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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

A	For the	2023 calend	dar year, or tax year beginning	Apr 1 , <b>2023, and</b> e	nding	Maı	r 31	, <b>20</b> 24	
В	Check if	applicable:	C Name of organization EDUCAT	E GIRLS			D Emplo	oyer identification number	
	Address	change	Doing business as				46-44	493359	
	Name ch	nange	Number and street (or P.O. box if	mail is not delivered to street address)	Roon	n/suite	<b>E</b> Teleph	none number	
	Initial ret	ial return 7026 GROTON ST (718)544-2772							
	Final retu	rn/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code					
	Amende	d return	FOREST HILLS , NY	11375			<b>G</b> Gross	receipts \$10,425,030.	
	Applicati	on pending	F Name and address of principal off	icer:		H(a) Is this a grou	ıp return fo	or subordinates?  Yes  No	
			SAFEENA HUSAIN, A18101 GARDEN	ESTATES, GOREGAON WEST, MUMBAI 40009	97, IN,	H(b) Are all sub	oordinat	es included?  Yes No	
<u> </u>	Tax-exe	npt status:	<b>X</b> 501(c)(3)	) (insert no.) 4947(a)(1) or	527	If "No," at	tach a li	st. See instructions.	
J	Website	: www.e	ducategirls.us			H(c) Group exe	emption	number	
K	Form of o	organization: 🛚	Corporation Trust Associa	tion Other L Year of	formation	n: 2013	M State	of legal domicile: NY	
Р	art I	Summa	ry						
	1	Briefly des	cribe the organization's miss	ion or most significant activities: Educa	ate Girls prom	notes and protects the	right of g	irls to a quality education and works by	
ce		supporti	ng partners in geograp	phies where the need is great	atest	to mobili	ze co	mmunities, enroll	
nan				mes. Our vision is that every girl is in					
ver	2	Check this	box if the organization d	iscontinued its operations or dispos	ed of m	ore than 259	% of it	s net assets.	
ဗိ	3		_	rning body (Part VI, line 1a)			3	6	
•ඊ ග	4			s of the governing body (Part VI, line	-		4	6	
iţie	5			n calendar year 2023 (Part V, line 2a	-		5	3	
Activities & Governance	6		· · · · · · · · · · · · · · · · · · ·	necessary)			6	0	
ď	7a			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 Year		Current Year	
ne	8			1h)		10,912,0	066.	9,545,426.	
Revenue	9		ervice revenue (Part VIII, line		_				
Re	10			), lines 3, 4, and 7d)		607,9	999.	879,604.	
	11			es 5, 6d, 8c, 9c, 10c, and 11e)					
_	12	•		nust equal Part VIII, column (A), line 1		11,520,0		10,425,030.	
	13			X, column (A), lines 1–3)		28,009,0	038.	27,888,650.	
	14	-	-	(, column (A), line 4)		205	- 4 -	T.C.2. 201	
Expenses	15			penefits (Part IX, column (A), lines 5-1	0)	325,!		763,321.	
ens	16a			olumn (A), line 11e)	, <u> </u>		499.		
Ä	17		raising expenses (Part IX, col enses (Part IX, column (A), lin			766	070	1 277 550	
	18			es 11a-11d, 11f-24e)		766,8		1,377,558.	
	19		•	8 from line 12	•	29,102,9 -17,582,8		30,029,529.	
_ s		Tievenue ie	sa expenses. Oubtract line 1	0 110111 11116 12		ginning of Curre		End of Year	
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)		100	46,229,		43,774,437.	
Asse	21		'' (D L)( I' 00)		. –	21,115,		37,244,964.	
Net Ser	22		or fund balances. Subtract I		. –	25,114,		6,529,473.	
_	art II		re Block		•			0,020,1101	
				return, including accompanying schedules and	d stateme	ents. and to the	best of	mv knowledge and belief. it is	
tru	ie, correct	, and complete	e. Declaration of preparer (other than	officer) is based on all information of which p	reparer ha	as any knowledg	ge.		
						10/	23/2	1024	
Sig	gn	Signature of	officer			Date			
He	ere	SAFI	EENA HUSAIN, FOUNDER	R & PRESIDENT					
			name and title	<del>-</del>					
D-	id.	Print/Type	preparer's name	Preparer's signature	Date		Check	if PTIN	
Pa		Suneil	. Kalantry, CPA		11/		self-emp	<u> </u>	
	epare	L Lives's see	ne Kalantry LLP			Firm's	EIN :	27-2877276	
US	se Onl	Firm's add		reet, Forest Hills, NY 1	1375	Phone		18)544-2772	
Ma	v the IF	RS discuss t		shown above? See instructions		'		X Yes No	

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 promotes and protects the right of girls to a quality education and works by supporting partners in geographies where the need is greatest to mobilize communities, enroll
	girls into school and improve learning outcomes. Our vision is that every girl is in school, learning and completes 12 years of education.
	girls into school and improve learning outcomes. Our vision is that every girl is in school, learning and completes iz years of education.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
4	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others.
	the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
	/O
4a	(Code:) (Expenses \$ 27,888,650. including grants of \$ 27,888,650. ) (Revenue \$
	Educate Girls awards grants to proximate non-profit partners in India to engage in programmatic
	activities in support of the mission to ensure that girls are in school and learning well. In the past
	year, grants were awarded to local non-profit partners working in multiple states, including
	Rajasthan, Madhya Pradesh, Uttar Pradesh, Haryana, and Bihar. The Educate Girls investment
	includes multi-year grant awards as a long-term commitment and investment in the villages in
	which our partners work and acknowledges the commitment to girls' education as an ongoing
	responsibility to each girl once we make an investment in the village. Programs supported were
	focused on identification of out-of-school girls, enrollment, retention, and learning outcomes of
	vulnerable girls from remote villages into government schools for primary through secondary
	See Part III, Ln 4a statement
4b	(Code: ) (Expenses \$ 1,053,401. including grants of \$ 0.) (Revenue \$ 0.)
40	
	Educate Girls invests in technical advising and capacity building of grantee partners in the areas
	of data analytics, performance management systems, strategy, and program management
	software. Our partners use the performance management systems to enhance their ability to
	collect and track data, resulting in improved data collection and robust metrics. These
	investments are central to the Educate Girls' core philosophy of engaging in proximate grant-
	making in order to build and strengthen the ability of local non-profit organizations to deliver the
	Educate Girls model in their districts while ensuring effectiveness, efficiency, and sustainability.
4c	(Code:) (Expenses \$ 404,293. including grants of \$ 0.) (Revenue \$0.)
	Educate Girls invests in global strategic engagement to amplify the issue of girls' education
	and provide thought leadership to share our impact, promote locally-based and outcomes-driven
	grantmaking, and participate in conferences with global leaders. Through our strategic
	engagement, Educate Girls shines a light on the issue of girls' education and the importance of
	local leadership to change mindsets and societal norms in order to ensure that girls are in
	school and learning well.
	bonool and rearning well.
4 -1	Other program continue (Deceribe on Cahadula C)
40	Other program services (Describe on Schedule O.)
4	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 29,346,344.

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "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? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	-		
_	complete Schedule D, Part III	8		×
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, VIII, IX, or X, as applicable.	10		^
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	×	
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
b	Schedule D, Parts XI and XII	12a	×	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	×	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		×	
16	for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	×	
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		×

Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	23 24a	×	×
	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		
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		×
26	If "Yes," complete Schedule L, Part I	25b 26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
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? If "Yes," complete Schedule L, Part IV	28a		×
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b 28c		×
29 30	Did the organization receive more than \$25,000 in noncash 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>	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		×
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</i> "Yes," complete Schedule R, Part 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 $512(b)(13)$ ? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35a 35b		×
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations 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	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

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 3			
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			
_	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		<u>×</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>×</u> _
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	70		V
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
·	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources	-		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C 1/10	Enter the amount of reserves on hand	140		V
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14a 14b		<u>×</u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		
	excess parachute payment(s) during the year?	15		
	If "Yes," see the instructions and file Form 4720, Schedule N.	13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Part	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			
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		Yes	No
b 2	Enter the number of voting members included on line 1a, above, who are independent . 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 5 6	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 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?	7b		×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	×	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	×	
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No ×
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	×	
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	×	
c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12b 12c	×	×
13	Did the organization have a written whistleblower policy?	13	×	
14 15	Did the organization have a written document retention and destruction policy?	14	×	
a b	The organization's CEO, Executive Director, or top management official	15a 15b	×	
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
b	with a taxable entity during the year?	16a		×
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed NY  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.	Γ (sec	tion 5	501(c)
19	☑ Own website ☐ Another's website ☑ Upon request ☐ Other <i>(explain on Schedule O)</i> Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or and financial statements available to the public during the tax year.	f inter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and reckALANTRY LLP, 7026 GROTON STREET, FOREST HILLS, NY 11375 (718)544-2772	cords.	,	

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

#### 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 no	r any relate	d org	aniz	zatic	n c	ompe	ensa	ated any current	officer, director,	or trustee.
(A) Name and title	(B) Average	box,	unles	Pos heck ss pe	erson	e than o	n an	(D)  Reportable compensation	(E) Reportable compensation	(F) Estimated amount 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	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) SAFEENA HUSAIN	40.00	4								
FOUNDER & PRESIDENT		×		×				341,470.	0.	0.
(2) PHYLLIS K COSTANZA BOARD CHAIR	0.00	×						0.	0.	0.
(3) GAURAV GUPTA	0.00	4								
BOARD MEMBER		×						0.	0.	0.
(4) DR NEIL B SHAH BOARD MEMBER	0.00	×						0.	0.	0.
(5) INDRANI GORADIA BOARD MEMBER	0.00	×						0.	0.	0.
(6) MICHAEL POLLACK TREASURER (OFFICER)	0.00	×						0.	0.	0.
(7) CARRIE BERNIER EXECUTIVE DIRECTOR (KEY EMPLOYEE)	40.00				×			182,852.	0.	0.
(8)										
(9)										
(10)										
(11)										
(12)		-								
(13)										
(14)										

Part	(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	(do n box, office or direct	ot ch	Pos neck ss pe	ition more	e than of the is or/trus Highest compensated	one n an	(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensatic from related organizations (1099-MISC	(E) Reportable Escompensation from related ganizations (W-2/1099-MISC/ o		f) d amount ther nsation the tition and ganizations
(15)							8						
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Subtotal			L		L			524,322.		0.		0.
C	Total from continuation sheets to Part								F04 200				
d	<b>Total (add lines 1b and 1c)</b>								524,322. Tho received mor	 e than \$100,	0.00	of	0.
	reportable compensation from the organi						2						
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete S</i> For any individual listed on line 1a, is the	Schedule J sum of rep	<i>for รเ</i> portal	<i>uch</i> ble	<i>indi</i> com	i <i>vidu</i> nper	<i>ual</i> nsatio	n a		nsation from	the	3	/es No
	organization and related organizations individual	greater that	an \$1 	150,	000	)? <i>I</i> :	f "Ye	s," ·	complete Sched	dule J for s	uch	4	×
5	Did any person listed on line 1a receive of for services rendered to the organization?									tion or indivi		5	×
	on B. Independent Contractors												<u> </u>
1	Complete this table for your five high compensation from the organization. Repo												
	<b>(A)</b> Name and business add	ress							(B) Description of sen	vices	(	<b>(C)</b> Compensat	ion
2	Total number of independent contractor received more than \$100,000 of compens						ed to	th	ose listed abov	e) who			

# Part VIII Statement of Revenue Check if Schedule O contain

rait	VIII.	Check if Schedule O contains a resp	onse or note to ar	ny line in this Pa	art VIII		$\sqcap$
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1	la				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1	lb				
, Gr	С	Fundraising events	Ic				
fts, ır A	d	Related organizations	ld				
nila	е	3	le	-			
Sir	f	All other contributions, gifts, grants,					
utic			<b>If</b> 9,545,426.	_			
rib Ot	g	Noncash contributions included in					
ont		, <del></del>	lg \$				
<u>o</u>	h	Total. Add lines 1a–1f		9,545,426.			
Ф	0-		Business Code				
Program Service Revenue	2a						
gram Ser Revenue	b						
m ver	c d						
gra Re	e						
ro	f	All other program service revenue .					
_	g	<b>Total.</b> Add lines 2a–2f					
	3	Investment income (including divide	nds, interest, and				
		other similar amounts)		890,463.	0.	0.	890,463.
	4	Income from investment of tax-exempt	bond proceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents 6a		_			
	b	Less: rental expenses 6b		-			
	С	Rental income or (loss) 6c					
	d						
	7a	Gross amount from (i) Securities	(ii) Other	-			
		sales of assets other than inventory 7a	10.050				
4	h	other than inventory 7a  Less: cost or other basis	-10,859.	-			
evenue	D	and sales expenses . 7b					
) Ve	С	Gain or (loss) 7c	-10,859.	-			
Œ	d	Net gain or (loss)		-10,859.	0.	0.	-10,859.
Other		Gross income from fundraising		107035.	0.	0.	10,037.
ō	ou	events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18	Ва				
			Bb				
		Net income or (loss) from fundraising	events				
	9a	Gross income from gaming					
		<u> </u>	9a	_			
		•	9b				
		Net income or (loss) from gaming activ	vities				
	ıva	Gross sales of inventory, less returns and allowances 1	00				
	<b>L</b>	<u></u>	0a	-			
	b	Less: cost of goods sold <u>1</u> Net income or (loss) from sales of inve	0b				
(0		Tree modifie of (1033) from sales of file	Business Code				
ous	11a						
Miscellaneous Revenue	b						
ella	c						
isc Re	d	All other revenue					
Σ	е	Total. Add lines 11a-11d					
	12	Total revenue. See instructions .		10,425,030.	0.	0.	879,604.

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising Do not include amounts reported on lines 6b. 7b. (A) Total expenses (B) Program service Management and 8b. 9b. and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 27,888,650. 27,888,650. Benefits paid to or for members . . . . 5 Compensation of current officers, directors, trustees, and key employees . . . . . 714,807. 314,515. 142,961. 257,331. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits . . . . . . 9 10 48,514. 21,346. 9,703. 17,465. Fees for services (nonemployees): 11 Management . . . . . . . . . . 0. Legal . . . . . . . . . . . . . . . . 8,129. 0. 8,129. Accounting . . . . . . . . . . . . 19,200. 0. 19,200. 0. Lobbying . . . . . . . . . Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) 999,524. 88,757. 1,139,965. 51,684. 12 Advertising and promotion . . . . . 45,379. 45,379. 13 Office expenses . . . . . . . . 14 Information technology . . . . . . 53,877. 53,877. 0. 0. 15 16 93,732. 68,432. 14,019. 11,281. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 21 Payments to affiliates . . . . . . . 22 Depreciation, depletion, and amortization . 23 4,825. 0. 4,825. 0. Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a BANK CHARGES 0. 1,180. 0. 1,180. MISCELLANEOUS 15. 0. 15. 0. STATE ANNUAL FILING FEE 0. 775. 0. 775. TELEPHONE, TELECOMMUNICATION 561. 0. 561. 0. e All other expenses 9,920. 0. 9,730. 190. 30,029,529. 29,346,344. 25 **Total functional expenses.** Add lines 1 through 24e 262,782. 420,403. 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)

Form **990** (2023)

Part X Balance Sheet
Check if Schedule O contain

		Check if Schedule O contains a response or note to any line in this Pa	rt X		🗆
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	16,996,897.	1	7,914,191.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	150,000.	3	
	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	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	6,844.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D   10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	29,082,387.	12	35,853,402.
	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)	46,229,284.	16	43,774,437.
	17	Accounts payable and accrued expenses	122,829.	17	992.
	18	Grants payable	20,983,210.	18	37,156,546.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
S	22	Loans and other payables to any current or former officer, director,			
litie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Ľį	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	9,061.	25	87,426.
	26	Total liabilities. Add lines 17 through 25	21,115,100.	26	37,244,964.
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
llar	27	Net assets without donor restrictions	15,833,527.	27	-744,715.
Ba	28	Net assets with donor restrictions	9,280,657.	28	7,274,188.
pun		Organizations that do not follow FASB ASC 958, check here	372007037.		,,2,1,100.
r F		and complete lines 29 through 33.			
S O	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds .		31	
et	32	Total net assets or fund balances	25,114,184.	32	6,529,473.
Z	33	Total liabilities and net assets/fund balances	46,229,284.	33	43,774,437.

Page **12** Form 990 (2023)

	()				90
Part	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,4		
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,0		
3	Revenue less expenses. Subtract line 2 from line 1	3	-19,6		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	25,1	14,1	84.
5	Net unrealized gains (losses) on investments	5	1,0	19,7	88.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	6,5	29,4	73.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," exp	olain	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 comp	oiled	or		
	reviewed on a separate basis, consolidated basis, or both.				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	а		
	separate basis, consolidated basis, or both.				
	▼ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	sight	of		
	the audit, review, or compilation of its financial statements and selection of an independent accountant			<sub>×</sub>	
	If the organization changed either its oversight process or selection process during the tax year, exp	olain (	on		
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fort	h in t	he		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo t	he		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au				
	DEV OF JODGA DDO		For	ູ ໑໑ຐ	(0000)

REV 05/09/24 PRO Form **990** (2023) EDUCATE GIRLS 46-4493359 1

## Additional Information From Form 990: Return of Organization Exempt from Income Tax

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4a (continued)

future sustainability.

**Continuation Statement** 

Description
The total grant expenses include a planned drawdown of multi-year commitments
to the villages in which we currently operate programs to fulfill the goals of the
Audacious Project with a responsibility to maintain presence in a village for 3-5
years to ensure saturation and mindset shift/behavioral change has occurred for

# SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

**Employer identification number** Name of the organization EDUCATE GIRLS 46-4493359 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (v) Amount of monetary (vi) Amount of (i) Name of supported organization (ii) EIN (iv) Is the organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total** 

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 8,497,453. 11,261,399. 14,105,107. 10,762,066. 9,945,426. 54,571,451. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge . . . . **Total.** Add lines 1 through 3 4 8,497,453. 11,261,399. 14,105,107. 10,762,066. 9,945,426. 54,571,451. 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) . . . . 26,899,001. **Public support.** Subtract line 5 from line 4 27,672,450. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 8,497,453. 11,261,399. 14,105,107. 10,762,066. 9,945,426. 54,571,451. Amounts from line 4 . . . . . . Gross income from interest, dividends, 8 payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . 198,568. 21,443. 890,462. 1,655,638. 24,000. 521,165. Net income from unrelated business 9 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.) . . . . . . . **Total support.** Add lines 7 through 10 11 56,227,089. Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) . . . . . 49.22% 14 Public support percentage from 2022 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 

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

#### 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)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
~	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support		ı	T	1	1	
	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	<b>(e)</b> 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar sources						
h	•						
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	Total support. (Add lines 9, 10c, 11,	<u> </u>					
	and 12.)						
14	First 5 years. If the Form 990 is for the	•			-		
Soct:	organization, check this box and stop he on C. Computation of Public Suppor						
	Public support percentage for 2023 (line 8			12 column (fl)		15	%
15 16	Public support percentage for 2023 (line of 2023 Support percentage from 2022 Sch	, , , , , , , , , , , , , , , , , , , ,	•	, ,,,		16	
16 Secti	on D. Computation of Investment In					10	70
17	Investment income percentage for 2023 (			ov line 13. colu	ımn (f))	17	%
18	Investment income percentage from 2022 (		* * *	-		18	
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2023. If the organ						
134	17 is not more than 331/3%, check this box						
b	331/3% support tests—2022. If the organiz		_	-		_	_
~	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	_	_	· ·	· · · · · · · · · · · · · · · · · · ·		_

#### 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

ecu	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by		res	NO
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
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).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
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 <b>Part VI</b> .	9b		
С	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 <b>Part VI</b> .	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to			

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)			ı
			Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons?  A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
a	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	110		
	provide detail in <b>Part VI</b> .	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations		<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
a b c	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity</li> </ul>	(see ir	nstruci	tions).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b> those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below</i> .  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? <i>If "Yes" or "No," provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	$\Box$ Check here if the organization satisfied the Integral Part Test as a qualifying	tru	st on Nov. 20, 1970 ( <i>explai</i>	n in <b>Part VI</b> ). <b>See</b>
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Section	ns A through E.
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<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	ion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional (see instructions).	ally i	integrated Type III supporti	ng organization

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

Excess from 2023 . . .

Schedule A (Form 990) 2023 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	f the or	ganization		Employer identification number
		GIRLS		46-4493359
Par	t I	Organizations Maintaining Donor Advi Complete if the organization answered "		ds or Accounts
		, , , , , , , , , , , , , , , , , , ,	(a) Donor advised funds	(b) Funds and other accounts
1	Total	number at end of year		
2		egate value of contributions to (during year) .		
3		egate value of grants from (during year)		
4		egate value at end of year		
5	Did tl	he organization inform all donors and donor as are the organization's property, subject to the	•	
6	only f	he organization inform all grantees, donors, ar for charitable purposes and not for the benefitering impermissible private benefit?	t of the donor or donor advisor, or fo	t funds can be used r any other purpose
Part		Conservation Easements		
		Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpo	ose(s) of conservation easements held by the c		
	-	eservation of land for public use (for example, recre	- · · · · · · · · · · · · · · · · · · ·	f a historically important land area
	☐ Pr	otection of natural habitat	•	f a certified historic structure
2		reservation of open space	d a qualified concentration contribution	o in the form of a concernation
2		plete lines 2a through 2d if the organization hel	d a quaimed conservation contribution	
		ment on the last day of the tax year.		Held at the End of the Tax Year
а				
b		acreage restricted by conservation easements		<del></del>
c		per of conservation easements on a certified hi		
d		per of conservation easements included on line		
		historic structure listed in the National Register		
3	Numb tax ye	oer of conservation easements modified, trans ear	ferred, released, extinguished, or tern	ninated by the organization during the
4 5	Does	per of states where property subject to consen- the organization have a written policy reg- ions, and enforcement of the conservation eas	arding the periodic monitoring, insp	
6	Staff a	and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	g conservation easements during the year
7	Amou	ant of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing	conservation easements during the year
8		each conservation easement reported on line section 170(h)(4)(B)(ii)?		
9	In Par	rt XIII, describe how the organization reports controls, and include, if applicable, the text of the foot nization's accounting for conservation easemen	onservation easements in its revenue a note to the organization's financial sta nts.	and expense statement and balance tements that describes the
Part	Ш	Organizations Maintaining Collections Complete if the organization answered "		Other Similar Assets
1a	of art	organization elected, as permitted under FAS t, historical treasures, or other similar assets be, provide in Part XIII the text of the footnote t	held for public exhibition, education	, or research in furtherance of public
h		•		
	art, h	organization elected, as permitted under FAS istorical treasures, or other similar assets held de the following amounts relating to these item	for public exhibition, education, or res	search in furtherance of public service
	(i) Re	evenue included on Form 990, Part VIII, line 1		\$
	(ii) As	ssets included in Form 990, Part X		\$
	follow	evenue included on Form 990, Part VIII, line 1 seets included in Form 990, Part X e organization received or held works of art, wing amounts required to be reported under FA	ASB ASC 958 relating to these items.	
a b	Reve	nue included on Form 990, Part VIII, line 1 .ts included in Form 990, Part X		\$ \$

Part	Organizations Maintaining Co	llections of A	Art, His	torical T	reasures,	or Ot	her Similar Ass	sets (cont	inued)
3	Using the organization's acquisition, acceleration items (check all that apply).	ession, and oth	ner recoi	ds, chec	k any of the	follow	ring that make si	gnificant u	se of its
а	☐ Public exhibition		d	Loan (	or exchange	progra	am		
b	☐ Scholarly research		е						
С	☐ Preservation for future generations								
4	Provide a description of the organization's XIII.	s collections a	nd expla	ain how th	hey further t	he org	anization's exem	pt purpose	e in Part
5	During the year, did the organization solid assets to be sold to raise funds rather than							r □ Yes	☐ No
Part	V Escrow and Custodial Arrange	ements							
	Complete if the organization and 990, Part X, line 21.						•		orm
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?							t □ Yes	☐ No
b	If "Yes," explain the arrangement in Part X	(III and comple	te the fo	llowing ta	able.	_			
							Ar	nount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount or	า Form 990, Pa	ırt X, line	21, for e	scrow or cus	stodial	account liability	? 🗌 Yes	☐ No
	If "Yes," explain the arrangement in Part X	(III. Check here	if the ex	xplanation	n has been p	rovide	ed in Part XIII .		
Par									
	Complete if the organization ans	swered "Yes"	on For	m 990, F					
	(a	a) Current year	<b>(b)</b> Pri	or year	(c) Two years	back	(d) Three years back	(e) Four ye	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 the c	current year end	d balanc	e (line 1g	, column (a))	held a	as:		
а	Board designated or quasi-endowment	9/		, ,					
b	· ·								
С	Term endowment %								
	The percentages on lines 2a, 2b, and 2c s	should equal 10	00%.						
3a	Are there endowment funds not in the po	•		zation tha	at are held a	nd adı	ministered for the	Э	
	organization by:		Ū						es No
	(i) Unrelated organizations?							3a(i)	
	(ii) Related organizations?							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ							3b	
4	Describe in Part XIII the intended uses of t		-						
Part									
	Complete if the organization and		on For	m 990. F	Part IV. line	11a. S	See Form 990.	Part X. lin	e 10.
	Description of property	(a) Cost or oth			or other basis		Accumulated	(d) Book v	
	2000p.100. p. opo)	(investme		, ,	ther)		preciation	(4) 200	4.40
	Land	+							
b	Buildings								
c	Leasehold improvements								
d	Equipment								
e	Other								
	Add lines 1a through 1e (Column (d) must		00 Part	∖ K line 10a	c column (R	))			

Part VII	Investments – Other Securities Complete if the organization answered "Yes" on For	rm 000 Part IV lin	o 11h Soo Form	990 Part V line 12
	(a) Description of security or category	(b) Book value		nod of valuation:
	(including name of security)	(b) Book value		of-year market value
(1) Financial	derivatives			
(2) Closely h	eld equity interests			
(3) Other US	TREASURY BONDS	35,853,402.	FMV	
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, line 12, col. (B))	35,853,402.		
Part VIII	Investments—Program Related	rm 000 Dart IV lin	o 11a Coo Form	000 Port V line 12
	Complete if the organization answered "Yes" on For			
	(a) Description of investment	(b) Book value		nod of valuation: -of-year market value
(4)				. ,
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colui	mn (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes" on For	rm 990, Part IV, Iir	e 11d. See Form	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities	<u> </u>		
rartx	Complete if the organization answered "Yes" on For	rm 990 Part IV lin	e 11e or 11f See	Form 990 Part X
	line 25.	iiii 000, i diciv, iii	10 110 01 111. 000	71 01111 000, 1 art 71,
1.	(a) Description of liability			(b) Book value
(1) Federal in				(4) = 1011 101111
	L TAXES PAYABLE			17,974.
(3) WAGES				53,679.
	CONTRIBUTION PAYABLE			15,773.
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 25, col. (B))			87,426.
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footn	ote to the organizatio		nts that reports the
organization's	s liability for uncertain tax positions under FASB ASC 740. Checl	k here if the text of the	e footnote has been	provided in Part XIII .

Part			-	Retur	n
	Complete if the organization answered "Yes" on Form 990, F	Part I	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	11,444,818.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	1,019,788.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,019,788.
3	Subtract line <b>2e</b> from line <b>1</b>			3	10,425,030.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	10,425,030.
Part				er Ret	urn
	Complete if the organization answered "Yes" on Form 990, F				
1	Total expenses and losses per audited financial statements			1	30,029,529.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	30,029,529.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	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	30,029,529.
5 Part	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII</b> Supplemental Information	e 18.)	<u> </u>	1 - 1	
<b>5 Part</b> Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e <i>18.)</i> d 4; P		o; Part \	V, line 4; Part X, line
<b>5 Part</b> Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII</b> Supplemental Information	e <i>18.)</i> d 4; P		o; Part \	V, line 4; Part X, line
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<b>5 Part</b> Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e <i>18.)</i> d 4; P		o; Part \	V, line 4; Part X, line
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BAA

Schedule D (Fo	rm 990) 2023	Page \$
Part XIII	Supplemental Information (continued)	,

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

### **Statement of Activities Outside the United States**

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

**Employer identification number** 

EDUC	CATE GIRLS				46-4493	3359
Par	General Information Form 990, Part IV, line		ies Outside	the United States. Com	nplete if the organization a	nswered "Yes" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistance.	es' eligibility	for the grant		selection criteria used to	⊠ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorin	ng the use of its grants and	d 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  (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total						
	(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
(1) (	South Asia	1	2	Program Services	Education Programs	27,889,000.
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal	1	2			27,889,000.
b	Total from continuation					
~	sheets to Part I					
С	Totals (add lines 3a and 3b)	1	2			27,889,000.

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			South Asia	Education Programs	9,500,000.	Wire Transfer			
(2)			South Asia	Education Programs	15,392,220.	GRANT PAYABLE			
(3)			South Asia	Education Programs	941,755.	Wire Transfer			
(4)			South Asia	Education Programs	1,690,907.	Wire Transfer			
(5)			South Asia	Education Programs	252,397.	Wire Transfer			
(6)			South Asia	Education Programs	51,215.	Wire Transfer			
(7)			South Asia	Education Programs	60,506.	Wire Transfer			
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

Schedule F (Form 990) 2023

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
(18)						

### Part IV Foreign Forms

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

#### Part V Supplemental Information

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

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. Our staff provide grant oversight and financial management with the
completion of a monthly programmatic and financial expenditure report, a quarterly
fund utilization certificate, and tracking of the grant budget. External evaluators
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.

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

Compensation Information

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

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

Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Inspection Employer identification number

46-4493359

Department of the Treasury Internal Revenue Service Name of the organization EDUCATE GIRLS

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any page listed on Farm 000 Part VIII Costian A line to with respect to the filling			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		×
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		×
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		×
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		×
b	Any related organization?	5b		×
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
а	The organization?	6a		×
b	Any related organization?	6b		×
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
-	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		×
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		×
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(i) Base (ii) Bonus & incentive (iii) Other other deferred benefits		benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990	
SAFEENA HUSAIN	(i)	296,737.	44,733.	0.	0.	0.	341,470.	0.
1 FOUNDER & PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
CARRIE BERNIER	(i)	173,378.	9,474.	0.	0.	0.	182,852.	0.
2 EXECUTIVE DIRECTOR (KEY EMPLOYEE)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
	(ii)							
	(i)				 			
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i) (;;)							
15	(ii)							
	(i)							
16	(ii)							

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

Schedule J (Form 990) 2023

Page 3

# SCHEDULE O (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

20**23** 

Employer identification number

46-4493359

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

EDUCATE GIRLS

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

Open to Public Inspection

Pt III, Line 3: The Organization has put plans in place to utilize its restricted
net assets with multi-year grant awards to grantee partners as a longer-term
investment in a village in order to ensure that girls are supported throughout
their educational journeys. Educate Girls' grantmaking has expanded with partners
in the states of Bihar and Rajasthan and has added 10 new grantees for a total
of 26 grantees in the portfolio. A significant majority of the funds are fully
committed to program expenditure for the final year of the Audacious Project,
Program Vidya, and Pragati. These projects aim to enroll approximately 1,560,000
girls into school in rural communities in India, improve learning outcomes for
950,000 children, and ensure a responsible exit strategy for our partner program
villages (operationalized in the past 3-5 years), including ongoing enrollment
and learning support for children. The new ten-year strategic plan includes
an ambitious goal of impacting 10 million learners over the next 10 years in
rural geographies with some of the most vulnerable and marginalized girls. The
plan includes delivery models: through local community-based organizations and,
by leveraging partnerships while unlocking resources.
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 organization makes its governing documents, conflict of
interest policy, and financial statements available to the public upon request.

#### **EORM 8879-TE**

#### **IRS E-file Signature Authorization** for a Tax Exempt Entity

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2023, or fiscal year beginning  $\mbox{Apr}\ 1$  , 2023, and ending  $\mbox{Mar}\ 31$  , 2024 Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

EIN or SSN Name of filer 46-4493359 EDUCATE GIRLS Name and title of officer or person subject to tax SAFEENA HUSAIN, FOUNDER & PRESIDENT Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I. 1a Form 990 check here . . . X **b Total revenue**. if any (Form 990, Part VIII, column (A), line 12) . . . 10,425,030. Form 990-EZ check here . . . **b Total revenue**, if any (Form 990-EZ, line 9) . . . . . . . . 2b 3a Form 1120-POL check here . . **b Total tax** (Form 1120-POL, line 22) . . . . . . . . . . Form 990-PF check here . . . **b** Tax based on investment income (Form 990-PF, Part V, line 5) . 4a 4b **b Balance due** (Form 8868, line 3c) . . . . . . . . . . . . **Form 8868** check here . . . . 5b 6a Form 990-T check here . . . **b Total tax** (Form 990-T, Part III, line 4) . . . . . . . . . . . . Form 4720 check here . . . **b Total tax** (Form 4720, Part III, line 1) . . . . . . . . . . . 7a 7b Form 5227 check here . . . . **b FMV** of assets at end of tax year (Form 5227, Item D) . . . . **Form 5330** check here . . . □ **b Tax due** (Form 5330, Part II, line 19) . . . . . . . . . . . 9h 9a 10a Form 8038-CP check here . . **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) Declaration and Signature Authorization of Officer or Person Subject to Tax Part II Under penalties of perjury, I declare that 🗵 I am an officer of the above entity or 🗌 I am a person subject to tax with respect to (name of entity) , (EIN) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only ☐ I authorize to enter my PIN as my signature **ERO** firm name Enter five numbers, but on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. 🖾 As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 10/23/2024 Signature of officer or person subject to tax **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 9 1 5 2 4 9 3 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. Date 11/22/2024 ERO's signature ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

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# Additional Information From 2023 Federal Exempt Tax Return

# Form 990: Return of Organization Exempt from Income Tax

# Line 4b Expenses

### **Itemization Statement**

Description	Amount
CONTRACTUAL SERVICES	999,524.
PROGRAM MANAGEMENT SOFTWARE	53,877.
Total	1,053,401.

### Form 990: Return of Organization Exempt from Income Tax

# Line 4c Expenses

#### **Itemization Statement**

Description	Amount
COMPENSATION	314,515.
PAYROLL TAXES	21,346.
TRAVEL	68,432.
Total	404,293.