)	) from	sales of in	ivento	Business Code				
sno	11a					Busiliess Code				
scellaneo Revenue	b									<u> </u>
sell; eve	С				·····					
Miscellaneous Revenue	d	All other revenue								
2	e	Total. Add lines 11a					11 500 055			
	12	Total revenue. See	Instr	uctions			11,520,065.	0.	0.	607,999.

	Check if Schedule O contains a response or note to any line in this Part IX								
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to domestic organizations		скрепаса	general expenses	expenses				
	and domestic governments. See Part IV, line 21 .								
2	Grants and other assistance to domestic								
	individuals. See Part IV, line 22								
3	Grants and other assistance to foreign								
	organizations, foreign governments, and								
	foreign individuals. See Part IV, lines 15 and 16	28,009,038.	28,009,038.						
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	307,468.	245,975.	15,373.	46,120				
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								
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes	18,079.	14,463.	904.	2,712				
11	Fees for services (nonemployees):	- / - · - ·	,		,				
а	Management	66,244.	63,552.	0.	2,692				
b	Legal	0.	0.	0.	0				
с	Accounting	16,775.	0.	16,775.	0				
d	Lobbying								
е	Professional fundraising services. See Part IV, line 17	1,499.			1,499				
f	Investment management fees	,							
g	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A), amount, list line 11g expenses on Schedule O.) .	388,009.	267,099.	90,526.	30,384				
12	Advertising and promotion	47,856.	0.	0.	47,856				
13	Office expenses								
14	Information technology	167,078.	167,078.	0.	0				
15	Royalties		-						
16	Occupancy								
17	Travel	64,585.	47,833.	2,633.	14,119				
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 .								
23	Insurance	8,587.	0.	8,587.	0				
24	Other expenses. Itemize expenses not covered								
	above. (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A), amount, list line 24e expenses on Schedule O.)								
а	BANK CHARGES	2,282.	0.	2,282.	0				
b	MISCELLANEOUS	9.	0.	9.	0				
с	STATE ANNUAL FILING FEE	775.	0.	775.	0				
d	TELEPHONE, TELECOMMUNICATION	1,686.	0.	1,686.	0				
е	All other expenses	2,992.	0.	1,669.	1,323				
25	Total functional expenses. Add lines 1 through 24e	29,102,962.	28,815,038.	141,219.	146,705				
26	Joint costs. Complete this line only if the								
	organization reported in column (B) joint costs								
	from a combined educational campaign and fundraising solicitation. Check here [] if								
	following SOP 98-2 (ASC 958-720)								

	1330 (2	,			Fage II
Р	art X	Balance Sheet Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	13,484,241.	1	16,996,897.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	150,000.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
-	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D <b>10a</b>			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments-publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11	29,476,229.	12	29,082,387.
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	42,960,470.	16	46,229,284.
	17	Accounts payable and accrued expenses	3,311.	17	122,829.
	18	Grants payable		18	20,983,210.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
ΞĬ		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	17,526.	25	9,061.
	26	Total liabilities. Add lines 17 through 25	20,837.	26	21,115,100.
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here $\mathbf{X}$ and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	6,367,054.	27	15,833,527.
Ba	28	Net assets with donor restrictions	36,572,579.	28	9,280,657.
pu	-	Organizations that do not follow FASB ASC 958, check here	00701270191		3720070071
Ъ		and complete lines 29 through 33.			
o	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
∋t ¢	32	Total net assets or fund balances	42,939,633.	32	25,114,184.
ž	33	Total liabilities and net assets/fund balances	42,960,470.	33	46,229,284.

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Form 990 (2022) Page 12 Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI . . . . . . . . . . 🗆 1 1 11,520,065. . Total expenses (must equal Part IX, column (A), line 25) 2 2 . . . . . . . . . . . 29,102,962. 3 3 -17,582,897.4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). 4 42,939,633. 5 5 -242,552. 6 Donated services and use of facilities . . . . . . . . . . . . . 6 7 7 8 8 9 Other changes in net assets or fund balances (explain on Schedule O) . . . . . . . . . . 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 10 25,114,184. Part XII **Financial Statements and Reporting**  $\square$ Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. **2a** Were the organization's financial statements compiled or reviewed by an independent accountant? 2a × If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? 2b × . . . . . . . If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

X Separate basis Consolidated basis Both consolidated and separate basis

If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

Uniform Guidance, 2 C.F.R. Part 200, Subpart F? h If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .

Form 990 (2022)

×

×

2c

3a

3b

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Ū	·	I						OMB No. 1545-0047
	IEDULE A m 990)	Pu	blic Charit	y Status and I	Public	Supp	ort	
	in 990j	Complete if the orga		2022				
	ment of the Treasury A Revenue Service	Gol		h to Form 990 or Form rm990 for instructions ar		st informa	tion	Open to Public
	of the organization					Stinoma	Employer identificati	
	CATE GIRLS						46-4493359	
_		for Public Cha	rity Status. (Al	I organizations mus	t comple	ete this p		tions.
The	•	•		is: (For lines 1 through		•	,	
1				ion of churches descri			'0(b)(1)(A)(i).	
2				(Attach Schedule E (F		-		
3				ganization described in				
4		search organization	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(#	A)(III). Enter the
5	🗌 An organiza		the benefit of a	college or university	owned c	or operate	ed by a governme	ntal unit described ir
6				mental unit described	in <b>secti</b> e	on 170(b)	(1)(A)(v).	
7	🔀 An organiza		receives a subs	tantial part of its sup				om the general public
8	A communit	y trust described i	n <b>section 170(b</b> )	)(1)(A)(vi). (Complete I	Part II.)			
9				d in <b>section 170(b)(1)</b> riculture (see instruction				
10	receipts fron support fron	n activities related n gross investmen	to its exempt fu t income and un	e than 33 <sup>1</sup> / <sub>3</sub> % of its su inctions, subject to ce related business taxal 75. See <b>section 509(</b> a	rtain exc ole incom	eptions; a ne (less s	and (2) no more tha ection 511 tax) fror	an 33 <sup>1</sup> /3% of its
11		•		sively to test for public		•	,	
12	An organizat	ion organized and	operated exclusi	ively for the benefit of,	to perfor	m the fur	ictions of, or to car	ry out the purposes o
				lescribed in <b>section 50</b> the type of supporting				
а	the supp	orted organization	n(s) the power to	l, supervised, or contr regularly appoint or e <b>ete Part IV, Sections</b>	lect a ma	ajority of t		
b	control o	r management of	the supporting c	sed or controlled in co organization vested in I <b>V, Sections A and C.</b>	the same			
С				ting organization oper ons). <b>You must comp</b> l				nally integrated with,
d	that is no	ot functionally integ	grated. The orga	upporting organization unization generally mus complete Part IV, Sec	st satisfy	a distribu	ution requirement a	
е				a written determination a written determination at a written determination at a written at a wr				pe II, Type III
f g				ported organization(s).				· · _
	(i) Name of support	ed organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetar support (see instructions)	y (vi) Amount of other support (see instructions)
					Yes	No	]	
(A)								
(B)								
(C)								

(D)

(E) Total

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

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

Secti	on A. Public Support	e quality anal					
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						46,922,488.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	2,250,403.	0,17,155.	11,201,399.	14,103,107.	10,702,000.	10,722,100.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,296,463.	8,497,453.	11,261,399.	14,105,107.	10,762,066.	46,922,488.
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)						22,834,059.
6	Public support. Subtract line 5 from line 4	-					24,088,429.
Secti	on B. Total Support		•				
Calen	dar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	2,296,463.	8,497,453.	11,261,399.	14,105,107.	10,762,066.	46,922,488.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		198,568.	24,000.	21,443.	521,165.	765,176.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						47,687,664.
12	Gross receipts from related activities, etc					12	
13	First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	ere			or fifth tax ye	ear as a section	on 501(c)(3) 
<u>3ecu</u> 14	Public support percentage for 2022 (line	0		11 column (f))		14	50.51%
14	Public support percentage for 2022 (inte Public support percentage from 2021 Sc					14	46.5%
16a	<b>33</b> <sup>1</sup> / <sub>3</sub> % support test-2022. If the organ						
iea	box and <b>stop here</b> . The organization qua	alifies as a publ	licly supported	l organization		· · · · ·	🗙
b	<b>33</b> <sup>1</sup> / <sub>3</sub> % <b>support test</b> — <b>2021.</b> If the organ this box and <b>stop here</b> . The organization	ization did not	check a box c	on line 13 or 16	Sa, and line 15	is 331/3% or m	nore, check
17a	<b>10%-facts-and-circumstances test-2</b> 10% or more, and if the organization m Part VI how the organization meets the organization	neets the facts facts	-and-circumst umstances tes	ances test, ch st. The organia	eck this box a zation qualifies	and <b>stop here</b> as a publicly	. Explain in supported
b	<b>10%-facts-and-circumstances test—2</b> 15 is 10% or more, and if the organization in Part VI how the organization meets the organization	on meets the fa e facts-and-cir	acts-and-circu cumstances te	mstances test est. The organ	, check this bo ization qualifie	ox and <b>stop he</b> s as a publicly	ere. Explain supported
18	Private foundation. If the organization						
	instructions	<u></u>	<u></u>	<u> </u>	<u> </u>	<u> </u>	· · <u>· ·</u> 🗆
							A (Form 990) 2022

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
2	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 7a	<b>Total.</b> Add lines 1 through 5Amounts included on lines 1, 2, and 3received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						
Sacti	on B. Total Support						_
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(a) 2020	(4) 2021	(a) 2022	
9	Amounts from line 6	(a) 2010	(D) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	0	s first, second				( )( )
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2022 (line a			13, column (f))		15	%
16	Public support percentage from 2021 Sch					16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2022 (		-	ov line 13. colu	mn (f))	17	%
18	Investment income percentage from <b>202</b>			-		18	%
19a	33 <sup>1</sup> / <sub>3</sub> % support tests – 2022. If the organ					-	
	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box						
b	<b>331</b> /3% <b>support tests</b> — <b>2021.</b> If the organiz line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this						1 33 <sup>1</sup> /3%, and
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see inst	ructions .

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

# Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

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

Schedule A (F	Form 990) 2022	Page 5
Part IV	Supporting Organizations (continued)	
		Yes No

- 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
  - **b** A family member of a person described on line 11a above?
  - c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

#### Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part **VI** how providing such benefit carried out the purposes of the supported organization(s) that operated. supervised, or controlled the supporting organization.

## Section C. Type II Supporting Organizations

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

#### Section D. All Type III Supporting Organizations

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

## Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes. how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

1

.

Yes No

Yes No

11a

11b

11c

2a

2b

3a

3b

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year (A) Prior Year Section A-Adjusted Net Income (optional)

				(optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	<b>1</b> a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
_	emergency temporary reduction (see instructions).		at a superior of Taura a 100 as superior	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990) 2022

	le A (Form 990) 2022				Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continue	ed)	
Sect	on D-Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e			1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	-provide details in <b>Part</b>	<b>VI</b> )	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive	8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required— <i>explain in Part VI</i> ). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	<b>Excess distributions carryover to 2023.</b> Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Pag						
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)					

	DULE D	Supplementa	OMB No. 1545-0047				
(Form	n 990)	Complete if the orga	Complete if the organization answered "Yes" on Form 990,				
Departm	ent of the Treasury		0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Open to Public				
	Revenue Service		0 for instructions and the latest informat			Inspection	
						entification number	
	CATE GIRLS	institute Maintaining Daman Aski		46-44			
Par		ete if the organization answered "	sed Funds or Other Similar Funds	s or <i>F</i>	ACCO	ounts.	
	Compr		(a) Donor advised funds		(b) F	unds and other accounts	
1	Total number	at end of year			(4)		
2		ue of contributions to (during year) .					
3	Aggregate val	ue of grants from (during year)					
4		ue at end of year					
5	•		advisors in writing that the assets hele				
6			organization's exclusive legal control? Ind donor advisors in writing that grant				
Ŭ	•	<b>u</b>	t of the donor or donor advisor, or for				
Par	Conse	rvation Easements.					
	Comple	ete if the organization answered "	Yes" on Form 990, Part IV, line 7.				
1	,	conservation easements held by the o					
		of land for public use (for example, recrea	,			lly important land area	
		of natural habitat	Preservation of	a cert	itied	historic structure	
2		on of open space s 2a through 2d if the organization hel	d a qualified conservation contribution	in the	form	of a conservation	
-		the last day of the tax year.				Held at the End of the Tax Year	
а	Total number	of conservation easements		. Г	2a		
b					2b		
с	Number of cor	nservation easements on a certified hi	storic structure included in (a)	. [	2c		
d			acquired after July 25, 2006, and not o				
		ure listed in the National Register			2d		
3	Number of contax year	nservation easements modified, trans	ferred, released, extinguished, or term	inated	l by t	he organization during the	
4		 tes where property subject to conserv	vation easement is located				
5			arding the periodic monitoring, inspe	ection,	har	ndling of	
			ements it holds?			· · · · Yes · No	
6	Staff and volun	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conse	rvatic	on easements during the year	
7	Amount of exp	enses incurred in monitoring, inspecting	g, handling of violations, and enforcing c	onserv	/atior	easements during the year	
•	Dees seek se				170/		
8			2(d) above satisfy the requirements of s				
9			onservation easements in its revenue a				
		<b>a</b> .	the footnote to the organization's finar				
	organization's	accounting for conservation easemer	nts.				
Part			of Art, Historical Treasures, or C	)ther	Sim	ilar Assets.	
		ete if the organization answered "					
<b>1</b> a			B ASC 958, not to report in its revenue				
			held for public exhibition, education, o its financial statements that describe				
b	•		B ASC 958, to report in its revenue st				
			for public exhibition, education, or rese				
	provide the fol	llowing amounts relating to these item	s:			•	
	(i) Revenue in	cluded on Form 990, Part VIII, line 1				\$	
	(ii) Assets inclu	uded in Form 990, Part X				\$	
2	If the organization	ation received or held works of art,	historical treasures, or other similar a	assets	for	financial gain, provide the	
		unts required to be reported under FA					
a	Revenue inclu	ded on Form 990, Part VIII, line 1 .				\$	
b	ASSETS INCLUDE	HUITFORT 990, Part X				3	

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Schedul	le D (Form 990) 2022										Page <b>2</b>
Part	III Organizations Maintaining	Coll	ections of	Art, His	torical T	<b>Freasures</b>	, or O	ther Similar A	ssets	cont	inued)
3	Using the organization's acquisition, collection items (check all that apply):		ssion, and of	ther reco	rds, chec	k any of th	e follov	wing that make	signific	ant u	se of its
а	Public exhibition			d	Loan	or exchang	e prog	ram			
b	Scholarly research					-					
с	Preservation for future generations	6			_						
4	Provide a description of the organiza XIII.		collections	and expla	ain how t	hey further	the ore	ganization's exe	empt pu	rpose	e in Part
5	During the year, did the organization assets to be sold to raise funds rather								_	Yes	□ No
Part						<u> </u>				100	
	Complete if the organization			" on For	m 990. F	Part IV. line	e 9. or	reported an a	amount	on F	orm
	990, Part X, line 21.				,.	,	, -:				
1a	Is the organization an agent, trustee	, cust	odian or oth	ner intern	nediary fo	or contribut	tions o	r other assets	not		
	included on Form 990, Part X?								_	Yes	□ No
b	If "Yes," explain the arrangement in P	art XI	II and compl	ete the fo	llowina ta	able:					
					5				Amount		
с	Beginning balance						10				
d	Additions during the year						10	k			
е	Distributions during the year						16	•			
f	Ending balance						11	f			
2a	Did the organization include an amou						ustodia	l account liabili	ty? 🗌	Yes	No
b	If "Yes," explain the arrangement in P	art XI	II. Check her	re if the e	xplanatio	n has been	provid	ed on Part XIII			
Par					-						
	Complete if the organization	n ansv	wered "Yes	" on For	m 990, F	Part IV, line	e 10.				
		(a)	Current year	<b>(b)</b> Pri	or year	(c) Two year	rs back	(d) Three years ba	ack <b>(e)</b> F	our yea	ars back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and										
	losses										
d	Grants or scholarships										
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of t	the cu	irrent year er	nd balanc	e (line 1g	ı, column (a	ı)) held	as:			
а	Board designated or quasi-endowme	nt		%							
b	Permanent endowment	%									
С	Term endowment%										
	The percentages on lines 2a, 2b, and										
3a	Are there endowment funds not in the	e pos	session of th	he organi	zation that	at are held	and ac	ministered for	the		
	organization by:									Ye	s No
	(i) Unrelated organizations								. 3a		
										(ii)	
b	If "Yes" on line 3a(ii), are the related o	•							. 3	b	
4	Describe in Part XIII the intended uses			on's endo	owment fu	unds.					
Part				. –				0.5			
	Complete if the organization	ans									
	Description of property		(a) Cost or o (investm			or other basis ther)		Accumulated epreciation	(d)	3ook va	alue
1a	Land										
b	Buildings										
с	Leasehold improvements										
d	Equipment										
е	Other										
Total.	Add lines 1a through 1e. (Column (d) n	nust e	equal Form 9	90, Part 2	X, columr	n (B), line 10	)c.) .				

BAA

Schedule D	(Form	990)	2022
Ouncould D		550)	2022

Schedule D (For	rm 990) 2022			Page 3
Part VII	Investments-Other Securities.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	<b>(b)</b> Book value		hod of valuation: -of-year market value
(1) Financial	derivatives			
(2) Closely h	eld equity interests			
	G TREASURY BONDS	29,082,387.	FMV	
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	nn (b) must equal Form 990, Part X, col. (B) line 12.)	29,082,387.		
Part VIII	Investments – Program Related.	29,002,507.		
	Complete if the organization answered "Yes" on For	m 990 Part IV lin	e 11c. See Form	990 Part X line 13
	(a) Description of investment	(b) Book value		hod of valuation:
	(a) Description of investment	(b) DOOK value		-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.		- 11-1 O E	
	Complete if the organization answered "Yes" on For	m 990, Part IV, IIn	e 11a. See Form	
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11e or 11f. See	e Form 990, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal in	come taxes			
(2) PAYROI	L TAXES PAYABLE			6,061.
(3) WAGES	PAYABLE			0.
(4) 403(B)	CONTRIBUTION PAYABLE			3,000.
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)			9,061.
	· · · · · · · · · · · · · · · · · · ·			

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

_			л
Pa	ae	<u>م</u>	4

	e D (Form 990) 2022				Page 4
Part				Retur	n.
	Complete if the organization answered "Yes" on Form 990, I				
1	Total revenue, gains, and other support per audited financial statements	· ·		1	11,277,513.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-242,552.	-	
b	Donated services and use of facilities	2b		-	
C.	Recoveries of prior year grants	2c		-	
d	Other (Describe in Part XIII.)	2d			
e	Add lines <b>2a</b> through <b>2d</b>			2e	-242,552.
3	Subtract line <b>2e</b> from line <b>1</b>	i ·	 I	3	11,520,065.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	10			
a k	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a		-	
b	Add lines <b>4a</b> and <b>4b</b>	4b		4c	
с 5	Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line</i>			4C 5	11 520 065
Part		,			<u>11,520,065.</u>
rait	Complete if the organization answered "Yes" on Form 990, I			n neu	um.
1	Total expenses and losses per audited financial statements			1	29,102,962.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	• •			27,102,702.
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		-	
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines <b>2a</b> through <b>2d</b>	-		2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	29,102,962.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	İ			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	29,102,962.
Part		,			
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	vide any additional in	formati	ion.

Schedule D (Fo	Supplemental Information (continued)	Page 5

SCHE (Form	DULE F 990)	Statement of Activities Outside the United States		OMB No. 15	
	ent of the Treasury Revenue Service	Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 10 Attach to Form 990. Go to <i>www.irs.gov/Form990</i> for instructions and the latest information.	δ.	20 Open to Inspectio	Public
Name of	the organization		Employ	er identificatio	n number
EDUCA	ATE GIRLS		46-44	493359	
Part		I Information on Activities Outside the United States. Complete if the orga D, Part IV, line 14b.	nizatio	n answered	"Yes" on
	other assistan	<b>ters.</b> Does the organization maintain records to substantiate the amount of its grance, the grantees' eligibility for the grants or assistance, and the selection criteria ints or assistance?	used t	to	🗌 No
2	For grantmak	<b>ters.</b> Describe in Part V the organization's procedures for monitoring the use of its	grants	and other a	ssistance

- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- **3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
<b>(1)</b> ຣ	South Asia	1	2	Program Services	Education Programs	28,009,038.
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal	1	2			28,009,038.
b	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)	1	2			28,009,038.

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

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		South Asia	Education Programs	26,650,000.	Wire Transfer			
(2)		South Asia	Education Programs	150,000.	Wire Transfer			
(3)		South Asia	Education Programs	411,855.	Wire Transfer			
(4)		South Asia	Education Programs	133,818.	Wire Transfer			
(5)		South Asia	Education Programs	40,780.	Wire Transfer			
(6)		South Asia	Education Programs	40,886.	Wire Transfer			
(7)		South Asia	Education Programs	40,882.	Wire Transfer			
(8)		South Asia	Education Programs	78,411.	Wire Transfer			
(9)		South Asia	Education Programs	40,886.	Wire Transfer			
(10)		South Asia	Education Programs	40,886.	Wire Transfer			
(11)		South Asia	Education Programs	46,419.	Wire Transfer			
(12)		South Asia	Education Programs	37,135.	Wire Transfer			
(13)		South Asia	Education Programs	37,135.	Wire Transfer			
(14)		South Asia	Education Programs	37,135.	Wire Transfer			
(15)		South Asia	Education Programs	37,135.	Wire Transfer			
(16)		See Statement		185,675.				

Schedule F (Form 990) 2022

BAA

(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
0)							
11)							
12)							
13)							
14)							
15)							
16)							
17)							
18)							

Page 3

Schedu	ule F (Form 990) 2022		Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	🗙 No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	🗙 No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	☐ Yes	X No

BAA

REV 05/17/23 PRO

Schedule F (Form 990) 2022

## Part V Supplemental Information

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

Pt I Line 2: Grant Management functions include, but are not limited to, evaluating
applications, ensuring compliance, vetting partners for mission alignment, arranging
for consultation and technical assistance to grantees and orientation of new
grantees. Financial management post award includes monitoring compliance with
grantee quarterly reports, budget review to ensure proper use of funds, monthly
monitoring meetings with Project Directors of grantees in India to review performance
activities and ensure financial compliance and use of grant funds as per programmatic
activities. Two contract employees in India provide grant oversight and financial
management with completion of monthly programmatic and financial expenditure
report, quarterly fund utilization certificate, and tracking of grant budget.
Quality control team provides evaluation to confirm reported data outcomes;
external evaluator may be used in addition to internal evaluation methods.
Pt I Line 3 Col (F): Accrual accounting method is used to account for expenditures.
Pt II, Line 1: Accrual accounting method is used to account for cash grants.

## EDUCATE GIRLS

# Schedule F: Statement of Activities Outside U.S.

# Part II: Grants and Other Assistance to Organizations or Entities Outside the U.S.

Part II: Grants and Other Assistance to Organizations or Entities Outside the U.S.					Continuation Statement		
Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of noncash assistance	Description of noncash assistance	Method of valuation	
South Asia	Education Programs	37,135.	Wire Transfer				
South Asia	Education Programs	37,135.	Wire Transfer				
South Asia	Education Programs	37,135.	Wire Transfer				
South Asia	Education Programs	37,135.	Wire Transfer				
South Asia	Education Programs	37,135.	Wire Transfer				
		185,675.		0.			

# 46-4493359

Com		<b>Compensation Information</b>	OME	3 No. 1	1545-0	047
		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	2022			2
		Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	Ope	en to	o Pul	olic
Department of the Treasury Internal Revenue Service         Attach to Form 990.           Go to www.irs.gov/Form990 for instructions and the latest information.		În	ispe	ctio		
	f the organization	Employer identificati	on num	ber		
EDUC	CATE GIRLS	ns Regarding Compensation 46-4493359				
Part	Questio	ns Regarding Compensation			Yes	No
<b>1</b> a		ropriate box(es) if the organization provided any of the following to or for a person listed on F ection A, line 1a. Complete Part III to provide any relevant information regarding these items.	orm			
	First-class of	or charter travel				
	Travel for co					
		ification and gross-up payments				
	Discretional	ry spending account				
b		poxes on line 1a are checked, did the organization follow a written policy regarding paym nent or provision of all of the expenses described above? If "No," complete Part II				
	explain		·	1b		
2		nization require substantiation prior to reimbursing or allowing expenses incurred by tees, and officers, including the CEO/Executive Director, regarding the items checked on				
		· · · · · · · · · · · · · · · · · · ·	.	2		
3		, if any, of the following the organization used to establish the compensation of the CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by				
		zation to establish compensation of the CEO/Executive Director, but explain in Part III.	a			
	Compensat					
	□ Independent compensation consultant □ Compensation survey or study					
	🗌 Form 990 o	f other organizations				
4		r, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing r a related organization:				
а	Receive a seve	erance payment or change-of-control payment?	. [	4a		×
b		pr receive payment from a supplemental nonqualified retirement plan?		4b		×
С		pr receive payment from an equity-based compensation arrangement?	·	4c		×
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section {	501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.				
5	For persons I	isted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue	any			
~		contingent on the revenues of:		5a		×
	a       The organization?       .			5a 5b		×
-		a or 5b, describe in Part III.				
6	For persons I	isted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue contingent on the net earnings of:	any			
а	-			6a		×
	0			6b		×
		e 6a or 6b, describe in Part III.				
7		sted on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfi described on lines 5 and 6? If "Yes," describe in Part III		7		×
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject						
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe					
in Part III .................................				8		×
9	If "Yes" on li	ne 8, did the organization also follow the rebuttable presumption procedure described	t in			
		ection 53.4958-6(c)?		9		

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

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

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

		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
SAFEENA HUSAIN	(i)	234,414.	41,419.	0.	0.	0.	275,833.	0.
1 FOUNDER & PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i) (ii)							
	(i)							
3	(ii)							
	(i) (ii)							
4	(i)							
5	(ii)							+
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii) (i)							
10	(i) (ii)							
13	(i)							
14	(ii)		+	+				+
14	(i)							
15	(ii)		+	+				
10	(i)							
16	(ii)		+	+				+
BAA		<u>ــــــ</u> ــــــــــــــــــــــــــــــ	REV 05/17/23 PRO			1	Scl	nedule J (Form 990) 202

Schedule J (Form 990) 2022

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

# SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

EDUCATE GIRLS

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.

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



Employer identification number 46-4493359

Pt III, Line 3: Educate Girls develops fundraising strategies and tactics in response to a detailed and measurable 5-year plan. The organization provides grants to fully vetted non-profit organizations that focus on the identification and enrollment of out-of-school girls, retention of these girls in schools and success in learning and life-skills. Educate Girls' grantees' core programs contribute to the achievement of the United Nations' Sustainable Development Goals 4 and 5 directly, and 7 other SDGs indirectly but conclusively. Reduction in grant making in 2020 and 2021 due to the pandemic has meant that Educate Girls has significant restricted net assets on its statement of financial position. Grantees require additional time to draw down these committed grants, a situation our own donors are aware of and support. Educate Girls has put plans in place to utilize its restricted net assets towards planned program activities in the coming years. A significant majority of the restricted funds are fully committed to program expenditure for the Audacious Project, to ensure project goals are ultimately and fully achieved in terms of enrolling 1.56 million girls into school in rural communities in India and improving learning for 950,000 children. Educate Girls is working for the next fiscal year in implementing plans to increase fundraising and to source new donors following the Audacious Project. Pt VI, Line 11b: The Form 990 is submitted to the Board and they are given the opportunity to review the 990 and ask questions prior to submission. Pt VI, Line 15a: President and Founder compensation is reviewed by the board of directors and includes benchmarking and review. Pt VI, Line 15b: Key employee compensation is also reviewed by the board of directors and includes benchmarking and review. Pt VI, Line 19: The organisation makes its governing documents, conflict of

Schedule O (Form 990) 2022	Page . Employer identification number
Name of the organization	
EDUCATE GIRLS	46-4493359
interest policy and financial statements av	ailable to the public upon request

Form <b>8879-TE</b>	IRS e-file Signature Authorization	OMB No. 1545-0047
	<b>for a Tax Exempt Entity</b> For calendar year 2022, or fiscal year beginning Apr 1 , 2022, and ending Mar 31, 2023	
Department of the Treasury Internal Revenue Service	Do not send to the IRS. Keep for your records. Go to <i>www.irs.gov/Form</i> 8879TE for the latest information.	2022
Name of filer	EIN or SSN	_
EDUCATE GIRLS	46-4493359	
Name and title of officer or	person subject to tax	
	, FOUNDER & PRESIDENT	
Part I Type of	Return and Return Information	
8038-CP and Form 53 3a, 4a, 5a, 6a, 7a, 8a, 3b, 4b, 5b, 6b, 7b, 8b, applicable line below. I 1a Form 990 chec 2a Form 990-EZ c 3a Form 1120-POL 4a Form 990-PF c 5a Form 8868 che 6a Form 990-T ch 7a Form 4720 che 8a Form 5227 che 9a Form 5330 che 10a Form 8038-CP c Part II Declara Under penalties of perj of entity) 2022 electronic return complete. I further dec intermediate service pr acknowledgement of r the date of any refund. (direct debit) entry to th	tion and Signature Authorization of Officer or Person Subject to Tax ury, I declare that I am an officer of the above entity or I am a person subject to tax wi , (EIN) and that I have examples and accompanying schedules and statements, and, to the best of my knowledge and belief, the lare that the amount in Part I above is the amount shown on the copy of the electronic return. I de- rovider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to rece ecceipt or reason for rejection of the transmission, (b) the reason for any delay in processing the m If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an elect the financial institution account indicated in the tax preparation software for payment of the federation.	a the box on line 1a, 2a.         a, then leave line 1b, 2b.         rn, then enter -0- on the         1b       11,520,065.         2b
1-888-353-4537 no lat processing of the elect	al institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Trea er than 2 business days prior to the payment (settlement) date. I also authorize the financial insti- cronic payment of taxes to receive confidential information necessary to answer inquiries and res lected a personal identification number (PIN) as my signature for the electronic return and, if app rawal.	tutions involved in the solve issues related to
PIN: check one box o		7
I authorize	ERO firm name	as my signature
	ERO TIM name Enter five numbers, I do not enter all zeros	
agency(ies) regul	2022 electronically filed return. If I have indicated within this return that a copy of the return is ating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO re consent screen.	being filed with a state
filed return. If I ha	person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax ave indicated within this return that a copy of the return is being filed with a state agency(ies) reg tate program, I will enter my PIN on the return's disclosure consent screen.	
Signature of officer or perso	on subject to tax Date 10/31/	2023
Part III Certific	ation and Authentication	
	r your six-digit electronic filing identification d by your five-digit self-selected PIN. Do not enter all zeros	]
	numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated urn in accordance with the requirements of <b>Pub. 4163</b> , Modernized e-File (MeF) Information f Returns.	
ERO's signature	Date <u>11/10/2023</u>	
	EDO Must Datain This Forms - Oct Instructions	
	ERO Must Retain This Form — See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So	
For Privacy Act and Pa	perwork Reduction Act Notice, see back of form. REV 05/17/23 PRO	Form <b>8879-TE</b> (2022

## EDUCATE GIRLS

#### 46-4493359

# Additional Information From 2022 Federal Exempt Tax Return

# Form 990: Return of Organization Exempt from Income Tax

Line 4b Expenses	Itemization Statement		
Description	Amount		
CONTRACTUAL SERVICES	267,099.		
PROGRAM MANAGEMENT SOFTWARE	167,078.		
Total	434,177.		

# Form 990: Return of Organization Exempt from Income Tax Line 4c Expenses

Description	Amount
COMPENSATION	245,975.
PAYROLL TAXES	14,463.
MANAGEMENT FEES	63,552.
TRAVEL	47,833.
Total	371,823.

Itemization Statement